

## NVMHI Response to “The Recovery Experience” OIG Report

August 2007

<b><u>Senior Leadership Role</u></b>			
<b>Goal: Create an environment through policies, systems, and modeling that leads to person-centered, recovery-based, practices throughout the facility.</b>			
<p><b><u>Strategy 1:</u></b> Facilitate establishing unit level norms for communication processes that address staff behaviors that are consistent with recovery principles and addressing those that are not.</p>	<p><b><u>Final Outcome Measure:</u></b> Increase of 10% in Staff Satisfaction Survey Questions.</p> <p><b><u>DUE DATE: July 2008</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Employee Satisfaction Survey Question “<i>There is adequate communication between departments.</i>”-23% Employees Satisfaction Survey Question “ <i>I believe there is a spirit of cooperation at NVMHF</i>”-54%</p> <p><b><u>Interim Measure (Jan. 2008):</u></b> Increase of 5% in Staff Satisfaction Survey Questions.</p>	<p><b><u>Responsible Party:</u></b> HPO Steering Team and Change Agents; Unit Teams</p>
<p><b><u>Strategy 2:</u></b> Use all opportunities to communicate expectation and celebrate evidence that consumers are encouraged and supported to be involved in decision making, to exercise choice at all levels, and activities undertaken to promote wellness and recovery.</p>	<p><b><u>Final Outcome Measures:</u></b> 1) 20% improvement on Consumer Interview, Q11E.  2) 20% improvement on Consumer VRAI, Q5 &amp; Q11.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measures (July 2007):</u></b> 1) Consumer Interview, Q11E – 50%  2) Consumer VRAI, Q5 – 55% Consumer VRAI, Q11 – 67%</p> <p><b><u>Interim Measure (July 2008):</u></b> 10% improvement on Consumer Interview, Q11E and Consumer VRAI, Q5 &amp; Q11.</p>	<p><b><u>Responsible Party:</u></b> Senior Leadership Team</p>

**Senior Leadership Role (continued)**

<p><b><u>Strategy 3:</u></b> Utilize <i>Self Assessment and Growth Plan for Recovery Skills</i> (USPRA Webinar, 2007) to self rate recovery based behaviors and identify specific learning goals and strategies for upcoming performance cycle.</p>	<p><b><u>Final Outcome Measure:</u></b> Annual performance reviews for all staff will reflect learning goals based on <i>Self Assessment and Growth Plan for Recovery Skills</i> (USPRA Webinar, 2007) to increase behaviors consistent with recovery principles.</p> <p><b><u>DUE DATE: Oct. 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Recovery-based learning goals do not exist for any positions at NVMHI.</p> <p><b><u>Interim Measure (Nov. 2007):</u></b> All clinical staff will complete a self assessment using identified tool and develop personal learning goals for upcoming performance cycle to increase behaviors consistent with recovery principles.</p> <p><b><u>Interim Measure (Nov. 2008) :</u></b> All non-clinical staff will complete a self assessment using identified tool and develop personal learning goals for upcoming performance cycle to increase behaviors consistent with recovery principles.</p>	<p><b><u>Responsible Party:</u></b> Director of Human Resources and All Department Heads</p>
<p><b><u>Strategy 4:</u></b> Facilitate dialogue and decisions on the appropriate “person first” language to use within the hospital setting with consideration to each unique service area.</p>	<p><b><u>Final Outcome Measure:</u></b> Staff and consumers will understand rationale for and utilize specific “person first” designators.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measures (July 2007):</u></b> Limited and inconsistent use of “person first” language throughout facility.</p> <p><b><u>Interim Measure (Feb. 2008):</u></b> Dialogues started on each service area regarding appropriate “person first” language to use within hospital setting. Focus groups with consumers currently hospitalized and in the community are begun.</p>	<p><b><u>Responsible Party:</u></b> Senior Leadership Team with Clinical Department Heads</p>

**Senior Leadership Role (continued)**

**Strategy 5:**

Identify and align policies to assure that opportunities for choice and consumer self empowerment are maximized.

