

AMHD PRIORITIES & SUPPORTING STRATEGIES
Performance Excellence

Priority Statement: Pursue excellence in all our endeavors through the use of publicly accountable goals, performance measures, and data-driven decision-making so that the entire system of care and treatment is committed to meaningfully improving people's lives.

2008						
GOAL	ACTION	ET LEADER	RESPONSIBLE FOR ACTION	EXPECTED OUTCOME	BENCHMARKS	COMPLETION DATE
Strategic Theme: PROCESSES						
1.1 Strategies for planning and implementing performance excellence initiatives.	1.1.1 Review current AMHD QM practices/ processes for how performance indicators are selected in order to refine system to become more consumer-driven recovery and oriented to Performance Excellence.	K. Krahn	A. Breton	Implement new process for selection of AMHD Internal Performance Improvement Indicators that establishes minimum# or % of total indicators that reflect measures of: consumer outcomes, family/supports engagement, recovery/continuity processes, internal division systems		4/30/08
	1.1.2 Revise current AMHD practices/processes related to PI Reporting, Monitoring Process, Audit Tools in order to refine system to become more consumer-driven and oriented to Performance Excellence	K. Krahn	A. Breton	Present revised reporting, monitoring, and audit tool processes and practices to QIC for approval		8/31/08

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	1.1.3 Review current policy regarding no deemed status for accredited organizations	K. Krahn	A. Breton	Conduct evaluation and make recommendations for ET approval regarding deemed status for some or all organizational functions if accredited (e.g. credentialing of providers)		6/30/08
	1.1.4 Establish link between PI processes and training. (Coordinate with Workforce Development technology transfer initiatives)	K. Krahn	A. Breton D. Mendiola SAAs SDs	Retrain staff and providers in new AMHD PI Audit Tools and Reporting format. Train AMHD Internal PI Audit process.		8/31/2008
	1.1.5 Evaluate the effectiveness of integrating Performance Improvement initiatives into Quality Management Program Description, Committee activities, and Annual Work plan.	K. Krahn	A. Breton	2007 Annual QM Program Evaluation, 2008 QM Work Plan, 2008 QM Program Description presented to QIC for approval		3/1/08
Strategic Theme: PERFORMANCE INDICATORS						
1.2 Strategies regarding metrics used to measure and manage overall performance	1.2.1 Establish and implement improved processes for: routine data integrity checks,	K. Krahn	A. Breton J. Jansen, P. Gross (MHSRET)	Implementation of data collection, reporting and data integrity checks.		6/30/2008

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and specific performance excellence initiatives.	fidelity to data collection and reporting processes and standards (locally and nationally, related to grants)					
	1.2.2 Create an inventory of current Performance Indicators linking each to source of requirement including Mental Health Block Grant, AMHD standards, satisfaction surveys, QOLI-VB, etc. (Coordinate with Information Management)	K. Krahn	B. Higgins MSRET J. Jansen A. Breton J. Clarke K. Blonnigan	PI Indicator Inventory list addresses and links to AMHD standards, grant requirements and federal regulations.		2/1/08
	1.2.3 Develop State Selected Performance Indicators and outcome measures which reflect AMHD principles, mission, vision and values in addition to national outcome measures, internal division and system performance.	K. Krahn Dr. Hester	A. Breton B. Higgins B. Lennox Dr. Sheehan J. Jansen J. Clarke K. Blonnigan	Present recommended list of performance indicators to QIC for approval		4/30/2008
Strategic Theme: COMMUNICATIONS						
1.3 Strategies regarding communication of plans and initiative outcomes	1.3.1 Review and assess current communication	Dr. Hester	Bill Lennox, Dawn Mendiola, John Jansen,	Develop tiered communications plan for		9/30/2008

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to all stakeholders.	mechanisms relative to AMHD as a consumer/family performance excellence driven system.		Wayne Law, Mark Fridovich, S.A.A. S.D.	communication of system performance to different audiences (to include internal AMHD, service providers, consumers and community, funders), culminating in annual QM Program Evaluation and public Annual Report.		