

The **performance measurement and management system** consists of a Performance outcomes Plan for each program component (Adult development, Vocational, Preschool, Waiver, Therapy, and Outreach), Business Functions/Financial, Human Resources, and Safety. Each program supervisor implements a method of data collection considering data integrity, reliability, validity, completeness, and accuracy. Each program director is responsible for training staff responsible for collecting data and ensuring accuracy of data by spot checking the records of persons served. The Director of Compliance will review methods of data collection chosen by each program director to assess reliability. Where feasible, Excel spreadsheets will be used to calculate data to be reported. The Executive Director will review outcomes reporting each quarter to double-check accuracy of any data that seem to be outside expectations. Typically, there is a multi-person review of all data collected. For example, one person enters the data, a different person reports the data from the data collection methods, and the program supervisor reviews the reports.

## Performance Outcomes Plan (2013/2014)

### Program Component: Lonoke Adult Development

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<p><b><u>Efficiency</u></b> Increase monthly attendance rate</p> <p>Increase enrollment.</p>	<p>Percentage of total attendance for month.</p> <p>Number of new admissions</p>	<p>All individuals receiving services</p> <p>New admissions</p>	<p>Monthly</p> <p>Quarterly</p>	<p>Attendance Record</p> <p>Enrollment records</p>	<p>Admin. Asst.</p> <p>Program director</p>	<p>88%</p> <p>1 new enrollee</p>	<p>1<sup>st</sup> quarter: 83%</p> <p>2<sup>nd</sup> quarter: 83%</p> <p>3<sup>rd</sup> quarter: 82%</p> <p>4<sup>th</sup> quarter: 82%</p> <p>1<sup>st</sup> quarter: 0</p> <p>2<sup>nd</sup> quarter: 100%</p> <p>3<sup>rd</sup> quarter: 0</p> <p>4<sup>th</sup> quarter: 100%</p>
<p><b><u>Effectiveness</u></b> Increase Participation of Full time consumers in health/ wellness &amp; or relationship classes.</p> <p>Clients will increase functional skills.</p>	<p>Percentage who participated in classes at least 2X per quarter</p> <p>Percentage who Mastered at least 4 objectives on treatment plan.</p>	<p>All individuals receiving services</p> <p>All individuals Receiving Services.</p>	<p>Quarterly</p> <p>Quarterly</p>	<p>Class list/ Calendar</p> <p>Quarterly Reports</p>	<p>Program Director</p>	<p>75%</p> <p>80%</p>	<p>1<sup>st</sup> quarter: 100%</p> <p>2<sup>nd</sup> quarter: 100%</p> <p>3<sup>rd</sup> quarter: 100%</p> <p>4<sup>th</sup> quarter: 100%</p> <p>1<sup>st</sup> quarter: 53%</p> <p>2<sup>nd</sup> quarter: 43%</p> <p>3<sup>rd</sup> quarter : 35%</p> <p>4<sup>th</sup> quarter: 26%</p>
<p><b><u>Satisfaction</u></b> Maximize satisfaction of all consumers.</p>	<p>Percentage of Individuals who express satisfaction with services</p>	<p>All individuals</p>	<p>Quarterly</p>	<p>Quarterly Satisfaction Survey</p>	<p>Program Director</p>	<p>80%</p>	<p>1<sup>st</sup> quarter: 100%</p> <p>2<sup>nd</sup> quarter: 100%</p> <p>3<sup>rd</sup> quarter: 100%</p> <p>4<sup>th</sup> quarter: 100%</p>

<p><b><u>Access</u></b> Individual will begin services within 30 days of intake.</p>	<p>Individual getting services by 30th day.</p>	<p>All new admissions</p>	<p>Monthly</p>	<p>Enrollment Records</p>	<p>Program Director</p>	<p>90%</p>	<p>1<sup>st</sup> quarter: N/a 2<sup>nd</sup> quarter: 100% 3<sup>rd</sup> quarter : 0 4<sup>th</sup> quarter: 0%</p>
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Recommendations for Goals not achieved:

Revising criteria and the way objectives are measured and selected and implementation of Program Plan Plus should assist in meeting objectives.

