

P O L K | C O U N T Y
H E A L T H | S E R V I C E S

The greatest power a person possesses is the power to choose.

~J. Martin Kohe

COMMUNITY LIVING SCORECARD DEFINITIONS & DATA REPORTING

SCORECARD OVERVIEW

It is valuable for participant stakeholders to have information and ask questions in order to make a good decision about which agency can best promote individuals into reaching their maximum potential and to realize their value to the community. As a Polk County Network, we collaborate and foster individual growth by helping people to make informed choices and supporting them through the natural consequences of decision making. Polk County Network Community Living Service Providers include: Behavior Technologies, Broadlawns, Candeo, ChildServe, Christian Opportunity Center, Crest, Easter Seals, Eyerly-Ball, H.O.P.E, Link Associates, Lutheran Services in Iowa, Mainstream Living, Mosaic, Optimae LifeServices, Progress Industries, and The Homestead. The Community Living Scorecard provides an overview of who is receiving supported community living services as well as how the agency supports people with disabilities. This overview provides the pieces of a puzzle that when connected make a picture for participant, family, agency, and funder stakeholders.

- Comment: PolkMIS is Polk County's management information system and available at [<https://pchsmis.pchsia.org/DesktopDefault.aspx>]. Agencies are able to access data through the Polk County z drive via agency folders.
- Comment: Data is collected by program for individuals with Polk County legal settlement with Polk County Case or Service Management. Polk County Targeted Case Managers (TCMs) and Service Coordinators (SCs) enter service authorizations based on individuals enrolled in coordination programs. While TCMs & SCs enter the coordination authorization into PolkMIS, currently they do not enter community living service authorizations for individuals with state case status, another county of legal settlement and individuals enrolled in the BI waiver program but with a developmental disability.
- Comment: Event entries do not overlap, rather the new event's start date is the day after the old event's end date (e.g. event type start date-01/01/10 and end date-03/30/10 the new event would be event type start date-03/31/10).
- Comment: When needing to delete events, choose "error" as the event group and event type.
- Comment: When entering a disenrollment event for someone, the disenrollment event start date is the last day the person was in your program and you do not enter an end date. Close out all the other open events with that same date (the last day person was served).

SCORECARD INDICATOR: INDIVIDUALS SERVED

- Purpose: Provide an overview of individuals served by population group
- Definition: Intellectual & Other Developmental Disabilities: ID & DD population groups as defined by PolkMIS
- Definition: Mental Health: NCMI & CMI population groups (per Iowa Code) as defined by PolkMIS
- Definition: Other Individuals Served (Non-Polk County): Individuals served in the Polk County community

living program without Polk County legal settlement.
Data Entry: Provider ~ spreadsheet, quarterly
NA (ID/DD/CMI) ~ query PolkMIS for population groups based on community living retention events
Measure: Average number of individuals served
Framework: Table ~ Population Groups by Agency

SCORECARD INDICATOR: LEVEL OF SUPPORT (LOS)

Purpose: Provide an overview of individuals served by intensity of supports
Definition: Level of Support Grid (LOCUS & ICAP): The Level of Support Determination Grid outlines service eligibility levels based on LOCUS and ICAP scores. (See also PCHS Operations Manual, Section VIII.)
Data Entry: NA ~ query PolkMIS for levels of support based on community living retention events
Measure: Percent of individuals served by level
Framework: Graph ~ Agency by Level of Support (levels 2 – 6)

SCORECARD INDICATOR: AGE

Purpose: Provide an overview of individuals served by age group
Data Entry: NA ~ query PolkMIS for date of birth (and calculate age) based on community living retention events
Measure: Percent of individuals served by age category
Framework: Graph ~ Agency by Age Category (0–19, 20–29, 30–39, 40–49, 50–59, 60–69, 70–79, 80+)

SCORECARD INDICATOR: DEMONSTRATE LONG-TERM COMMITMENT

Purpose: Provide ongoing partnerships between individuals served and the provider agency. Changing living environments is stressful—it is important that individual supports are adjusted to support the individual and facilitate smooth transitions.

Definition: Agency Enrollment: (TBD) Agency enrollment is when the individual begins receiving services and ends when the individual is no longer receiving any kind of community living services from the agency. Retention is calculated based on the event start date.

Definition: Negative Disenrollment: (TBD) Negative disenrollments include when an agency initiates the individual's disenrollment, the individual is displeased with services, the individual refuses to participate, and the individual is disenrolled to prison.

Definition: Positive Disenrollment: (TBD) Positive disenrollment is when an individual no longer needs services.

Definition: Neutral Disenrollment: (TBD) Neutral disenrollments include when an individual discharges due to a change in level of support or death.

