**EDWIN FAIR COMMUNITY MENTAL HEALTH CENTER, INC.**

 **PROGRAM EVALUATION PLAN**

**POLICY:**

The effectiveness of each program will be monitored and evaluated by the Management Team and the Board of Directors on an ongoing basis. This ongoing performance improvement program isdesigned to objectively and systematically monitor, evaluate and improve the quality of consumer care. The Performance improvement program shall also address the fiscal management of theorganization.

**PROCEDURES:**

The specific components of the program evaluation process are:

 1. Programs will be continuously monitored and performance data reviewed by the Management Team in their weekly meetings. Management will identify eachprograms measures and outcomes and provide feedback as needed on the efficiency, effectiveness and consumer satisfaction of each program.

 2. Monthly review of the QI/RU report (including critical indicators).

3. Edwin Fair Compliance Coordinator will continuously review and audit chartsto insure:

1. Assessments are thorough, timely and complete

b) Treatment goals and objectives are based on, at a minimum on assessment findings, and consumer input

c) Services provided are related to the treatment plan goals and objectives

d) Services are documented as prescribed by policy;

e) The service plan is reviewed and updated as prescribed by policy.

 4. Quarterly review of the status of the Strategic Plan. The plan shall define specific

 tasks, including actions regarding the organizations co-occurring capability set

 target dates and designated staff responsible for carrying out the procedures

 and plans.

 5. Annual review of the independent financial audit.

 6. Review of DMH audits, Health Care Authority audits, and CARF Accreditation

 review.

7. Annual performance plan on facility goals and objectives, including the goal of continued progress for the agency in providing recovery oriented, culturally competent, trauma informed and co-occurring capable services.

8. Management team will provide training for improvements and orupdated information for the agency’s co-occurring capability, the use of self-assessment tools, provision of trauma informed services, culturally competent, consumer driven services as well as informational training will be provided annually to the agency personnel.

Performance improvement findings shall be communicated and made available to, among others:

(1) The governing authority;

(2) Facility staff;

(3) Consumers;

(4) Stakeholders; and

(5) ODMHSAS, as requested.