Attendance incentives will be evaluated for more motivating rewards.

Our newest consumers are touring well in advance of planned enrollment. This has delayed in meeting the access goal. The official intake process should not begin until consumer is ready to initiate services.

## Performance Outcomes Plan (2013/2014)

### Program Component: Lonoke Adult Development Work Activity

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<p><b><u>Efficiency</u></b> Increase production rates for individuals in the program</p>	Increase production rates for individuals in the program .	All individuals receiving services	Quarterly	Payroll spread sheet	Director of Adult Dev.	75%	1 <sup>st</sup> quarter: -19.5% 2 <sup>nd</sup> quarter : -31.1% 3 <sup>rd</sup> quarter: -9.1% 4 <sup>th</sup> quarter: 78%
<p><b><u>Effectiveness</u></b> Increase number of job contracts available in the work center</p> <p>Obtain 3 or fewer deficiencies on outside safety reviews of facility.</p>	Obtain 1 new contract jobs during the year  Citing on yearly review	Full program  Productions buildings	Yearly  Yearly	Contracts  Report by insurance company	Program Director  Program Director	1 New contracts  3 or fewer deficiencies	1 <sup>st</sup> quarter: None 2 <sup>nd</sup> quarter: None 3 <sup>rd</sup> quarter : 0 4 <sup>th</sup> quarter: 0  1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 100%
<p><b><u>Satisfaction</u></b> Maximize job satisfaction of all consumers</p> <p>Maximize satisfaction of vendors/contractors</p>	Percentage of individuals who express satisfaction with services <b>Percentage of vendors/contractors who express satisfaction with work produced.</b>	All Individuals  All Vendors	Yearly  Yearly	Annual satisfaction survey  Annual satisfaction survey	Case manager  Program Director	90%  85%	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter : 100% 4 <sup>th</sup> quarter: 100%  1 <sup>st</sup> quarter: No data 2 <sup>nd</sup> quarter : No data 3 <sup>rd</sup> quarter : No data 4 <sup>th</sup> quarter: 100%

## Recommendations for Goals not achieved:

The first 3 quarters of year, the outcomes were measured by overall payroll vs. production rates of individuals. This quarter, each person was considered individually and production rates were measured by individual consumer. 78% of consumers showed improvement in their production rate.

## Performance Outcomes Plan

### Program Component: Lonoke Preschool

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<p><b><u>Efficiency</u></b>                      a. Increase monthly attendance rate to 85% of enrollment in attendance.                       b. Treatment RX will be sent to physician for approval within 2 days of programming conference.                      c. Conferences not held as scheduled will be rescheduled and held within 3 days.</p>	<p>Percentage of total attendance for month.</p> <p>Date prescription sent to physician.</p>	<p>All individuals receiving services</p> <p>All individuals receiving services</p>	Quarterly	Attendance Record	Program Coordinator	85%	1 <sup>st</sup> quarter: 84% 2 <sup>nd</sup> quarter: 84% 3 <sup>rd</sup> quarter: 83% 4 <sup>th</sup> quarter: 84%  1 <sup>st</sup> quarter: 96% 2 <sup>nd</sup> quarter: 91% 3 <sup>rd</sup> quarter: 95% 4 <sup>th</sup> quarter: 100%  1 <sup>st</sup> quarter: 97% 2 <sup>nd</sup> quarter: 94% 3 <sup>rd</sup> quarter: 97% 4 <sup>th</sup> quarter: 90%
<p><b><u>Effectiveness</u></b>                      Each preschooler will master 2-4 master goals in the area of cognitive development.</p>	Goal progress at annual review	All preschoolers enrolled	Annually	Annual evaluation	Program Coordinator	100%	1 <sup>st</sup> quarter: 88% 2 <sup>nd</sup> quarter: 80%  3 <sup>rd</sup> quarter: 78% 4 <sup>th</sup> quarter: 82%
<p><b><u>Satisfaction</u></b>                      Maximize satisfaction of all consumers</p>	Percentage of Individuals who express satisfaction with services (1 or 2)	All individuals	Quarterly	Quarterly Satisfaction Survey	Program Coordinator	80%	EI 1 <sup>st</sup> quarter: 83% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 90% EC 1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 89% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 100%

