

## City of Alexandria, Virginia

## MEMORANDUM

DATE: JUNE 8, 2004

TO: THE HONORABLE MAYOR AND MEMBERS OF CITY COUNCIL

FROM: PHILIP SUNDERLAND, CITY MANAGER <sup>PS</sup>

SUBJECT: CONSIDERATION OF THE ALEXANDRIA COMMUNITY SERVICES BOARD'S (1) AMENDED FY 2005 PLAN OF SERVICES, WHICH INCLUDES THE FY 2005 PERFORMANCE CONTRACT WITH THE STATE, (2) STATUS OF THE BOARD'S FY 2004 - FY 2008 HOUSING PLAN, AND (3) PERFORMANCE AND OUTCOMES MEASUREMENT PLAN

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**ISSUE:** City Council consideration of the Alexandria Community Services Board's (Board's) FY 2005 Plan of Services, which includes the Performance Contract with the Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services; status of the Board's FY 2004 - FY 2008 Housing Plan; and the Board's Performance and Outcomes Measurement Plan.

**RECOMMENDATION:** That City Council approve the Board's amended FY 2005 Plan of Services, which includes approval of the Performance Contract with the State, a net increase of 3.0 full-time FTEs, and no net increase to the Department's budget.

**BACKGROUND:** The Community Services Board is required by State Code to prepare an annual plan of services and have this plan approved by the local governing body. City Council approved the Board's FY 2005 Plan of Services on May 3, 2004, as part of the City's Department of Mental Health, Mental Retardation and Substance Abuse (Department) annual budget. The FY 2005 Plan of Services provides for maintenance of current service levels across the Department for Board services, including outpatient, supported residential (including group homes and supervised apartments), case management, vocational, day support and early intervention and prevention activities. Because the Board received notification of State and federal funding amounts after City Council adopted the FY 2005 budget, the Board is presenting a revised budget and plan for Council review and acceptance.

**DISCUSSION:**

FY 2005 Plan of Services:

The budget on which the approved Plan of Services is based is incorporated in the Board's FY 2005 "Performance Contract." The Performance Contract, an annual agreement with the State that serves as the primary accountability and funding mechanism for the relationship between the Board and the State, specifies funding levels for State and federal funds that are disbursed

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through the State and sets service and reporting requirements for the Board. The FY 2005 Performance Contract is available for review at the Board's administrative offices at 720 North St. Asaph Street.

City Council approved the Board's FY 2005 Plan of Services on May 3, 2004, as part of the City's Department of Mental Health, Mental Retardation and Substance Abuse (Department) annual budget. The initial budget amount for the approved Plan of Services included estimates of State, federal and other funding based on information available at the time the budget was developed. Subsequently, the Board received notification from the State and other funding sources of actual funding levels. Below is a summary of changes made to the budget for the Plan of Services.

- A decrease of \$70,513 to reflect the decrease of a full-time 1.0 FTE Clinical Psychiatrist position to 0.50 FTE due to the anticipated closure of the INOVA inpatient unit. This part-time position was increased to full-time in FY 2004, with the increase to be funded from billing of third party payors for inpatient hospital care and consultation at the hospital. This change will result in a net decrease of \$70,513 in the Department's budget.
- An increase of \$11,592 to reflect a change in the way the Department will be processing food stamp revenue. Previously, residential staff used food stamp EBT (electronic benefits transfer) cards at the grocery store, and the food expenditure did not show up in the Department's budget. Now, however, fiscal staff swipes the EBT cards each month in a machine located at 720 N. St. Asaph Street, causing the food stamp funds to be deposited in the City's bank account. As a result, the budget must be increased to show expenditures for food offset by food stamp revenue. This change will result in a net increase of \$11,592 in the Department's budget.
- A decrease of \$61,163 resulting from the discontinuation of pass-through purchase of service funds from the Northern Virginia Training Center (NVTC) for two consumers. In FY 2003, NVTC requested that the Department purchase vocational services from outside vendors for two Alexandria consumers, using funds provided by NVTC. NVTC has decided to pay the vendors directly starting in FY 2005, resulting in a net decrease to the Department of \$61,163.
- An increase of 2.0 full-time FTE Case Manager positions and 1.0 full-time FTE MH/MR Tech II position in the MH Outpatient unit to address the ongoing critical need for case management in the Outpatient program. One Case Manager position and the MH/MR Tech position will be fully funded by combining various part-time positions. The second Case Manager position will address the Geriatric case management waiting list (identified as a need in the Needs Assessment and at the Public Hearing) and will be funded by billing Medicaid. This change will result in a net increase of \$53,173 in the Department's budget.
- An increase of \$66,911 in State General Funds as part of the FY 2005 State budget. \$4,200 of these funds will be used to increase Family Support funds to accommodate changes in the way the State is designating some MR funds. The remaining funds, in the

