

2008

Quality Improvement Annual Report



- Outcome Measures
- Overtime Tally
- Consumer Satisfaction Survey
- Quality Improvement Plan

Renaissance Community Homes Inc.
Outcome Measure Report
October 1, 2007 ~ September 30, 2008

Annual Outcome Measures Executive Summary 2008:

1. Consumer satisfaction with services. All consumers from all programs twice a year will be offered a CONSUMER SATISFACTION SURVEY. All responses to each item will be compiled. Programs will report the number of surveys distributed, number of surveys collected, and percentage of consumers reporting overall satisfaction. Average response score per item will be over "3". Response rate will be over 85%. Surveys showed overall satisfaction with each question asked.

2008 Questions that scored highest were:

- Staff help me find transportation when I need to go somewhere.
- I feel that my safety needs are met.
- I can make decisions on my services
- I am allowed privacy when I want it.

2008 Questions that scored lowest were:

- Home is accessible and meets my needs
- Home repairs are done timely
- Staff help me find outside relationships
- Program offers fun activities

2007 Questions that scored highest were:

- Staff help me find transportation when I need to go somewhere.
- Where I live is homelike and comfortable.
- I have choices in how I decorate my room.
- Staff listen to me when I have a problem.

2007 Questions that scored lowest were:

- The van is clean and maintained.
- Staff help me plan activities
- Program offers fun activities

2006 Questions that scored highest were:

- Staff help me find transportation when I need to go somewhere.
- Staff treat me with dignity and respect.
- Where I live is homelike and comfortable.
- I am allowed privacy when I want it.
- Staff listen to me when I have a problem.

2006 Questions that scored lowest were:

- The van is clean and maintained.
- Program offers fun activities
- The staff encourages me to have relationships outside the program and foster community supports.

The response rate was 84% missing the target rate of 85%. Last year we achieved 87%.

100% of consumers average response score was either satisfied or very satisfied

2. Administration/efficiency: District Managers will review with the Finance Director how each program did financially over the prior six months. A rating will be determined on a scale from 1-5 (5 being highest). The overall financial picture of the program will be looked at including: payroll, overtime, consumables, cost of care income, & more. **2008 – 70% 21 of 30 departments scoring a 3 or above.** In 2007 - 51.6% 16 of 31 departments scoring a 3 or higher 2006 - 70.9%. 2005 was 80.6%. 2004 was 71.4%. **Our overtime percentage continues to stay low and acceptable at 3.43%** (a reduction from 3.91% in 2007 and 4.04% in 2006). It should be noted that our OT rate was 6.74% in 2000.

3. Staff Retention – This data will be obtained by calculating the percentage of staff working in licensed settings and supported living programs, which includes area supervisors and others involved in operations who may not provide direct care, who have worked in the identified setting for over 6 months. **Renaissance Community Homes Inc. enjoys a workforce that is experienced. In 2008 - 320 of 405 or 79%.** In 2007 - 259 of 332 or 78%, 81% in 2006, 73% in 2005 & 2004) current positions are filled with staff that have worked for us for more than 6 months. Renaissance Community Homes Inc. also saw a reduction of the **turnover rate** from 153% in 2003, 127% in 2004, 76% in 2005, 52% in 2006, 65% in 2007 and **65% in 2008**

4. Community Integration – Each program will set its own target for this indicator. The target will be in the format of number of outings per consumer, per quarter. This data will be obtained through tracking the number of individualized outings for each consumer. These do not include regularly scheduled group outings conceived of and coordinated by the provider. The community integration indicator should be continued to monitor consumer community interaction.

5. Access to Services – This data will be obtained by tracking the number of days between the initial referral and service initiation. Service initiation is defined as the first official contact between the provider and potential consumer. This contact does not have to be face to face. The average number of days will be reported. **There has been an increase in the time for consumers to access service. This can be attributed to the increased services these consumers need. Average number of days between referral and service initiation 2008 10 days. This could be due to poor data collection (staff are tracking when a consumer moves in and not when we made first contact. 2007 – 2.11days, 2006 – 4.5 days. 2005 – 2.06. Average number of days between referral and service initiation 2004: – 3.12. Average number of days between referral and service initiation 2003: –6-8 days.**

6. Medication Errors and Client-to Client aggression. Programs will be categorized as an A, B, or C class home. Depending on the potential of medication errors and client-to-client aggression. Data will be compared to category thresholds then shared with the program manager.
 - **A Medication error is defined as any deviation from the specific medication passing procedure. Renaissance Community Homes Inc. had 293 medication errors in 2008 out of 155,490 medication passes. 213 clients receiving medication twice a day for 365 days comes to 155,490 medication passes. This is a 99.92% medication passing accuracy rate in 2008. 99.81% medication passing accuracy rate in 2007. In 2006 the medication passing accuracy rate was 99.79%. In 2005 the medication passing accuracy rate was 99.82%. In 2004 the medication passing accuracy rate was 99.88%.**
 - The Client-to-Client Aggression measure continues to be monitored. Analysis of data is difficult due to a very few clients with aggressive behaviors can skew totals. It is felt that this issue still needs to be looked at. It is noticed that Client to Client aggression has dropped each of the first three quarters compared to last year. All consumer behavior plans are reviewed by the Responsible Mental Health Agencies at least every 90 days. **Total Client to Client aggression has stayed stable in 2008 at 234. 2007 at 244, 2006 at 251, 2005 at 267, 264 in 2004 and 338 in 2003**

7. Recipient Rights - The number of substantiated rights complaints for the program will be tracked each quarter and compared to past complaints on an annual basis. **Renaissance Community Homes Inc. had a total of 37 recipient rights complaints substantiated in 2008. Substantiated Rights complaint to employed staff ratio is 6% (this percentage reflects fewer complaints as well as fewer overall annual employees).** Renaissance Community Homes Inc. had a total of 40 recipient rights complaints substantiated in 2007. 40 Substantiated rights complaints in 2007 divided by 740* employees on payroll in 2007= 5.4% annual employed personnel to substantiated rights ratio. Most were findings of failure to treat with dignity and respect, treatment suitable to condition, or abuse/neglect III. 2006 had a 4% substantiated rights complaint ratio to annual employed personnel. 2% in 2005, 2% in 2004, & 3% in 2003.