<p><b><u>Access</u></b>  a. Intake conferences will be held within 2 weeks of initial contact.</p> <p>b. Signed treatment Rx will be obtained from physician and distributed within 10 days of conference.</p>	<p>Percentage of individuals whose conf. is held within 2 weeks.</p> <p>Percentage of scripts returned within 10 days,</p>	<p>New enrollees</p> <p>All scripts for consumers</p>	<p>Quarterly</p> <p>Quarterly</p>	<p>SEAS data</p>	<p>Program Coordinator</p> <p>Program Coordinator</p>	<p>80%</p> <p>80%</p>	<p>1<sup>st</sup> quarter: 82%  2<sup>nd</sup> quarter: 87%  3<sup>rd</sup> quarter: 82%  4<sup>th</sup> quarter: 87%</p> <p>1<sup>st</sup> quarter: 52%  2<sup>nd</sup> quarter: 63%  3<sup>rd</sup> quarter: 80%  4<sup>th</sup> quarter: 77%</p>
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**Recommendations for Goals not achieved:**

Our attendance rate is slightly lower than the target of 85%. Attendance policy has been followed.

Access: Returns of signed treatment scripts continue to be delayed due to physician delay.

## Performance Outcomes Plan

### Program Component: Cabot-Adult Development

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<p><b><u>Efficiency</u></b> Increase monthly attendance rate</p> <p><b><u>Efficiency</u></b> Increase enrollment by 9.</p>	<p>Percentage of total attendance for month.</p> <p>Number of individuals who attend program</p>	<p>All individuals receiving services</p> <p>New admissions</p>	<p>Monthly</p> <p>Yearly</p>	<p>Attendance Record</p> <p>Enrollment Records</p>	<p>Admin. Asst.</p> <p>Program Director</p>	<p>82%</p> <p>30 clients</p>	<p>1<sup>st</sup> quarter: 77% 2<sup>nd</sup> quarter : 84% 3<sup>rd</sup> quarter : 79% 4<sup>th</sup> quarter: 81%</p> <p>1<sup>st</sup> quarter: -1 2<sup>nd</sup> quarter : -1 3<sup>rd</sup> quarter : 0 4<sup>th</sup> quarter: +6</p>
<p><b><u>Effectiveness</u></b> Increase Participation of Full time consumers in health/ wellness &amp; or relationship classes.</p> <p>Clients will increase functional skills.</p>	<p>Percentage who participated in classes at least 2X per quarter</p> <p>Percentage who Mastered at least 3 objectives on treatment plan.</p>	<p>All individuals receiving services</p> <p>All individuals Receiving Services.</p>	<p>Quarterly</p> <p>Quarterly</p>	<p>Class list/ Calendar</p> <p>Quarterly Reports</p>	<p>Program Director</p> <p>Program Director</p>	<p>75%</p> <p>80%</p>	<p>1<sup>st</sup> quarter: 100% 2<sup>nd</sup> quarter: 100% 3<sup>rd</sup> quarter: 100% 4<sup>th</sup> quarter: 100%</p> <p>1<sup>st</sup> quarter: 50% 2<sup>nd</sup> quarter: 53% 3<sup>rd</sup> quarter : 89% 4<sup>th</sup> quarter: 75%</p>
<p><b><u>Satisfaction</u></b> Maximize satisfaction of all consumers</p>	<p>Percentage of Individuals who express satisfaction with services</p>	<p>All individuals</p>	<p>Quarterly</p>	<p>Quarterly Satisfaction Survey</p>	<p>Program Director</p>	<p>80%</p>	<p>1<sup>st</sup> quarter: 100% 2<sup>nd</sup> quarter: 95% 3<sup>rd</sup> quarter : 89% 4<sup>th</sup> quarter: 95%</p>
<p><b><u>Access</u></b> Individual will begin services within 30 days.</p>	<p>Individual getting services by 30th day.</p>	<p>All new admissions</p>	<p>Monthly</p>	<p>Enrollment Records</p>	<p>Program Director</p>	<p>90%</p>	<p>1<sup>st</sup> quarter: N/A 2<sup>nd</sup> quarter: No new referrals 3<sup>rd</sup> quarter : 0% 4<sup>th</sup> quarter: 100%</p>



Recommendations for Goals not achieved:

Good gains in enrollment this quarter. Much improved in gaining functional skills.