amount of \$62,711, will be used, in the short term, to fund one-time facility modifications relating to staff and consumer safety, handicap accessibility, and/or workplace violence prevention. In the long term, the funds will be used to support the Safe Haven ongoing operating budget. These changes will result in a net increase of \$66,911 in the Department's budget.

- An increase of 1.0 full-time FTE Cook position resulting from combining several part-time Cook positions. This action will create a permanent position for an employee who was absorbed by the Department when the ARCH facility was closed and who has been in an overhire status. This change will result in no net increase to the Department.
- A reconfiguration of part-time Residential Detox Counselors in the Detox program, resulting in the elimination of two 16-hour (0.40 FTE) Residential Detox Counselor I positions and the increase of three 24-hour (0.60 FTE) Residential Detox Counselor II positions to 32 hours (0.80 FTE). This change will result in no net increase to the Department.

These additions and deletions result in a net increase of 3.0 full-time FTEs (formed by combining funding from various part-time positions) and no net increase in the Department's budget.

#### Status of FY 2004 – FY 2008 Housing Plan

The Community Services Board conducts a City-wide review every five years to determine housing needs for Alexandrians with mental illness, mental retardation or substance abuse problems and to establish a new five-year housing plan. The current housing plan, covering FY 2004 through FY 2008, was approved by City Council on June 24, 2003. The plan identified four types of housing needed to serve these Alexandrians: safe havens, group homes, condominium or apartment units, and Section 8 certificates.

The plan called for the addition of one safe haven facility for the chronic homeless, four group homes, 15 supervised condominiums or apartment units, and ten Section 8 certificates. In the FY 2005 budget, City Council has approved and provided partial funding for a safe haven facility. The Board is in the process of preparing a grant application to the U.S. Department of Housing and Urban Development (HUD) for additional funding for the planned safe haven facility. The following table summarizes the remaining housing units authorized under this housing plan, should funding become available or additional Section 8 vouchers be authorized for ARHA.

FY 2004 - FY 2008 Housing Plan

Type of Residence	Number of Units Authorized under the Housing Plan	Number of Housing Units Authorized but not yet Delivered	Remaining Number of Beds Authorized but not yet Delivered
Safe Haven	1	0	0
Group Homes	4	4	24
Condos/Apartments	15	15	45
Section 8 Certificates (Adults with Mental Disabilities and/or Substance Abuse Accompanied by Children)	10	10	N/A
Total	30	29	69

No action is requested at this time. The Board will request City Council approval as funding becomes available for additional housing units.

Performance and Outcome Measurement Plan

Attached is the Board's Performance and Outcome Measurement Plan. The plan details performance outcome measures for each of the Board's programs, organized by Division.

**FISCAL IMPACT:** On May 3, 2004, City Council approved the Department of Mental Health, Mental Retardation and Substance Abuse's FY 2005 budget. Incorporating the FY 2005 Performance Contract into the FY 2005 Plan of Services results in a net increase of 3.0 full-time FTEs, and no net increase in the Department's budget.

