

Policy No. 8  
Replaces Policy No. 8

Issued: 09-26-97  
Revised: 11-13-24  
Reviewed: 11-13-24

SUBJECT: Information Management and Performance Improvement

PURPOSE: To establish policy for the collection of data to measure the outcomes of program and quality of life issues of the organization.

PRINCIPLE: To objectively monitor and circulate the effectiveness and efficiency of the services provided and satisfaction of the consumers supported.

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Our Woodhaven Mission: A caring team advocating for those with disabilities:

- Enhancing lives
- Respecting individuality
- Providing quality opportunities for choice
- Promoting community membership

Recommendations of changes for improvement and organizational planning shall be implemented as necessary. All data shall be disseminated to appropriate persons.

Monthly progress reports are completed regarding individualized objectives in the IP. On an annual basis persons served, family members and advocates will be given the opportunity to evaluate the services of each program.

In order that quarterly data can be compiled and results available for reporting on a quarterly basis to the Management Team, the reporting quarters will be defined as follows:

First Quarter	January, February, March
Second Quarter	April, May, June
Third Quarter	July, August, September
Fourth Quarter	October, November, December

During the quarterly program assessment reviews, a sample of consumers receiving direct support of those programs will be given the opportunity to evaluate and give input as to how services can be improved. Program and Quality of Life reviews are completed on a quarterly basis (see Procedure 1-9-11 Quality Assurance Team).

Recommendations from the Quality Enhancement Team will be reviewed one month after the Program Manager has received the recommendations to determine if action is required. Recommended trends that are identified by the Quality Enhancement Team will be assessed to determine if there is a need to establish these measures as primary objectives of the system.

For each primary objective and supplemental measures, the Program Manager or Director will compile data for their homes or program on a quarterly basis. The data will be routed to the Chief Mission Officer and shared with the Quality Enhancement Team by the tenth day of the month following each quarter.

Once the data is received by the Quality Enhancement Team, it will be assessed and summarized. The results will then be disseminated to the Chief Executive Officer, Chief Operating Officer, and program staff on a quarterly basis for review and comments. Data collected is utilized to identify trends throughout the organization and changes are implemented as needed to respond to trends. All organization strategic planning includes the careful evaluation of this data.

Supplemental measures from prior year will be assessed to determine if progress is occurring regarding unsatisfactory trends. The baseline data will be used to determine if there is a need to establish these measures as potential primary objectives of the system.

SUBJECT: Outcome Measures

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An annual Information Management and Performance Improvement report will be completed by the end of April after the previous year end. The report will be dispersed to all stakeholders: persons supported, funders, guardians, staff, board of directors, etc.

**INDICATORS OF QUALITY AND STABILITY** - In addition to areas of outcome measured as indicated to the previous sections, Woodhaven measures stability, efficiency and effectiveness in other areas that have an impact on the quality of services of persons supported. These areas of measurement include, but are not limited to:

- New Employee Hiring/Screening Process
- Training and development
- Communications
- Planning
- Risk Management
- Risk Assessment
- Accessibility Reviews
- Critical Incident Reviews
- Emergency Drills
- Medication Errors
- Consumer Injuries
- Vehicle Accidents
- Staff turnover and retention
- Recruitment efforts
- Longevity of vacant positions
- Employee competency
- Job Performance reviews
- Injuries of employees (Safety and Health Committee)
- Impact of Employee Relations Committee (Procedure 4-10-21)
- Staff Opinion/Work Culture Survey
- Consumer Satisfaction Surveys are conducted annually
- Abuse/Neglect Allegations  
(See Annual Report)
- Exit Summary
- Annual HR Recruitment/Retention Report

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Chief Executive Officer

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Board of Directors President