**Performance Outcomes Plan**  
**Program Component: Cabot Preschool**

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<p><b><u>Efficiency</u></b>            a. Increase monthly attendance rate to 85% of enrollment in attendance.</p> <p>b. Treatment RX will be sent to physician for approval within 2 days of programming conference.</p> <p>c. Conferences not held as scheduled will be rescheduled and held within 3 days.</p>	Percentage of total attendance for month.	All individuals receiving services	Quarterly	Attendance Record	Program Coordinator	85%	1 <sup>st</sup> quarter: 85% 2 <sup>nd</sup> quarter : 84% 3 <sup>rd</sup> quarter : 85% 4 <sup>th</sup> quarter: 85%
	Date prescription sent to physician.	All individuals receiving services				100%	1 <sup>st</sup> quarter: 78% 2 <sup>nd</sup> quarter :75% 3 <sup>rd</sup> quarter :85% 4 <sup>th</sup> quarter: 100%
						100%	1 <sup>st</sup> quarter: 96% 2 <sup>nd</sup> quarter : 80% 3 <sup>rd</sup> quarter :88% 4 <sup>th</sup> quarter: 92%
<p><b><u>Effectiveness</u></b>            Each preschooler will master 2-4 master goals in the area of cognitive development.</p>	Goal progress at annual review	All preschoolers enrolled	Annually	Annual evaluation	Program Coordinator	100%	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 83%  3 <sup>rd</sup> quarter: 97% 4 <sup>th</sup> quarter: 100%
<p><b><u>Satisfaction</u></b>            Maximize satisfaction of all consumers</p>	Percentage of Individuals who express satisfaction with services (1 or 2)	All individuals	Quarterly	Quarterly Satisfaction Survey	Program Coordinator	80%	EI 1 <sup>st</sup> quarter: 90% 2 <sup>nd</sup> quarter :100% 3 <sup>rd</sup> quarter 80% 4 <sup>th</sup> quarter: 100% EC 1 <sup>st</sup> quarter: 87% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 97%

<p><b><u>Access</u></b>  a. Intake conferences will be held within 2 weeks of initial contact.</p> <p>b. Signed treatment Rx will be obtained from physician and distributed within 10 days of conference.</p>	<p>Percentage of individuals whose conf. is held within 2 weeks.</p> <p>Percentage of scripts returned within 10 days,</p>	<p>New enrollees</p> <p>All scripts for consumers</p>	<p>Quarterly</p> <p>Quarterly</p>	<p>SEAS data</p>	<p>Program Coordinator</p> <p>Program Coordinator</p>	<p>90%</p> <p>90%</p>	<p>1<sup>st</sup> quarter: 72%  2<sup>nd</sup> quarter: 75%  3<sup>rd</sup> quarter: 68%  4<sup>th</sup> quarter: 54%</p> <p>1<sup>st</sup> quarter: 82%  2<sup>nd</sup> quarter: 67%  3<sup>rd</sup> quarter: 60%  4<sup>th</sup> quarter: 75%</p>
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**Recommendations for Goals not achieved:**

Delays in intake conferences were primarily due to parent rescheduling or a delay in getting prescription for an evaluation. One occurrence was due to provider delay due to scheduling.