**ATTACHMENT:** Alexandria Community Services Board Performance and Outcomes Measurement Plan

**STAFF:**

L. Michael Gilmore, Ph.D., Director, Mental Health, Mental Retardation and Substance Abuse  
Jane Hassell, Fiscal Officer, Mental Health, Mental Retardation and Substance Abuse  
Sandy Murphy, Budget Analyst, Office of Management and Budget

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Outpatient Services  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Units of Service Provided. Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90%	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by SA Outpatient Adult Team
Efficiency	Revenue Enhancement: Increase in fee revenue by 5% for FY04 as compared to FY03. * Board Infrastructure priority #1	Anasazi consumer data system	Annual measure by fiscal staff to compare FY03 fee revenues to FY04	For consumers served by MH outpatient program
Effectiveness	75% of consumers discharged from the program will partially or fully meet treatment goals as assessed by clinician and consumer	Anasazi consumer data system	Semi annual review by Dir. Program Eval. of discharge reason	MH and SA adult outpatient consumers who receive at least 4 face to face services
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week.
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Intensive In-Home Youth Services  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Revenue Enhancement: Increase total fee revenues by 10% for FY04 as compared to FY03 * Board Infrastructure priority #1	Anasazi consumer data system	Annual measure by fiscal staff to compare FY03 fee revenues to FY04	For consumers served by Intensive In-Home program
Effectiveness	90% of youth who enter the program living 'at home' will maintain the home placement as reviewed by unit supervisor	Anasazi consumer data system and review by supervisor	Program supervisor reviews housing status of youth served	All In-home youth who enter program with a home placement
Accessibility	85% of FAPT case managers will report positively to question on ease of access to CSB Intensive In-Home services * Board consumer priority #3	Telephone survey of FAPT case managers	Admin or volunteer staff will conduct phone survey annually	Target to reach 50% of FAPT case managers who refer to In-Home services
Satisfaction	85% of families will answer positively on general satisfaction phone survey	Telephone survey	Admin or volunteer staff will conduct phone survey annually	Target to reach 40% of families being served at time of survey

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Youth and Family (MH & SA)  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Units of Service Provided. Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90%	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by MH and SA Youth Outpatient team.
Effectiveness	60% of children aged 4-18 will show an improvement in their behavior as assessed by their therapist and based on parents or guardians input on the CAFAS assessment	CAFAS standard assessment	Assessed at admission, 3 mos, 6 mos and every 6 months till discharge	Assessed by Y&F server. For all Y&F youth with at least 2 assessments during period
Accessibility	85% of consumers will answer positively to questions regarding satisfaction with accessibility to services. * Board consumer priority #3	Telephone survey	Admin or volunteer staff will conduct phone survey annually	Target to reach 40% of families being served at time of survey
Satisfaction	75% of referral sources will answer positively to short questionnaire regarding satisfaction with agency referral process.	Telephone survey	Interns, Admin, volunteer staff will conduct phone survey periodically through the yr	Target to reach referral sources for 60% of consumers referred.
Satisfaction	85% of families will answer positively on general satisfaction phone survey	Telephone survey	Admin or volunteer staff will conduct phone survey annually	Target to reach 40% of families being served at time of survey

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Methadone Program  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Units of Service Provided. Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90% of predicted	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by Methadone program staff
Effectiveness	75% of Methadone program consumers will participate in meaningful daytime activities. Includes work, school, parenting or vocational activities.	Employment status maintained in data system	Collected by servers at quarterly reviews	Reported for consumers served in phase 2 of the program as well as those discharged.
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week.
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week



PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Parent Infant Education Program  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90%	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by MH and SA Youth Outpatient team.
Effectiveness	75% of children who in their annual review show improvement in at least one area of development or have progressed to age appropriate development after receiving therapeutic services	Review of child's goals by PIE program supervisor	Reported semi-annually on quarterly reviews of child progress by vendor	At least 50% sample of children who receive therapeutic services
Accessibility	100% of consumers who are eligible for PIE services and are progressing toward IFSP (Individual Family Services Plan) who complete IFSP within 45 days of referral. * Board consumer priority #3	Program supervisor	Data maintained at program level by supervisor	All children eligible for services
Satisfaction	85% of consumers will answer positively to questions regarding overall satisfaction with services on Family Survey	Family Survey (Part C)	Conducted over phone by PIE admin staff	All families who are reached in phone survey attempt who have completed the IFSP

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Emergency Services  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Revenue Enhancement: Increase in fee revenue of 5% for FY04 as compared to FY03 * Board Infrastructure priority #1	Anasazi consumer data system	Annual measure by fiscal staff to compare FY03 fee revenues to FY04	For consumers served by Emergency Services
Effectiveness	75% of consumers receiving emergency services will report a 'more hopeful' mental status as a result of emergency service	Mini-survey provided to consumers at end of service	Survey given to consumers by service provider	All consumers who are able to respond and are not being hospitalized
Accessibility	75% of consumers receiving emergency services will report positively on question regarding consumer perception of wait time for service.	Mini-survey provided to consumers at end of service	Survey given to consumers by service provider	All consumers who are able to respond and are not being hospitalized
Satisfaction	85% of consumers will answer positively to questions regarding satisfaction with service on mini-survey	Mini-survey provided to consumers at end of service	Survey given to consumers by service provider	All consumers who are able to respond and are not being hospitalized

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Jail Services  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Decrease cost per consumer over all Jail programs by 3% * Board Infrastructure priority #1	Anasazi data system	Measured annually with expenditures and consumers served	For all consumers served in Jail programs.
Effectiveness	75% of consumers receiving Jail services will report a 'more hopeful' mental status as a result of service	Mini-survey provided to consumers at end of service	Survey given to consumers by service provider	All consumers who receive CCU and Jail outpatient and emergency services
Effectiveness	95% of consumers will report progress toward meeting goals as collected three times during program	Consumer report on scale of 1-10 on status of meeting goals	Collected 3 times during treatment at admission, 'life story' and pre discharge	All consumers who complete Sober Living Program
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week who are in CCU or SLU programs
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week who are in CCU or SLU programs

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Detox Services  
Division: Acute Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	The program will maintain a 75% bed utilization for all programs (DETO, WALK, PODI) on 22 beds.	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All consumers utilizing beds on Detox unit
Effectiveness	100% of the consumers who are repeat customers within 90 days of discharge will be dually diagnosed. (Due to possible unmet MH needs and SA only consumers will not require readmission within 90 days)	Anasazi consumer data system	Quarterly by Dir. Program Evaluation through Anasazi reports	All consumers utilizing beds on Detox unit
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during the year	All served during the year upon discharge
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during the year	All served during the year upon discharge