Renaissance Community Homes Outcome Measures Annual Report 2008

Program Name: **Renaissance Community Homes Inc.**

Date of Report: **October 2008**

1. Consumer satisfaction with services. All consumers from all programs twice a year will be offered a CONSUMER SATISFACTION SURVEY. All responses to each item will be compiled. The response rate will be closely monitored. **Goals:** Average response score per item will be over "3". Response rate will be over 85%.

(a) Date of programs last Consumer Satisfaction Survey.

All surveys should be completed at the same time coordinating with the Quality Improvement Committee

<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>
<i>10/07</i>		<i>4/08</i>	

(b) Number of Consumers in the program:

Jackson/Hillsdale	32-31-30-30
Lenawee	82-59-79-81
Livingston	26-18-27-27
Oakland	17-17-5-14
<u>Washtenaw</u>	<u>57-60-56-61</u>
Total	214-185-197-213

(c) Number of survey distributed:

collected:

Jackson/Hillsdale	37	Jackson/Hillsdale	34
Lenawee	83	Lenawee	66
Livingston	27	Livingston	27
Oakland	14	Oakland	10
<u>Washtenaw</u>	<u>58</u>	<u>Washtenaw</u>	<u>49</u>
Total	219		186

(d) Percentage of Consumers surveyed:

% satisfied:

Jackson/Hillsdale	91.5%	Jackson/Hillsdale	100%
Lenawee	82.1%	Lenawee	100%
Livingston	100%	Livingston	100%
Oakland	80%	Oakland	100%
<u>Washtenaw</u>	<u>79%</u>	<u>Washtenaw</u>	<u>100%</u>
Overall	87%		100%

<p>2008 – 100% Satisfied – 84% response rate 2007 - 100% Satisfied – 87% response rate 2006 - 96.5% Satisfied – 89% response rate</p>
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Date: 10/08

Renaissance Community Homes/Renaissance House

LifeWays Lenawee Livingston Oakland Washtenaw Total

Completed By:

Person	25	32	21	3	21	102
Family/Guardian	0	13	0	0	9	22
Concerned Other	0	7	4	3	3	17
No Answer Given	9	13	2	1	28	53
Response Rate <i>returned /sent out</i>	34/37 91%	66/83 79%	27/27 100%	10/14 71%	62/75 82%	199/236 84%
Question:	LifeWays	Lenawee	Livingston	Oakland	Washtenaw	Average
I feel that my safety needs are met	3.28	3.49	3.70	3.67	3.38	3.50
Program offers fun activities	3.06	3.37	3.60	3.58	3.04	3.33
Things we do for fun are relevant to me	3.27	3.36	3.57	3.58	3.19	3.39
Staff help me plan activities	3.31	3.39	3.43	3.58	3.18	3.38
I can talk to staff when I have a problem	3.40	3.52	3.70	3.42	3.18	3.44
Home is accessible and meets my needs	3.35	3.44	3.53	3.25	3.27	3.37
Home repairs are done timely	3.34	3.14	3.83	3.42	3.14	3.37
Where I live is homelike and comfortable	3.26	3.57	3.87	3.42	3.22	3.47
I have choices in how I decorate my room	3.40	3.61	3.57	3.65	3.21	3.49
The van is clean and maintained	3.23	3.48	3.71	3.75	3.10	3.45
Staff help me find transportation	3.39	3.56	3.70	3.55	3.31	3.50
Staff help me find outside relationships	3.37	3.49	3.53	3.40	3.05	3.37
I can make decisions on my services	3.30	3.51	3.67	3.67	3.34	3.50
Staff treat me with Dignity and respect	3.28	3.56	3.70	3.46	3.36	3.47
I am allowed privacy when I want it	3.25	3.53	3.67	3.75	3.28	3.50
Staff help me understand my medications	3.39	3.55	3.63	3.20	3.24	3.40
I can participate with my medical Tx	3.24	3.59	3.63	3.80	3.18	3.49
Staff help me be more independent	3.31	3.56	3.65	3.63	3.32	3.49
Staff listen to my problems	3.31	3.48	3.56	3.54	3.21	3.42
I like where I live	3.16	3.39	3.67	3.67	3.49	3.48
Average	3.29	3.48	3.64	3.51	3.24	3.43

WCHO Survey	Lenawee	Livingston	Washtenaw	Total
RCHI helps me achieve my goals	3.31	3.70	2.97	3.33
Given other choices, I still chose RCHI	3.33	3.69	3.16	3.39
I recommend RCHI to friends & family	3.21	3.77	3.13	3.37
RCHI respects my diversity	3.39	3.80	3.15	3.45
RCHI helps me feel safe	3.36	3.77	3.18	3.44
Satisfied with amount of activities	3.43	3.63	2.98	3.35
Satisfied with kind of activities	3.37	3.70	3.02	3.36
RCHI services are better than expected	3.28	3.70	3.15	3.38
Average	3.33	3.72	3.08	3.38
Response Rate <i>returned /sent out</i>	67/84 79%	27/27 100%	57/74 77%	151/185 81%