## Performance Outcomes Plan

### Program Component: Waiver

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<b><u>Efficiency</u></b> Waiver plan submitted 50 days prior to expiration and PA received within 5 days of expiration.	Date Waiver plan submitted and PA received.	All Plans	Quarterly	Maps Plan Date Sheet	CM and DoWaiver	90%	1 <sup>st</sup> quarter: 17% and 83% 2 <sup>nd</sup> quarter : 14% and 43% 3 <sup>rd</sup> quarter : 33% and 66% 4 <sup>th</sup> quarter: 67%
<b><u>Effectiveness</u></b> Annual Training of staff will occur through mail out and online venues.	Training material and sign-up sheet.	All staff	Monthly	Sign in sheets and monthly email handouts	DCS & DoW	100%	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter : 100% 4 <sup>th</sup> quarter: 100%
<b><u>Satisfaction</u></b> Maximize satisfaction in service quality of all consumers and/or guardians served by LEDC Waiver Dept.	Percentage of Individuals who express satisfaction with staff and services now.	All consumers and Parent/Guardians served.	Quarterly	Monthly Case management notes	CM and DoW	100%	1 <sup>st</sup> quarter: 93% 2 <sup>nd</sup> quarter : 97% 3 <sup>rd</sup> quarter : 100% 4 <sup>th</sup> quarter: 100%

<b><u>Access</u></b> Consumers will receive services as scheduled in their plan of care without going more than 4 scheduled days without staff.	Compare Current plan of care and billing.	All Consumers	Quarterly	Progress Notes	DCS and DoW	95%	1 <sup>st</sup> quarter: 79% 2 <sup>nd</sup> quarter: 93% 3 <sup>rd</sup> quarter : 93% 4 <sup>th</sup> quarter: 89%
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## Recommendations for Goals not achieved:

Recommendation:

**Efficiency:** 3 plans were due during this quarter and they were submitted as follows:

1. submitted 03/18/14 due 04/5/14 (18 days prior) PA received 04/3/14 (2 days before) submitted 03/5/14 due 04/20/14 (46 days prior) PA received 03/19/14 (32 days before)
2. 03/19/14 (32 days before)
3. submitted 04/04/14 due 04/29/14 (25 days prior) PA received 04/28/14 (0 days before)

*Waiver plan submitted 50 days prior to expiration 0/3 or 0% meeting objective:* An average submission day for this quarter comes to be 29.6 days prior to expiration. There are no suggestions at this time besides a corrective action plan this does not reflect minimum standard compliance. Correctively due dates for next quarter will be reviewed and estimated submission dates will be established proactively.

*PA received within 5 days expiration 2/3 or 66.6% meeting objective:* Suggestions for this outcome are correlated with the submission of the plan; consequently, the corrective action will be the same as the plan submission corrective action.

### **Effectiveness:**

Staff were offered (3) trainings (1 for each month). April, May, June  
 (34) staff have email and were sent trainings via email or relias  
 (28) staff completed them via email by sending in answer sheets and/or emailing answer sheet  
 The remaining that could not pull up trainings via email or do not have email were sent via mail (13).  
 (13) completed trainings via mail.  
 January-March we have a 100% completion of trainings from waiver staff.  
 \* some staff received both and completed via mail if not e-mail  
 32/32 completed trainings offered 100%  
 No recommendations for goal at this time.

### **Satisfaction:**

Case Management reflected 28/28, 100% participation in feedback, actual comments made about satisfactions; observations amounted to 100% satisfaction. *No complaints were received in the quarter giving the final percentage to reflect 100% satisfaction.*

Recommendation: Case Manager will begin measuring this objective in the monthly or quarterly reports to allow for accurate feedback.

**Access:**  
*25 out of 28 clients or 92.9% met the objective.*  
From the quarter 04/14-06/14 there have been 3 clients out of 28 served that have gone (4) scheduled days or more without supportive living services: Each case has a documented recommendation of risk factors to consider in the loss of staffing; individualistically each situation has been evaluated and has identified options of retention of staff. Back up fill in staffing would be difficult to obtain but could help in transitions of absent staff. Correction is estimated to meet goal expectation next quarter.  
Consumers that went more than 4 scheduled days without staff during April-June were

