

FY 2017-18	STRATEGIC PERFORMANCE MEASURES		TARGET				1st Qtr.	2nd Qtr.
ORGANIZATIONAL								
Goal 1: Maintain Positive Employee Morale	85%	1x/year					NA	85%
scores)	85%						85%	97%
Goal 3: Access to Service by intensity	Emergent	96%					100%	100%
(Emergency-same day, Urgent-within 24 hours, Routine-within 7 days)	Urgent	96%					100%	100%
	Routine	96%					100%	100%
Goal 4: Maintain appropriate staffing levels (Overtime usage)	reduce (-)10%						-13%	38%
Goal 5: Community Outreach	60 per Qtr						77	61
Goal 6: Stakeholder Satisfaction	85%						NA	100%
ADMINISTRATIVE AND SUPPORT SERVICES								
Goal 1: Maintain a Collection rate of 80%	80%						121%	121%
Goal 2: Number of Admissions	450 per Qtr.						442	419
Goal 3: Number of Discharges	Varies w/caseloads						395	278
Goal 4: Discharges - Process Time	5 days						3	3
Goal 5: Release of Information forms - Process Time	14 days						2	2
BEHAVIORAL HEALTH SERVICES								
Goal 1: Clients Involuntarily Hospitalized	Average per quarter	<30 admits					34	27
Goal 2: External Outpatient Chart Review	85%						None	Pending
PREVENTION								
Goal1: STAR will serve 750 participants yearly	750						2,222	NA
Goal 2:Prevention Peer Reviews 2x per year	85%						100%	NA
Goal 3: Prevention Student Satisfaction Surveys	85%						86%	NA
RESIDENTIAL								
Goal 1: Psychosocial Rehabilitation (RISE) Program Occupancy Rate	85%						54%	54%
Goal 2: Cottage Residential Occupancy Rate	85%						83%	91%
Goal 3: Lodge Residential Occupancy Rate	85%						88%	89%
DEMOGRAPHICS								
Goal 1: Populations Served - Unduplicated	Number served						3,477	3,280
Goal 2: Adult Mental Health Persons Served	877 annually	AMH					2,900	2,855
Goal 3: Adult Substance Abuse Clients Served	360 annually	ASA					1,119	1,191
Goal 4: Children Mental Health Persons Served	406 annually	CMH					750	829
Goal 4: Children Substance Abuse Persons Served	75 annually	CSA					126	141
COMMUNITY ACTION TEAM								
Goal 1: CAT will serve 60 Unduplicated Participants per year	30 served per Qtr						42	38
Goal 2: CAT Peer Reviews Quarterly	85%						97%	94%
Goal 3: CAT Client Satisfaction Surveys	85%						93%	99%
Goal 4: CAT Clients - Improved Attendance and Education concerns	Improvement	Attendance					1%	6%
		Performance					54%	Waiting
SAFETY MANAGEMENT SERVICES								
Goal 1: SMS will serve 131 participants	131	33 per Qtr					47	38

Goal 2: SMS Peer Reviews Quarterly	85%		100%	96%
Goal 3: SMS Clients will Participate in Services	100%		100%	100%
Goal 4: SMS Client Satisfaction Surveys	85%		80%	96%
WRAP-AROUND SERVICES				
Goal 1: WAS will serve 131 participants	131	33 per Qtr	31	44
Goal 2: WAS Peer Reviews Quarterly	85%		94%	100%
Goal 3: WAS Clients will Participate in Services	100%		100%	100%
Goal 4: WAS Client Satisfaction Surveys	85%		100%	99%
FAMILY CARE ASSESSMENT PROGRAM	Referrals		17	13
Goal 1: Client Intake Process Time	7 days avg		Waiting	37+days
Goal 2: Completion of Assessment Report to Referral Source	7 days avg		Waiting	11 days
Client Diagnoses	Number Dx	SA diagnosis	388	356
Client Diagnosis (Informational)		Top 3 MH dx	2,030	1,778
Peer Reviews				
Goal 1: Maintain an 85% compliance rate for Clinical Peer Reviews.	85%		82%	Waiting
Goal 2: Maintain an 85% compliance rate for Record Reviews.	85%		83%	86%
Goal 3: Maintain an 85% compliance rate for Physician's Peer Review.	85%		73%	86%
No Show Rates and Measures	Goal 1: Monitor No Show		12%	12%
Panhandle 2-1-1 Helpline				
HelpLine/211(Informational)	Qtrly		3,117	2,885
Goal 2: Track average hold time	<.60 sec		0.09	0.00
Goal 3: Track Average Time until call accepted	<.25 sec		0.22	0.25
Goal 3: Track Call Accepted percentage	90% goal		89%	88%
BAKER ACT MEASURES	Qtrly	Indigent (BA Match	46	25
Goal 1: Track clients under Baker Act by Fund Source.		Medicaid (FFS)	13	17
		Medicaid (Humana	7	8
		Medicaid (Integral)	8	12
		Other pay source	27	19
Goal 2: Monitor number of bed days used by clients under Baker Act by Fund Source.	Qtrly	Indigent (BA Match	311	341
		Medicaid (FFS)	70	124
		Medicaid (Humana	63	34
		Medicaid (Integral)	34	136
		Other pay source	362	180
Goal 3: Track number of Medicaid HMO (Carve-out) clients whose length of stay is >3 days in CSU.	Qtrly		8	10
Goal 4: Track total number of clients whose length of stay is more than 14 days in a CSU.	Qtrly		12	8
Goal 5: Track Baker Act Funded Clients whose length of stay in a CSU is 3 days or more.	Qtrly		19	21
Goal 6: Monitor number of Baker Acts initiated by agency quarterly.	Qtrly		0	0
Services.	7 days		No report	No report
Management.	7 days		33%	44%