**Renaissance Community Homes Inc.- Consumer
Satisfaction Survey 2007**

Date: 10/07

	LifeWays	Lenawee	Livingston	Oakland	Washtenaw	Total
Completed By:						
Person	7	11	9	13	49	89
Family/Guardian	0	18	0	0	4	22
Concerned Other	0	14	14	5	15	48
No Answer Given	22	21	4	0	8	55
Question:						
	LifeWays	Lenawee	Livingston	Oakland	Washtenaw	Average
I feel that my safety needs are met	3.32	3.47	3.63	3.38	3.39	3.44
Program offers fun activities	3.42	3.39	3.50	3.45	3.19	3.39
Things we do for fun are relevant to me	3.42	3.45	3.60	3.70	3.28	3.49
Staff help me plan activities	3.53	3.31	3.50	3.42	3.14	3.38
I can talk to staff when I have a problem	3.44	3.58	3.65	3.34	3.34	3.47
Home is accessible and meets my needs	3.47	3.64	3.77	3.00	3.58	3.49
Home repairs are done timely	3.30	3.54	3.70	3.48	3.08	3.42
Where I live is homelike and comfortable	3.53	3.66	3.80	3.19	3.46	3.53
I have choices in how I decorate my room	3.48	3.66	3.63	3.34	3.53	3.53
The van is clean and maintained	3.05	3.55	3.58	3.25	2.99	3.28
Staff help me find transportation	3.51	3.66	3.67	3.62	3.42	3.58
Staff help me find outside relationships	3.45	3.44	3.78	3.28	3.32	3.45
I can make decisions on my services	3.35	3.54	3.73	3.42	3.34	3.48
Staff treat me with Dignity and respect	3.41	3.65	3.80	3.23	3.34	3.49
I am allowed privacy when I want it	3.35	3.53	3.80	3.50	3.36	3.51
Staff help me understand my medications	3.39	3.61	3.53	3.42	3.12	3.41
I can participate with my medical Tx	3.46	3.66	3.67	3.50	3.32	3.52
Staff help me be more independent	3.30	3.54	3.80	3.54	3.43	3.52
Staff listen to my problems	3.49	3.65	3.77	3.59	3.29	3.56
I like where I live	3.30	3.43	3.67	3.29	3.66	3.47
Average	3.37	3.56	3.68	3.41	3.32	3.47
	29/32	67/79	21/27	14/18	73/83	204/239
	90%	93%	77%	77%	87%	85%

WCHO Survey	Lenawee	Livingston	Washtenaw	Total
RCHI helps me achieve my goals	3.59	3.65	3.49	3.58
Given other choices, I still chose RCHI	3.56	3.92	3.46	3.65
I recommend RCHI to friends & family	3.48	3.92	3.30	3.57
RCHI respects my diversity	3.52	3.92	3.54	3.66
RCHI helps me feel safe	3.53	3.63	3.42	3.53
Satisfied with amount of activities	3.44	3.59	3.28	3.44
Satisfied with kind of activities	3.45	3.46	3.31	3.41
RCHI services are better than expected	3.61	3.75	3.45	3.60
Average	3.52	3.76	3.37	3.55
	56/67	24/25	75/84	155/176
	83%	96%	89%	88%

Renaissance Community Homes Inc.- Consumer Satisfaction Survey 2006

	LifeWays	Lenawee	Livingston	Oakland	Washtenaw	Total
Completed By:						
Person	7	23.5	3	6	23	62.5
Family/Guardian	0	9	0	0	11	20
Concerned Other	0	22	14	2	1	39
No Answer Given	22	18	6	8	36	90
Question:						Average
I feel that my safety needs are met	3.32	3.35	3.74	3.49	3.46	3.47
Program offers fun activities	3.42	3.27	3.66	3.20	3.16	3.34
Things we do for fun are relevant to me	3.42	3.34	3.78	3.23	3.19	3.39
Staff help me plan activities	3.53	3.33	3.72	3.00	3.20	3.36
I can talk to staff when I have a problem	3.44	3.35	3.83	2.85	3.35	3.36
Home is accessible and meets my needs	3.47	3.54	3.75	3.05	3.44	3.45
Home repairs are done timely	3.30	3.26	3.83	3.35	3.25	3.40
Where I live is homelike and comfortable	3.53	3.48	3.92	3.19	3.28	3.48
I have choices in how I decorate my room	3.48	3.44	3.78	3.30	3.37	3.47
The van is clean and maintained	3.05	3.29	3.96	3.05	3.09	3.29
Staff help me find transportation	3.51	3.52	3.78	3.29	3.43	3.51
Staff help me find outside relationships	3.45	3.31	3.88	2.95	3.15	3.35
I can make decisions on my services	3.35	3.28	3.74	3.20	3.39	3.39
Staff treat me with Dignity and respect	3.41	3.43	3.96	3.16	3.45	3.48
I am allowed privacy when I want it	3.35	3.41	3.92	3.38	3.33	3.48
Staff help me understand my medications	3.39	3.34	3.83	3.11	3.29	3.39
I can participate with my medical Tx	3.46	3.26	3.96	3.25	3.30	3.45
Staff help me be more independent	3.30	3.40	3.77	3.39	3.31	3.43
Staff listen to my problems	3.49	3.37	3.75	3.30	3.48	3.48
I like where I live	3.30	3.46	3.64	3.43	3.37	3.44
Average	3.37	3.37	3.81	3.22	3.31	3.42
	29/32 90%	68/73 93%	22/22 100%	16/17 94%	71/88 80%	206/232 88%
CMH Survey						
RCHI helps me achieve my goals		3.47	3.34		3.29	3.37
Given other choices, I still chose RCHI		3.42	3.30		3.28	3.33
I recommend RCHI to friends & family		3.30	3.22		3.32	3.28
RCHI respects my diversity		3.42	3.67		3.30	3.46
RCHI helps me feel safe		3.41	3.41		3.38	3.40
Satisfied with amount of activities		3.33	3.23		3.01	3.19
Satisfied with kind of activities		3.36	3.18		2.99	3.18
RCHI services are better than expected		3.43	3.23		3.29	3.32
Average		3.39	3.32		3.23	3.31