Data Entry: 1. Targeted Case Manager/Service Coordinator ~ TCM/SC enters an event with a start date of when the individual served first began working with the provider agency. ***(From May, 2011–Dec, 2011, coordination staff will work with providers to create these events in conjunction with updating the individual's annual plan.)***
2. Targeted Case Manager/Service Coordinator ~ When a service authorization is ended early, the TCM/SC should enter a service terminated date and service termination reason.

Measures: 1. Percent of individuals supported by retention category
2. Percent of individuals disenrolled by disenrollment type

Framework: Graph ~ Agency by Retention (TBD--0–90 days, 90 days–1 year, 1–2 years, 2.1 – 5 years, Over 5 years) and Disenrollment (Negative, Positive, Neutral) Categories

SCORECARD INDICATOR: INCREASE DIRECT SUPPORT STAFF STABILITY

Purpose:	Provide Direct Support Staff with the knowledge, tools, and support to meet individuals' needs
Definition:	<u>Community Living Staff Turnover</u> : Based on individuals who directly support individuals served (direct support, program coordinators/program administrators/direct support supervisors).
Data Entry:	Provider ~ spreadsheet, quarterly
Formula:	$(\text{Total number of Community Living Staff who left during the quarter}) / (\text{Average total number of Community Living Staff employed during the quarter})$
Measure:	Staff Turnover Percentage
Framework:	Graph ~ Staff Turnover by Agency

SCORECARD INDICATOR: INCREASE DIRECT STAFF SATISFACTION

Purpose:	Promote staff stability.
Definition:	<u>Direct Support Staff Survey</u> : <ul style="list-style-type: none">▪ How satisfied are you with your job overall? (1=Not happy at all/10 = Ecstatic).▪ How do you feel about your benefits at [provider agency]? (1=Terrible/10=Great)▪ How do you feel about the pay levels at [provider agency] as compared to similar providers? (1=Worse than most/10=Better than most)▪ How do you feel about the employee review system at [provider agency] (1 =Hate it/10=Love it)▪ How is the overall morale at [provider agency]? (1=Awful/10=Wonderful)▪ How do you feel about the responsibilities of your job? (1=Too little/10=Too much)▪ How effective is your manager or supervisor? (1=Very poor/10=Very good)▪ Why do you come to work every day? (Narrative)▪ How does [provider agency] compare with your previous employers? (1=Worse/5=Same/10=Much Better)▪ How long have you worked for [provider agency]? (Narrative)▪ How do you feel about the training and orientation program you experienced when you started? Do you feel you understand the procedures, policies, and responsibilities that are part of your job? How would you change things? (Narrative)▪ What do you like least about your job and/or [provider agency]? Please explain (Narrative)▪ What do you like most about the job and/or [provider agency]? Please explain (Narrative)▪ What would you change if you were the CEO/Executive Director? (Narrative)
Data Entry:	NA ~ On-line Survey
Measure:	Increase Direct Support Staff satisfaction.
Framework:	Percent of satisfied Direct Support Staff.

SCORECARD INDICATOR: INCREASE PARTICIPANT SATISFACTION

Purpose:	Promote participant satisfaction with services and supports
Definition:	<u>Participant Satisfaction Survey</u> : <ul style="list-style-type: none">▪ I know how to get a hold of staff if I have an emergency (i.e., I need medical attention, there is something that needs fixed at my home). (Agree/Disagree)▪ My [provider agency] staff provides the support that I need to be able to continue living in the community. (Agree/Disagree)

- If you could change one or two things about [provider agency]'s services and supports to make them better, what would you change? (Narrative)
- What are one or two things about [provider agency]'s services and supports that have really improved your life? (Narrative)
- My [provider agency] staff talk to me about what services and supports I need and when I want them. (Agree/Disagree)
- My [provider agency] staff help me to become more independent. (Agree/Disagree)
- My [provider agency] staff are responsive to my needs. (Agree/Disagree)
- My [provider agency] staff treat me with respect. (Agree/Disagree)
- I am satisfied with the services and supports that [provider agency] staff provide me. (Agree/Disagree)
- If a friend were in need of similar help, I would recommend [provider agency] to them. (Agree/Disagree)

Data Entry: NA ~ Phone Survey
 Measure: Increase service satisfaction.
 Framework: Percent of satisfied participants.

