**CDS Family & Behavioral Health Services, Inc.**

**FY 2012-2013 Performance Improvement Plan**

| **Goal** | **Indicator/Outcome** | **Data Source** | **Program** | **Timing** | **Obtained By** | **Type of Measure** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Satisf.** | **Effective** | **Efficient** | **Access** |
| Participants satisfaction with services | 90% of average scores per question will be ‘4’ or greater (scale of 1 -5). | Participant Satisfaction Survey | Drug Free Communities,  Independent Living,  SAMH- East,  SAMH-Central  All participants served | Monthly Reports | Data Systems Manager  Data collected by:  Front Desk Staff; Counselor or designated staff member | X |  |  |  |
| Participants satisfaction with services | 90% of average scores per question will be ‘3’ or greater (scale 1-4). | Participant Satisfaction Survey | CINS/FINS | Monthly Reports | Data Systems Manager  Data collected by:  Front Desk Staff; Counselor or designated staff member | X |  |  |  |
| Participant successful completion of services | 85% of participants will successfully complete CINS/FINS services. | NETMIS | CINS/FINS | Monthly Reports | Data Systems Manager  Data collected by:  Counselor/Case Manager or designated staff member |  | X |  |  |
| Reduce juvenile crime for at risk youth. | 90% of youth served in CINS/FINS programs will remain crime free. | NETMIS | CINS/FINS | Monthly Reports | Data Systems Manager  Data collected by:  Counselors or designated staff members. |  | X |  |  |
| Reduce the NETMIS data entry lag time to less than 10 days. | 90% of intakes will be entered within 10 days. | NETMIS | CINS/FINS | Monthly Reports | Data Systems Manager  Data collected by:  Designated Data Entry Staff by site. |  |  | X |  |
| Complete follow ups of discharged CINS/FINS participants. | Follow up will be completed on 90% of participants who are discharged from CINS/FINS programs. | NETMIS | CINS/FINS | Monthly Reports | Data Systems Manager  Data collected by:  Counselors or designated staff members. |  |  | X |  |
| Increase SAMH performance | 95% of SAMH direct service staff shall meet at least 90% of expected level of contact hours as measured on a monthly basis (staff with CDS over 3 months). | Medical Manager | SAMH | Monthly Report | Data Systems Manager  SAMH direct service staff |  |  | X |  |
| Responsive to stakeholders | 90% of stakeholders surveyed will agree or strongly agree that CDS has staffs that are accessible to their organization. | Stakeholders Surveys | All programs | Annually | Chief Operations Officer  Quality Assurance Coordinator |  |  |  | X |
| Reduce costs associated with Youth Care Worker supervision of participants in the residential programs | Establish biweekly budgetary guidelines for staff coverage based on licensure requirements and historical experience and provide managers biweekly personnel expenditure reports to utilize for planning and to track progress. | Bi-weekly Youth Care Worker Payroll Analysis Report | CINS/FINS Residential | Biweekly  Report | Chief Financial Officer  Data Systems Manager  Expenses controlled by:  Coordinators |  |  | X |  |
| Reduce and/or control programs variable costs. | Establish program budgets based on historical experience and provide managers monthly expenditure reports to utilize for planning and to track progress. | Coordinator Budget Reports | All programs | Monthly Report, one week prior to EMT | Chief Financial Officer  Data Systems Manager  Expenses controlled by:  Coordinators |  |  | X |  |