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: MH/SA Case Management  
Division: Extended Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90% of predicted	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by MH and SA Case Mgmt team.
Effectiveness	Maintain or Improvement in Functioning in 4 areas. Servers will answer 4 questions at admission and quarterly regarding consumer 1) acceptance of illness, 2)Medication compliance, 3) Alcohol/Drug abuse, and 4) Impulse Control. 75% will maintain or improve on scaled questions	To begin, will be collected on paper form and later incorporated into ATP Case Mgmt quarterly review.	Collected by case managers at intake and quarterly	Sample is all case mgmt consumers
Effectiveness	Linkage to Mental Health Services: Percentage of homeless consumers with mental illness and served by homeless coordinator who are successfully linked to MH services.	Homeless coordinator keeps statistics of this for PATH grant	quarterly by homeless coordinator	Sample is all homeless consumers served
Effectiveness	For all consumers discharged from a State hospital, 90% will be seen face to face by a non-emergency services staff member within 7 days of discharge.	Monthly State discharge summary and Anasazi services	Dir. Program Evaluation receives State report and reviews client data system for services	All consumers discharged from State hospital
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week.
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: MR Case Management  
Division: Extended Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90% of predicted	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by MR Case Mgmt team.
Effectiveness	90% of consumers or Authorized representatives will answer positively to the question "Does your new CSP (service plan) include services that you need and want"?	Annual Post CSP survey conducted at the annual service plan meeting	Survey is handed out at meeting and mailed back to CSB	All consumers or authorized reps are given the survey at the time of the annual plan
Accessibility	90% of consumers or Authorized representatives will answer positively to the question "Did you have an opportunity to express your opinions and did staff pay attention to these opinions"?	Annual Post CSP survey conducted at the annual service plan meeting	Survey is handed out at meeting and mailed back to CSB	All consumers or authorized reps are given the survey at the time of the annual plan
Satisfaction	90% of consumers or Authorized representatives will answer positively to the question "Were you satisfied with the services provided during the past CSP year"?	Annual Post CSP survey conducted at the annual service plan meeting	Survey is handed out at meeting and mailed back to CSB	All consumers or authorized reps are given the survey at the time of the annual plan

## PERFORMANCE AND OUTCOMES MEASUREMENT

**Program Name:** Psychosocial Rehabilitation

**Division:** Extended Care

**Evaluation Period:** FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Revenue Enhancement: Increase fee revenue by 3% during the year. * Board Infrastructure priority #1	Anasazi consumer data system	Annual measure by fiscal staff to compare FY03 fee revenues to FY04	For all consumers served in the program.
Effectiveness	80% of consumers served in the program will be maintained in the community without hospitalization.	Anasazi consumer data system	Semi annual review by Dir. Program Evaluation of hospitalization of consumers	All consumers served in program compared to those who are hospitalized
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week.
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: SA Day Support Program  
Division: Extended Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Reduce average length of stay of consumers in program from current 7 months to 6 months through development of ISP reflecting program LOS and timely completion of assignments	Anasazi consumer data system	Annual review by Dir. Program Eval. using length of stay report	All consumers discharged from program during Jan - Jun 2004
Effectiveness	65% of consumers discharged from Day Support will not be admitted to Detox within 6 months of discharge	Anasazi consumer data system	Semi-annual review by Dir Program Evaluation	All day support discharges and those with Detox admissions
Accessibility	Average length of time on wait list will not exceed 45 days. * Board consumer priority #3	Wait list data maintained by program	Reported in Division monthly report	Includes all consumers waiting for day support services
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week



PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Residential Services  
Division: Extended Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Number and Percentage of bed days and staff hours (for supported living) provided as a function of predicted units of service as projected in State Performance Contract. Benchmark = 90%	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All residential services
Effectiveness	60% of consumers will maintain or show improvement in functioning as measured by the Multnomah Community Ability Scale	MCAS scores in assessment system	Collected at admission, 6 mos, 12 mos and annually	Assessed by Sr. res, counselors for HUD consumers and by server for Supported Living program
Effectiveness	60% of consumers who are discharged from residential programs will transition to a similar or less intensive housing situation	Anasazi consumer data system and residential coordinator review	Discharges as noted in data system are reviewed for new type of housing	MH and SA group home and supervised apt consumers
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served at time survey is conducted
Satisfaction	85% of developmentally delayed consumers will respond positively to questions on the Residential Lifestyle satisfaction survey	Lifestyle satisfaction survey	Annually by residential counselors	All verbal developmentally delayed consumers served by res. pgms.
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served at time survey is conducted