Consumer Satisfaction Survey Results 2005

		Scale	1) Very Unsatisfied	2) Unsatisfied	3) Satisfied	4) Very Satisfied		
Questions:		Average Score						
		Lenawee	Oakland	Livingston	Washtenaw	House	LifeWays	Average
1	I feel that my health and safety needs are met.	3.67	3.38	3.83	3.42	3.03	3.47	3.46
2	The program offers fun activities that keep me busy.	3.42	3.36	3.33	3.02	2.93	3.29	3.22
3	The things we do for fun are relevant to my condition.	3.41	3.05	3.50	3.28	2.80	3.24	3.21
4	When I think of new ideas for activities the staff help to arrange them for me.	3.47	3.14	3.70	3.50	3.07	3.30	3.36
5	I feel I can talk to the staff when I have a problem or concern.	3.57	3.63	3.50	3.50	3.07	3.40	3.44
6	My home is accessible for me and meets my needs with any adaptive equipment.	3.64	3.62	4.00	3.34	3.00	3.43	3.50
7	When something is broke in my home is gets fixed in a timely manner.	3.44	3.33	3.50	3.17	3.13	3.56	3.35
8	Where I live is homelike & comfortable for me.	3.63	3.55	3.94	3.22	3.00	3.42	3.46
9	I have choices in how to decorate my room	3.68	3.82	3.73	3.59	3.27	3.25	3.55
10	The van is clean and maintained.	3.45	3.31	3.67	1.97	2.97	3.41	3.13
11	The staff helps me find transportation when I need to go somewhere.	3.67	3.70	3.83	3.26	3.13	3.54	3.52
12	The staff encourage me to have relationships outside the program and foster community supports.	3.50	3.31	3.22	3.27	3.03	3.43	3.29
13	I can make decisions regarding my services and supports.	3.57	3.38	3.67	3.38	3.13	3.45	3.43
14	The staff treats me with dignity and respect.	3.68	3.59	4.00	3.24	3.07	3.55	3.52
15	I am allowed privacy when I want it.	3.64	3.75	3.67	3.24	2.87	3.56	3.45
16	The staff helps me understand the medications I am on.	3.58	3.56	3.00	3.38	2.87	3.38	3.29
17	I am given the chance to participate in my own medical treatment.	3.52	3.14	3.07	1.50	3.07	3.22	2.92
18	The staff helps me be more independent.	3.54	3.69	3.50	3.22	3.40	3.35	3.45
19	The staff listen to me when I have a problem.	3.64	3.42	3.50	3.75	3.20	3.31	3.47
20	I like where I live.	3.60	3.75	3.94	3.48	3.47	3.49	3.62
	Average	3.57	3.48	3.64	3.24	3.08	3.39	3.40

Consumer Satisfaction Survey Results 2004

Questions:	Scale	1) Very Unsatisfied	2) Unsatisfied	3) Satisfied	4) Very Satisfied		
	Average Score						
	Lenawee	Oakland	Livingston	Washtenaw	House	LifeWays	Average
1 I feel that my health and safety needs are met.	3.36	3.31	4.00	3.60	3.07	3.39	3.46
2 The program offers fun activities that keep me busy.	3.27	3.39	3.00	3.13	3.00	3.36	3.19
3 The things we do for fun are relevant to my condition.	3.37	3.29	4.00	3.35	3.00	3.34	3.39
4 When I think of new ideas for activities the staff help to arrange them for me.	3.36	3.42	4.00	3.64	2.93	3.21	3.43
5 I feel I can talk to the staff when I have a problem or concern.	3.29	3.18	3.50	3.77	3.08	3.39	3.37
6 My home is accessible for me and meets my needs with any adaptive equipment.	3.48	3.54	4.00	3.23	3.20	3.57	3.50
7 When something is broke in my home is gets fixed in a timely manner.	3.05	3.28	4.00	3.15	3.00	3.51	3.33
8 Where I live is homelike & comfortable for me.	3.34	3.32	4.00	3.29	3.29	3.31	3.43
9 I have choices in how to decorate my room	3.50	3.70	4.00	3.56	3.23	3.26	3.54
10 The van is clean and maintained.	3.01	3.42	4.00	3.32	2.86	3.32	3.32
11 The staff helps me find transportation when I need to go somewhere.	3.36	3.62		3.53	3.00	3.42	3.39
12 The staff encourage me to have relationships outside the program and foster community supports.	3.27	3.25	4.00	3.66	3.21	3.21	3.43
13 I can make decisions regarding my services and supports.	3.27	3.09		3.36	3.00	3.19	3.18
14 The staff treats me with dignity and respect.	3.46	3.50	4.00	3.62	3.07	3.48	3.52
15 I am allowed privacy when I want it.	3.38	3.70	4.00	3.27	3.08	3.30	3.46
16 The staff helps me understand the medications I am on.	3.30	3.59	4.00	3.51	2.93	3.18	3.42
17 I am given the chance to participate in my own medical treatment.	3.44	3.51		3.43	3.29	3.23	3.38
18 The staff helps me be more independent.	3.19	3.38	4.00	3.54	3.14	3.22	3.41
19 The staff listen to me when I have a problem.	3.25	3.2	4.00	3.20	3.29	3.52	3.41
20 I like where I live.	3.29	3.51	4.00	3.22	3.21	3.51	3.46
Average	3.30	3.40	3.91	3.39	3.08	3.35	3.40