## Business Performance Outcomes Plan

### Program Component: Business Functions/Financial

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<b><u>Efficiency</u></b> Actual Revenue matches projected budget.	Projected Budget comparison to Actual Budgeted revenue	Accounting	Quarterly	Financial Statements	Bookkeeper	95%	1 <sup>st</sup> quarter: 106% 2 <sup>nd</sup> quarter : 99% 3 <sup>rd</sup> quarter: 97% 4 <sup>th</sup> quarter: 100%
<b><u>Effectiveness</u></b> Reduce margin of error on billing.	Number of documented billing errors/corrections	10% Sample of Agency Billing compared to class records.	Quarterly	<b>Actual Billing</b>	Ex. Director	95%	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter ; 93% 3 <sup>rd</sup> quarter: 99% 4 <sup>th</sup> quarter: 98%
Financials will be available by the 20th of each month.	Board reports	Financial reports	Yearly	Monthly documentation	Ex. Director	80%	1 <sup>st</sup> quarter: 67% 2 <sup>nd</sup> quarter: 83% 3 <sup>rd</sup> quarter: 88% 4 <sup>th</sup> quarter: 100%
<b><u>Effectiveness:</u></b> Decrease balance of uncollected accounts receivable for services provided.	Difference in amount provided, billed and received.	Accounting	Yearly	Billing/Receivables Report, Nonbillable report	Billing Coordinator and Bookkeeper	95% collected	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 99% 3 <sup>rd</sup> quarter: 99% 4 <sup>th</sup> quarter: 97%

Recommendations for Goals not achieved: All achieved.



## Performance Outcomes Plan

### Program Component: Human Resources

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<p><b><u>Efficiency</u></b> Maintain/improve current employee turnover rate.</p>	Turnover rate per department	All employees	Yearly	Employee Retention Report	Human Resources Director	16% or less.	1 <sup>st</sup> quarter: no data 2 <sup>nd</sup> quarter: 18% 3 <sup>rd</sup> quarter: 4% 4 <sup>th</sup> quarter: 26%
<p><b><u>Effectiveness</u></b> Staff will attend 1 outside training session annually.</p>	Number of staff attending outside training.	Training Program Schedule	Quarterly	Training Records	Training Coordinator And Dept. Head	85% Annually	85%
<p><b><u>Satisfaction</u></b> Improve employee satisfaction in the area of recognizing staff that excel in job.  Maintain employee satisfaction with employment at LES.</p>	Percentage of employees that answer yes to question on employee recognition on satisfaction survey	All employees  All employees	Yearly  Yearly	Satisfaction Survey  Satisfaction survey	Human Resources Director  HR Director	85%  98%	62%  91%

<p><b><u>Efficiency:</u></b> Increase number of staff that submit required documents to HR in a timely manner prior to expiration date.</p>	<p>Percentage of Employees that Have all required documents submitted to HR By expiration.</p>	<p>All employees</p>	<p>Quarterly</p>	<p>HR Tracking TB skin test, DL,</p>	<p>HR</p>	<p>95% of employees that have documents due</p>	<p>1<sup>st</sup> quarter: No data 2<sup>nd</sup> quarter:75% 3<sup>rd</sup> quarter:75% 4<sup>th</sup> quarter: 55%</p>
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Recommendations for Goals not achieved:

Records checks seem to be the primary delay in getting returned documents. The sources we use are not prompt. Considering other sources for completing records checks.

Employee turnover was significant. Considering improving more formal employee retention strategies.