SCORECARD INDICATOR: INCREASE CONCERNED OTHER SATISFACTION

Purpose: Promote concerned others (parents', guardians', family members') satisfaction with services and supports

Definition: Concerned Others' Survey:

- I know how to get a hold of [provider agency] staff if I need to contact staff. (Agree/Disagree)
- My [provider agency] staff provide the support that my concerned other needs to be able to continue living in the community. (Agree/Disagree)
- If you could change one or two things about [provider agency]'s services and supports to make them better, what would you change? (Narrative)
- What are one or two things about [provider agency]'s services and supports that have really improved your concerned other's life? (Narrative)
- [Provider agency] staff provide the supports for my concerned other to stay healthy and safe. (Agree/Disagree).
- [Provider agency] staff help my concerned other to become more independent. (Agree/Disagree)
- [Provider agency] staff are responsive to my concerned other's needs. (Agree/Disagree)
- [Provider agency] staff treat me and my concerned other with respect. (Agree/Disagree)
- I am satisfied with the services and supports that [provider agency] staff provide my concerned other. (Agree/Disagree)
- I would recommend [provider agency] to a friend. (Agree/Disagree)

Data Entry: NA ~ Phone Survey
 Measure: Increase satisfaction for concerned others.
 Framework: Percent satisfied concerned others.

SCORECARD INDICATOR: INCREASE PARTICIPANT QUALITY OF LIFE

Purpose: Promote individuals served into reaching their maximum potential and to realize their value to the community

Definition: Quality of Life Survey:

- I deal more effectively with daily problems (Agree/Disagree).
- I am better able to control my life (Agree/Disagree).
- I am better able to deal with crisis (Narrative).
- I am getting along better with my family (Narrative).
- I am participating more in activities in the community (i.e. social situations) (Agree/Disagree).
- I do better at home, in school and/or at work (Agree/Disagree or NA).
- My housing situation has improved (Agree/Disagree).
- I feel safe where I am living (Agree/Disagree).
- I can continue to afford to live where I am living (Agree/Disagree).
- I can get around by myself where I am living (Agree/Disagree).
- I want to continue living where I am living (Agree/Disagree).

Data Entry: NA ~ Phone Survey

Measure: Increase satisfaction with housing, employment, education, and recreation/leisure activities.

Framework: Percent satisfied with the quality of life.

SYSTEM PARTICIPANT OUTCOMES

Scorecard Indicators also align with system values and outcomes--this connectivity is critical to minimize fragmentation that may occur when multiple funding streams, services, and agencies are involved in supporting individuals. System outcomes are tracked by Coordination (Target Case Management, Service Coordination, and Integrated Service Agency) staff. Outcome areas include:

- Community Housing ~ the percentage of individuals living in safe, affordable, accessible, and acceptable living environments
- Homelessness ~ the average number of nights spent in a homeless shelter or on the street per consumer per year
- Involvement in the Criminal Justice System ~ the average number of jail days utilized per consumer per year
- Employment: Working at Self-Sufficiency ~ the percentage of employable adults with disabilities working 20 or more hours a week at or above minimum wage
- Employment: Working Toward Self-Sufficiency ~ the percentage of employable adults with disabilities working between 5 and 19 hours a week at or above minimum wage
- Education ~ the percentage of employable consumers involved in continuing education during the fiscal year
- Education ~ involvement in educational settings
- Transition ~ the percent of individuals participating in 3 different transitional activity types per year
- Participant Satisfaction ~ the percentage of participants which reported satisfaction of services received
- Participant Empowerment ~ the percentage of consumers having an empowerment plan
- Family Satisfaction ~ the percentage of concerned others which reported satisfaction of services received for their family member
- Access to Somatic Care ~ the percentage of consumers receiving somatic care
- Community Inclusion ~ the percentage of consumers accessing and having ongoing involvement in 1 or more different community activities per year
- Negative Disenrollment ~ the percentage of consumers negatively disenrolled
- Hospital Bed Days ~ the average number of hospital days per consumer per year
- Emergency Room Visits ~ the average number of emergency room visits per consumer per year
- Improve Quality of Life ~ the percentage of consumers satisfied with their quality of life

AREAS TO DEVELOP LATER...

SCORECARD INDICATOR: COST EFFICIENT SERVICES

Purpose:	Meet individual need in community-based settings given limited disability funding
Definition:	TBD
Data Entry:	TBD ~ explore if there is a way to pull indicator from D-4 database
Measure:	TBD
Framework:	TBD

HOW CAN YOU HELP ME? QUESTIONS: [TBD]

- How will my opinions be included when planning for services?
- How will services be individualized to meet my needs?
- What opportunities are available for my family to participate?
- How do you use information about participant service satisfaction and outcomes?
- What makes you different from other providers?
- If I need transportation, how will you help me? How much will it cost?
- What kind of training do staff members receive?
- How many people with disabilities do you employ and what do they do?
- How many people with disabilities are on your Board of Directors?
- Please give me an example of when a customer was unhappy with your service and what you did about it.