Consumer Satisfaction Survey Results 2003

Questions:	Scale	1) Very Unsatisfied	2) Unsatisfied	3) Satisfied	4) Very Satisfied		
	Average Score	Lenawee	Oakland	Livingston	Washtenaw	House	LifeWays
1 I feel that my health and safety needs are met.	3.41	3.54	3.63	3.46	3.58	3.15	3.46
2 The program offers fun activities that keep me busy.	3.28	3.14	3.54	3.26	3.17	3.15	3.26
3 The things we do for fun are relevant to my condition.	3.36	3.43	3.42	3.33	2.90	2.96	3.23
4 When I think of new ideas for activities the staff help to arrange them for me.	3.38	3.14	2.79	2.90	3.20	3.00	3.07
5 I feel I can talk to the staff when I have a problem or concern.	3.42	3.43	2.63	3.48	3.50	2.88	3.22
6 My home is accessible for me and meets my needs with any adaptive equipment.	3.54	3.31	3.63	2.61	4.00	2.62	3.29
7 When something is broke in my home is gets fixed in a timely manner.	3.19	3.14	3.63	3.20	3.50	3.35	3.34
8 Where I live is homelike & comfortable for me.	3.50	3.50	3.92	3.44	3.50	3.23	3.52
9 I have choices in how to decorate my room	3.54	3.50	3.63	3.24	3.00	3.31	3.37
10 The van is clean and maintained.	3.41	3.15	3.63	3.35	3.45	3.31	3.38
11 The staff helps me find transportation when I need to go somewhere.	3.57	3.46	3.71	3.39	3.33	3.35	3.47
12 The staff encourage me to have relationships outside the program and foster community supports.	3.40	3.33	3.08	3.48	3.30	3.04	3.27
13 I can make decisions regarding my services and supports.	3.26	3.50	3.21	3.17	3.42	3.12	3.28
14 The staff treats me with dignity and respect.	3.57	3.21	3.96	3.56	3.42	3.19	3.49
15 I am allowed privacy when I want it.	3.57	3.64	3.96	3.26	3.50	3.31	3.54
16 The staff helps me understand the medications I am on.	3.35	3.38	2.50	3.28	3.46	3.27	3.21
17 I am given the chance to participate in my own medical treatment.	3.31	3.38	2.54	3.27	2.92	3.23	3.11
18 The staff helps me be more independent.	3.38	3.50	3.58	3.39	3.42	3.08	3.39
19 The staff listen to me when I have a problem.	3.37	3.57	3.13	3.49	3.64	3.12	3.39
20 I like where I live.	3.27	3.46	3.96	3.41	3.58	3.15	3.47
Average	3.40	3.39	3.40	3.30	3.39	3.14	3.34

2. Administration/efficiency: District Managers will review with the Finance Director how each program did financially over the prior six months. A rating will be determined on a scale from 1-5 (5 being highest). The overall financial picture of the program will be looked at including: payroll, overtime, consumables, cost of care income, & more.

Renaissance Program Budget Report - Snapshot Year End - Fiscal 2008

2008 - Financial Outcome Measure Report

2008 Rating	2007 Rating Lifeways	2006 Rating	2005 Rating	Program Name
5	4	5	5	Ren II
4	5	5	5	Ren III
3	2	2	4	Bunting
2	2	3	1	Parnall
2	3	5	5	Range
3	5	5	5	Steamburg
Lenawee				
5	3	4	5	Mohawk
5	2	3	5	Four Seasons
5	3	5	4	Rivers Bend
1	1	2	4	Woodbury
4	1	3	5	South Main
5	1	2	5	Green Hwy
3	3	2	2	College
1	3	4	1	Oakwood
2	3	2	3	Riverside
Washtenaw				
1	2	1	5	N. Territorial
5	2	4	4	Dexter Supports
5	5	5	5	Southlawn
5	5	5	4	Clark
1	2	3	4	Nixon
5	2	5	3	Ren I
4	4	3	4	Wash SIP (MI)
3	3	3	4	Ordonno
Oakland				
1	5	5	5	Grayling
3	2	2	5	Oakland SIP
Livingston				
4	1	3	1	William Pines
5	4	5	5	Oak Grove
3	2	3	4	Golfclub
2	2	3	2	Tanager/Burkhart
4	4	0	0	Westdale

Scale 1-5

5-superior, 3-on target, 1-below expectations

3. Staff Retention – This data will be obtained by calculating the percentage of staff working in licensed settings, which includes area supervisors and others involved in licensed settings who may not provide direct care, who have worked in the identified setting for over 6 months.

(a) How many employees do I actually have?

Jackson/Hillsdale	62-62-57-61
Lenawee	138-123-142-150
Livingston	55-36-53-51
Oakland	15-14-8-12
<u>Washtenaw</u>	<u>71-64-69-75</u>
Total	341-299-329-349

(b) How many of these employees have worked for Renaissance 6 months or longer?.

