

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

1. 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%.
2. 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.
3. 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
4. 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%.
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. In 2009, Renaissance Community Homes Inc. will set as a target 2 business days between referral and service initiation (first contact).
6. 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.
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. 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.
8. 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.