## Performance Outcomes Plan

### Program Component: Outreach

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<u><b>Efficiency</b></u> Increase number served in Outreach program.	Number of children receiving services through outreach program.	All children receiving services through OR. (Includes screening, evals, and family consultations.	Quarterly	Enrollment Records	Service Coordinator	a)15 children receiving services/eval.  b)15 children receiving dev. Screenings.	1 <sup>st</sup> quarter: 93% 2 <sup>nd</sup> quarter:87% 3 <sup>rd</sup> quarter : 87% 4 <sup>th</sup> quarter: 93%  1 <sup>st</sup> quarter: 13 % 2 <sup>nd</sup> quarter: 33% 3 <sup>rd</sup> quarter : 27% 4 <sup>th</sup> quarter: 8%
<u><b>Effectiveness</b></u> Increase opportunities for caregiver training.	Percentage of families attending training program or receiving materials.	All families receiving services	Yearly	Training documentation	Service Coordinator	100%	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 100%
<u><b>Satisfaction</b></u> Maximize satisfaction of all families served.	Percentage of Caregivers who express satisfaction with services	All families receiving services	Quarterly	Quarterly Satisfaction Survey	Outreach Coordinator	90%	1 <sup>st</sup> quarter: Pending 2 <sup>nd</sup> quarter:100% 3 <sup>rd</sup> quarter : 100% 4 <sup>th</sup> quarter: 100%
<u><b>Access</b></u> 1)Within 3 days of referral first contact will be made.	Percentage of families who receive contact	All new referrals	Monthly	Referral contact sheet	Case manager	80%	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter:100% 3 <sup>rd</sup> quarter :100% 4 <sup>th</sup> quarter:100%

2) Evaluation conference will be held within 45 days of referral conference.	Percentage of evals held within time frame.	All new referrals	Monthly	Referral contact sheet	Case manager	100%	1 <sup>st</sup> quarter: 71% 2 <sup>nd</sup> quarter: 67% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 0%

**Recommendations for Goals not achieved:**

**1. Efficiency: Increase number of children served through outreach program.**

- Continue to visit two new daycares each month to provide information and resources
- Follow-up previous contacts with newsletter, training opportunities
- Organize Pathways.org motor development training to offer daycares and MOPS

**2. Access: Evaluation conference will be held with 45 days of referral conference**

## Performance Outcomes Plan

### Program Component: Therapy

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<b><u>Efficiency</u></b> Therapists will demonstrate increased productivity.	Percentage of therapy units provided based on number possible.	All therapists	Monthly	Billing Documentation	Adm. Assist.	<b>85%</b>	1 <sup>st</sup> quarter: 89% 2 <sup>nd</sup> quarter: 93% 3 <sup>rd</sup> quarter: 82% 4 <sup>th</sup> quarter: 96%
<b><u>Effectiveness</u></b> Therapy services will be provided as recommended in IFSP or IEP.	Percentage of therapy per individual provided vs. recommended	All individuals receiving therapy	Monthly	Therapy Attendance logs	Adm. Asst.	<b>75%</b>	1 <sup>st</sup> quarter : 62% 2 <sup>nd</sup> quarter: 52% 3 <sup>rd</sup> quarter: 54% 4 <sup>th</sup> quarter: 70%

Recommendations for Goals not achieved: Increase the number of therapy staff.

## Performance Outcomes Plan

### Program Component: Safety

Objectives	Measures	Applied to	Time of Measure	Data Source	Obtained by	Goal	Measured Achievement
<b><u>Efficiency</u></b> Maintain a low incident of worker's compensation cases as documented by lost days of work.	Number of lost work days due to worker's comp claims.	All employees	Quarterly	Work comp claims data	HR	0 lost days	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 100% 3 <sup>rd</sup> quarter: 100% 4 <sup>th</sup> quarter: 100%
<b><u>Effectiveness</u></b> Transportation coordinator will complete unannounced ride-along inspections for all routes.	Number of routes that transportation coordinator monitored by riding route.	All routes	Quarterly	Check-list.	Transportation coordinator	100%	1 <sup>st</sup> quarter: 2 <sup>nd</sup> quarter: 4 3 <sup>rd</sup> quarter : 4 <sup>th</sup> quarter: 11  100%
<b><u>Satisfaction</u></b> Improve satisfaction rating of transportation program by consumers.	Rating by consumers of transportation program	Transportation program at both locations	Quarterly	Consumer satisfaction survey.	Transportation Coordinator	90% satisfied	1 <sup>st</sup> quarter: 100% 2 <sup>nd</sup> quarter: 80% 3 <sup>rd</sup> quarter: 4 <sup>th</sup> quarter: Did not complete survey for last 2 quarters due to staffing issues.

Recommendations for Goals not achieved:

Supervisors need to be timely in completing satisfaction surveys.