Jackson/Hillsdale	52-47-44-42
Lenawee	115-105-108-125
Livingston	31-22-41-37
Oakland	14-14-8-11
<u>Washtenaw</u>	<u>67-61-56-64</u>
Total	279-249-257-279

Staff Retention = 279/349 = 79%

Last quarter = 257/329 = 78%

78% of Renaissance Community Homes Inc. employees have worked for more than six (6) months. Last year's six-month retention was 81%, '05 was 73.4% '04 was 73.9% and '03 was 74.4%

2008 – 65% Turnover rate – 640* people were on the Renaissance payroll to fill 418 positions
2007 – 65% Turnover rate – 604* people were on the Renaissance payroll to fill 366 positions
2006 – 52% Turnover rate– 623 people were on the Renaissance payroll to fill 402 positions
2005 - 76% Turnover rate – 697 people were on the Renaissance payroll to fill 380 positions.
2004 - 127% Turnover rate - 831 people were on the Renaissance payroll to fill 366 positions.
2003 – 153% Turnover rate

(c)	How many employees are fully trained?			
	<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>
Jax/Hill	57	59	53	57
Lenawee	117	93	111	115
Livingston	46	34	45	44
Oakland	15	14	8	12
Washtenaw	66	59	59	70
Total	301	259	276	298

(d)	How many untrained staff have been employed more than 60 days?			
	<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>
Jax/Hill	0	0	0	0
Lenawee	21	14	23	22
Livingston	1	10	3	1
Oakland	0	0	0	0
Washtenaw	5	5	3	2
Total	27	29	29	25

4. Community Integration – Each program will set its own target for this indicator. The target will be in the format of number of outings per consumer, per quarter. This data will be obtained through tracking the number of individualized outings for each consumer. These do not include regularly scheduled group outings conceived of and coordinated by the provider. Only outings requested by consumers apply, and outings that include more than one consumer can be counted provided that the consumers conceived of the outing.

(a) The target number of outings per consumer, per quarter for this program is:

Jackson/Hillsdale	103-102-167-249
Lenawee	213-189-200-209
Livingston	125-69-66-168
Oakland	14-14-6-14
Washtenaw	83-113-114-117
Total	538-487-553-757

(b) The actual number of outings per consumer, per quarter for this program is:

Jackson/Hillsdale	101-331-197-275
Lenawee	293-244-314-342
Livingston	155-58-122-185
Oakland	48-48-40-48
Washtenaw	83-113-114-126
Total	680-794-787-976

5. Access to Services – This data will be obtained by tracking the number of days between the initial referral and service initiation. Service initiation is defined as the first official contact between the provider and potential consumer. This contact does not have to be face to face. The average number of days will be reported.

(a) List all referrals that were made to your program.

Name	Date of Referral	Date of Contact	Appropriate?	Referral Pulled?
Jackson				
[REDACTED]	11/07	12/21/07		
[REDACTED]	5/1/08	lateral transfer		
[REDACTED]	10/11/07	10/23/07	Yes	
[REDACTED]	10/25/07	assessment not done; stayed at current home		
[REDACTED]	7/7/08	7/10/08	Yes	moved in 7/23/08
[REDACTED]	8/3/08	8/7/08	Yes	still waiting on Monroe CMH
[REDACTED]	10/07	(upon prison release date 1/2008)		
Average number of days between referral and service initiation: –			3-14 days	

Name	Date of Referral	Date of Contact	Appropriate?	Referral Pulled?
Lenawee				
[REDACTED]	12/10/2007	12/12/2007		
[REDACTED]	8/6/2008	8/6/2008	yes	moved in 8/26/08
– transferred from apt. setting to Riverside on 12/11/07				
[REDACTED]	7/1/2008		yes	
[REDACTED]	2/4/2008	3/7/2008	yes	
[REDACTED]	8/4/2008	8/13/2008	yes	
Average number of days between referral and service initiation: –			15 days	

Name	Date of Referral	Date of Contact	Appropriate?	Referral Pulled?
Washtenaw				
[REDACTED]	3/13/08	3/24/08	yes	
[REDACTED]	8/08	8/08	yes	
[REDACTED]	4/08		yes	yes
[REDACTED]	7/08		yes	no
[REDACTED]	1/2008		yes	
[REDACTED]	6/26/08	6/30/08	yes	
Average number of days between referral and service initiation: –			10 days	

6. Medication Errors and Client-to Client aggression. **Goals:** Programs will be categorized as an A, B, or C class home. Depending on the potential of medication errors and client-to-client aggression. Data will be compared to category thresholds then shared with the program manager.

(a) Which county does this program serve?

All

(b) Number of people this program serves?

Jackson/Hillsdale	32-31-30-31
Lenawee	82-59-79-81
Livingston	26-12-27-27
Oakland	17-17-5-14
Washtenaw	57-60-57-62
Total	214-179-198-215

(c) How many medications errors were there this quarter?

	1 st quarter	2 nd quarter	3 rd quarter	4 th quarter
Jax/Hill	13	18	11	19
Lenawee	35	24	29	37
Livingston	18	4	10	16
Oakland	0	0	0	0
Washtenaw	10	7	8	34
Total	76	53	58	106

- **A Medication error is defined as any deviation from the specific medication passing procedure. Renaissance Community Homes Inc. had 293 medication errors in 2008 out of 155,490 medication passes. 213 clients receiving medication twice a day for 365 days comes to 155,490 medication passes. This is a 99.92% medication passing accuracy rate in 2008. 99.81% medication passing accuracy rate in 2007. In 2006 the medication passing accuracy rate was 99.79%. In 2005 the medication passing accuracy rate was 99.82%. In 2004 the medication passing accuracy rate was 99.88%.**

(d) How many incidents of client-to-client aggression this quarter?

	<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>
Jax/Hill	71	12	5	14
Lenawee	23	11	53	20
Livingston	3	0	0	5
Oakland	0	0	0	0
Washtenaw	1	10	3	3
Total	98	33	61	42

Continue tracking baseline data. It is noticed that Client to Client aggression has dropped compared to last year. All consumer behavior plans are reviewed by the Responsible Mental Health Agency at least every 90 days. Total Client to Client aggression has dropped to:

234 in 2008

244 in 2007

251 in 2006

267 in 2005

264 in 2004

338 in 2003

7. Recipient Rights - The number of substantiated rights complaints for the program will be tracked each quarter and compared to past complaints on an annual basis.