## PERFORMANCE AND OUTCOMES MEASUREMENT

**Program Name:** MH Vocational Services  
**Division:** Extended Care                      **Evaluation Period:** FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Revenue Enhancement: Increase fee revenue by 10% during the year through DRS billing for situational assessments, job development, placement and training * Board Infrastructure priority #1	Anasazi consumer data system	Annual measure by fiscal staff to compare FY03 fee revenues to FY04	For all consumers served in the program.
Effectiveness	75% of consumers will self report improvement in meeting vocational goals as determined on vocational services survey .	Vocational services survey	Twice annually by program staff	Provided to all consumers who are both 'job holders' and 'job seekers'
Accessibility	85% of consumers will answer positively to questions 4-8 of State standard survey regarding satisfaction with accessibility to services. * Board consumer priority #3	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week.
Satisfaction	85% of consumers will answer positively to questions 1-3 of State standard survey regarding overall satisfaction with services.	State standard satisfaction survey	Annual survey of all consumers served during 1 week	All served during one week

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: MR Vocational & Day Support Services  
Division: Extended Care                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Number and Percentage of units of service provided as a function of predicted units of service as projected in State Performance Contract. Benchmark = 90% of predicted	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All vocational and day support services for the developmentally delayed
Effectiveness	Average hours of work per day completed by day support consumers will equal 5 hours per day.	Data maintained by Dir. Voc. Services	Recorded daily by staff	Reported monthly by Voc. Services Director.
Effectiveness	Consumers will increase wages by minimum of 2% from FY03 to FY04 as measured in enclave time study performed annually by employer.	Employer time study	Annually, in May	All group employment consumers
Accessibility	85% of verbal consumers will answer positively to the accessibility question on the day support Lifestyle Satisfaction Survey.	Survey conducted by day support staff	Annually	All consumers in vocational or day support program at Colvin Street
Satisfaction	85% of developmentally delayed consumers will respond positively to questions on the Voc/Day Support Lifestyle satisfaction survey	Lifestyle satisfaction survey	Annually by day support staff	All verbal developmentally delayed consumers served by res. pgms.

PERFORMANCE AND OUTCOMES MEASUREMENT

Program Name: Prevention/Early Intervention  
Training and Public Information  
Division: Prevention                      Evaluation Period: FY 2005

Domain: Effectiveness, Efficiency, Satisfaction, Accessibility	Measurable Objective	Data Source	How, When and by Whom Data is Collected	Collected from Whom/ Number in Sample
Efficiency	Number and Percentage of staff hours of service provided as a function of predicted hours of service as projected in State Performance Contract. Benchmark = 90% of predicted	Anasazi consumer data system	Monthly, by Dir. Program Evaluation through Anasazi reports	All services provided by all Prevention and EI staff
Effectiveness	75% of attendees of Prevention presentations or consultations and Early Intervention programs will show positive change in attitudes toward risk behaviors as assessed through pre and post tests.	Paper pre and post tests	Prevention and EI staff conduct pre and post tests during the year	All recipients of services will do pre and post tests. Reported in monthly report
Effectiveness	75% of child participants in pre schools will show an increase in social skills and decrease in aggressiveness as evidenced by a change in scores on assessment instrument	Preschool Kindergarten behavior scale (PKBS)	Collected 3 times over course of pgm by prevention staff	Reported at end of year in annual report
Effectiveness	75% of top ten employee training needs as identified in the training needs assessment survey will be offered to employees annually	Training needs assessment and training annual report	Annually by Director of Training & Consultation	Data from all employee needs assessments and training provided
Accessibility	Information dissemination to the general public will increase by 10% this year through a combination of printed materials and website access to the public.	Website ‘hits’ information and printing of paper materials	Public information officer	All information provided by CSB
Accessibility	85% of consumers will answer positively to questions regarding accessibility to services.	Short paper survey	Prevention/EI staff distribute and collect surveys when programs occur	Continuously during the year
Satisfaction	85% of consumers will answer positively to questions regarding satisfaction with services.	Short paper survey	Prevention/EI staff distribute and collect surveys when programs occur	Continuously during the year