(a) Number of substantiated rights complaints

	<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>
Jax/Hill	1	3	0	1
Lenawee	1	3	5	1
Livingston	4	0	3	0
Oakland	0	0	0	3
Washtenaw	3	3	2	4
Total	9	9	10	9

- Renaissance Community Homes Inc. had a total of 37 recipient rights complaints substantiated in 2008. Substantiated Rights complaint to employed staff ratio is 6% (this percentage reflects fewer complaints as well as fewer overall annual employees).** Renaissance Community Homes Inc. had a total of 40 recipient rights complaints substantiated in 2007. 40 Substantiated rights complaints in 2007 divided by 740* employees on payroll in 2007= 5.4% annual employed personnel to substantiated rights ratio. Most were findings of failure to treat with dignity and respect, treatment suitable to condition, or abuse/neglect III. 2006 had a 4% substantiated rights complaint ratio to annual employed personnel. 2% in 2005, 2% in 2004, & 3% in 2003.

Renaissance Community Homes Inc.
Renaissance House Inc.
Annual Quality Improvement Plan & Evaluation 2008-09

2008-09 Quality Improvement Plan

I. Introduction

The Renaissance Leadership Committee (comprised of Administrative and top management personnel constructed the 2008-09 Quality Improvement Plan. The Leadership Committee submits the plan to the Renaissance Community Homes Inc. Executive Board for review and Approval. The Renaissance Quality Improvement plan includes narrative and analysis concerning goal setting and goal attainment. Supported documentation will be presented in a report form.

Renaissance enters into the eleventh year of its Quality Improvement Program. Renaissance uses the Quality Improvement plan to enhance the services we provide as well as comply with contractual requirements with expectations and standards of accrediting and regulatory bodies.

II. Purpose

The purpose of the Quality Improvement plan is to:

- 1. Comply with state and federal laws as well as regulatory and accreditation standards*
- 2. Advance the level of care our organization provides to the people we have the opportunity to serve.*

III. Scope

The Renaissance Community Homes Inc. Quality Improvement Plan addresses the overall operation of the programs. It looks at quality of care, personnel, as well as administrative efficiency. The Quality Improvement Plan is implemented by the employees under the guidance of the Quality Improvement committee and the Operations Manager. The person who has primary responsibility for QI activity will be selected by the Executive Director. That person will have five years experience with the operations of Renaissance Community Homes Inc. The will have received training on Quality Improvement from Responsible Mental Health Agencies and / or set on the RHMA's Quality Improvement / Performance Improvement Committees. The progress of the Quality Improvement Plan is reported to the Executive Board at each meeting.

IV. Goals for 2008-09

Short Term Goals

- 1. Continued improvement in our Outcome Measures as defined by the Corporate Quality Improvement Plan. Our outcome measure should be changing as needed to reflect trends.*
- 2. Continue to identify and increase communication with stakeholders and improve committee structure, and stakeholder representation on corporate committees.*
- 3. Increase and assure consistency of employee training as it relates to the requirements from the agencies we contract with.*
- 4. Remain focused on CARF accreditation principles and assure continued compliance with its standards.*
- 5. Increase personnel's knowledge of corporate policies and their ability to access those policies for reference.*

6. *Continue improvement of our skills to assure accurate compliance to the pre-authorization and electronic billing systems of the agencies we contract with. Including staff compliance in data collection.*
7. *Increase staff competence in serving people who are diagnosed with a co-occurring disorder.*
8. *Develop a structured management training system.*

Long Term Goals

1. *To assure consistent quality care in all our programs by:*
 - a. *Communication with consumers, stakeholders and employees*
 - b. *Comprehensive staff training*
 - c. *Securing adequate resources to sufficiently fund programs*
 - d. *Providing a therapeutic environment*
 - e. *Proposing realistic, relevant, and measurable goals for the people we assist*
 - f. *Protecting the confidentiality of the people we assist*
 - g. *Consistent site review and monitoring*
2. *To protect and improve the health outcomes of the people we assist.*
3. *Be alert to the changes in the Michigan mental health system and changes in Medicaid funding, as well as, being an advocate for the people we serve as they adjust to these changes.*
4. *Promote excellence and accountability in the design and administration of the corporation.*
5. *Assure contract compliance through site accountability and quality communication with responsible mental health agencies.*
6. *Assure revenue sources for the corporation, possibly through creative initiatives like private duty care and contracting with other agencies.*

These Strategic Plan goals were developed at the annual strategic planning meeting.

V. Program Components and Structure

The Renaissance Community Homes Inc. Quality Improvement Plan has six main components. Consumer input, Stakeholder input, Outcome Measures, Personnel Development, Risk Management and Administrative Efficiency. This plan is implemented by the employees under the guidance of the Quality Improvement committee and the Operations Manager.

VI. Program Model

The Quality Improvement Plan includes data collection from programs. Programs provide data of specific outcome measures that are compiled and analyzed. This data and analysis are presented to the Quality Improvement Committee as well as Executive Board. Recommendations are made back to the program if needed.

VII. Roles of Recipients of Service

Renaissance Community Homes Inc. receives consumer input through satisfaction surveys, Suggestion/Complaint processes, and Consumer meetings at their programs as well as Executive Board representation.

VIII. Quality Improvement Committee Structure

The Quality Improvement Committee consists of representative employees from each County/mental health agency Renaissance Community Homes Inc. contract with. Its duties are to review / analyze data, make recommendations, as well as provide vision to future Quality Improvement initiatives. The Quality Improvement Committee meets on a quarterly basis and will

keep notes of attendance and content of meeting. Membership to this committee is by selection of the Executive Director.

IX. *Identifying areas to Monitor*

Renaissance Community Homes Inc. will use its Risk Management Plan and Consumer input to identify areas to monitor, incorporating high risk, high volume and problem prone activities. The Quality Improvement committee will prioritize and recommend action on identified areas. The Quality Improvement Committee will review documentation on improvement activities.

X. *Performance Measures for 2008-09*

2. Consumer satisfaction with services. All consumers from all programs twice a year will be offered a Renaissance Community Homes Inc. CONSUMER SATISFACTION SURVEY. All responses to each item will be compiled. Programs will report the number of surveys distributed, number of surveys collected, and percentage of consumers reporting overall satisfaction. Average response score per item will be over "3". Response rate target will continue to be 85%.
3. Administration/efficiency:
 - a. District Managers will review with the Finance Director how each program did financially over the prior year. A rating will be determined on a scale from 1-5 (5 being highest). The overall financial picture of the program will be looked at including: payroll, overtime, consumables, cost of care income, & more.
 - b. Last year 21 of 30 departments scored a 3 or higher or 70% of departments (programs). In 2009, we set a target of 75% of programs will score a 3 or higher on the overall financial picture of the program. We will continue to work toward this goal
 - c. We will set a target of 50% of supported living programs will receive a 3 or higher.
 - d. Our overtime percentage continues to see a reduction from past years. It should be noted that our OT rate was 6.74% in 2000, 5.22% in 2001, 4.74% in 2002, 4.59% in 2003, 3.90% in 2004, 4.05% in 2005 and 4.04% in 2006, 3.91% in 2007, and 3.43% in 2008. In 2009 we will set a goal of 3.3% annual overall overtime percentage.
4. Staff Retention – This data will be obtained by calculating the percentage of staff working in licensed settings and supported living settings, which includes District Managers and others involved in licensed settings who may not provide direct care, who have worked in the identified setting for over 6 months. .
 - a. In 2009, Renaissance Community Homes Inc. will set as a target that 84% of the overall workforce will have worked in an identified setting for over 6 months. This rate was 79% in 2008. This rate was 78% in 2007. This rate was 81% in 2006
5. Staff Turnover – Over the last six years, Renaissance Community Homes Inc. has tracked the turnover rate of employees. The total amount of people employed during the year divided by the current amount of employees. This is data is taken from the last payroll at the end of the calendar year. This is compiled when the administrative office is preparing W-2's for distribution. The turnover rates for past four years are as follows: 2003 – 153%, 2004 – 127%, 2005 – 76%, 2006 – 52%, 2007 – 65% and in 2008 - 65%. Renaissance Community Homes Inc. will continue to reduce the turnover rate to 55%.
6. Access to Services – This data will be obtained by tracking the number of days between the initial referral and service initiation. Service initiation is defined as the first official contact between the provider and potential consumer. This contact does not have to be face to face. The average number of days will be reported. In 2009, Renaissance Community Homes Inc. will set as a target 2 business days between referral and service initiation (first contact).
7. Medication Errors and Client-to Client aggression. Medication errors and client-to-client aggression will be tracked overall for the corporation. . Data will be compared to previous years.

- a. *A Medication error is defined as any deviation from the specific medication passing procedure. In 2009, Renaissance Community Homes Inc. will set as a target a 99.95% medication passing accuracy rate. In 2008 the accuracy rate was 99.92%*
 - b. *The Client-to-Client Aggression measure continues to be monitored. Analysis of data is difficult due to a very few clients with aggressive behaviors can skew totals. It is felt that this issue still needs to be looked at. All consumer behavior plans are reviewed by the Responsible Mental Health Agencies at least every 90 days. Total Client to Client aggression has dropped to 234 in 2008, 244 in 2007, 251 in 2006, 267 in 2005, 264 in 2004 and 338 in 2003. In 2009, Renaissance Community Homes Inc. will set as a target a reduction to no more than 230 client to client aggressions.*
8. *Recipient Rights - The number of substantiated rights complaints for the program will be tracked each quarter and compared to past complaints on an annual basis. In 2008 Renaissance Community Homes Inc. had a 6% annual employed personnel to substantiated rights ratio. In 2007, Renaissance Community Homes Inc. had a 5% ratio. In 2009 Renaissance Community Homes Inc. will set as a target a 5% substantiated rights complaint ratio to annual employed personnel.*
 9. *Stakeholder Surveys - Renaissance Community Homes Inc. continues to survey stakeholders to measure satisfaction. The survey asks five questions about the following topics: Home appearance, meeting program expectations, timeliness of handling concerns, Employee knowledge of services, and overall satisfaction of Renaissance Community Homes Inc. Last year, the overall totals were as follows:*

	Completely satisfied	Satisfied	Unsatisfied	Not Apply
Appearance of home is acceptable	39.77%	52.27%	5.68%	2.27%
Program meets or exceeds expectation	37.50%	50.00%	11.36%	1.14%
Concerns handled in timely manner	42.05%	46.59%	10.23%	1.14%
Employees knowledge of services	39.77%	46.59%	7.95%	5.68%
Overall satisfied with RCHI services	42.05%	47.73%	9.09%	1.14%
Response Rate	48.35%			

- a. *In 2009, Renaissance Community Homes Inc. will set as a target a 50% response rate.*
- b. *In 2009, Renaissance Community Homes Inc. will achieve over 40% Completely Satisfied in all five questions.*