Final Outcome Measure:  
100% of designated policies are revised

**DUE DATE: July 2009**

Baseline Measures (July 2007):  
Policies have not been systematically reviewed to assure opportunities for choice and self-empowerment.

Interim Measures (Jan. 2008):  
System for identifying policies needing revision will be developed and initial implementation started.

Interim Measure (July 2008):  
50% of designated policies will have been reviewed to assure opportunities for choice and self-empowerment. Policy sponsor for all designated policies will document consideration of recovery principles in policy review.

Responsible Party:  
Senior Leadership Team with Chair of Policy Review Committee

**Senior Leadership Role (continued)**

**Strategy 6:**

Continue HPO work on culture change, structural, process and system alignment to create an environment that reflects commitment to recovery principles.

**Final Outcome Measure:**  
20% improvement in Staff Satisfaction Survey relative to shared goal within facility

**DUE DATE: July 2009**

**Baseline Measures (July 2007):**  
Staff Satisfaction Survey, Q"*I feel part of a team working toward a shared goal*" – 58%

**Interim Measure (Jan. 2008):**  
Using HPO process, develop list of shared, facility values that support Mission and Vision.

**Interim Measure (July 2008):**  
Develop a mechanism for integrating facility values into job expectations for all positions.

**Responsible Party:**  
Senior Leadership Team with ROCC Steering Committee

**Strategy 7:**

Continue developing the NVMHI Regional Community Support Center (RCSC) within the scope of financial resources.

**Final Outcome Measure:**  
Community-based consultations and educational programs on practices that incorporate recovery principles when consumers are at risk for behavioral emergencies and trauma-informed services.

**DUE DATE:**  
**July 2010**

**Baseline Measures (July 2007):**  
No consultation requests

**Interim Measure (July 2008):**  
Annual Conference held  
3 Consultation Requests

**Responsible Party:**  
Facility Director with Director of RCSC.

## Workforce Development

**Goal: All staff will be trained on and utilize recovery-based principles in working with consumers who receive services at NVMHI.**

<p><b><u>Strategy 1:</u></b> Conduct two Grand Rounds that teach models for conducting large group meetings That provide a forum to effectively address community living concerns.</p>	<p><b><u>Final Outcome Measure:</u></b> Increase of 10% on related Patient Satisfaction and VRAI scores</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> VRAI Q13-65% Patient satisfaction on D/C Q4-80%</p> <p><b><u>Interim Measure (Jan. 2008):</u></b> 2 units pilot model</p>	<p><b><u>Responsible Party:</u></b> Director of Human Resources and Training Coordinator</p> <p>Clinical Integration Group</p>
<p><b><u>Strategy 2:</u></b> Expand initial and on-going training (i.e., NEO, NCEO, AUT) on recovery principles, including topics of: choice, consumer-run services, consumer advocacy and self-empowerment. Include persons in recovery as presenters.</p>	<p><b><u>Final Outcome Measure:</u></b> 20% improvement on Staff VRAI, Q6 &amp; Q13.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measures (July 2007):</u></b> Staff VRAI, Q6 – 63% Staff VRAI, Q13 – 84%</p> <p><b><u>Interim Measure (July 2008):</u></b> 10% improvement on Staff VRAI, Q6 &amp; Q13.</p>	<p><b><u>Responsible Party:</u></b> Director of Human Resources, Training Coordinator and Director PSR.</p>
<p><b><u>Strategy 3:</u></b> Expand initial and on-going training (i.e., NEO, NCEO, AUT) on recovery-informed treatment planning process.</p>	<p><b><u>Final Outcome Measure:</u></b> 20% improvement on Tx. Team Observation Checklist, Q11 &amp; Q12.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Observation Checklist, Q11 - 67% Observation Checklist, Q12 – 67%</p> <p><b><u>Interim Measure (July 2008):</u></b> 10% improvement on Tx. Team Observation Checklist, Q11 &amp; Q12.</p>	<p><b><u>Responsible Party:</u></b> Director of Human Resources, Training Coordinator and Director of Clinical Services Development</p>

**Workforce Development (continued)**

<p><b><u>Strategy 4:</u></b> Refine structure for treatment team consultation for improving collaboration and partnerships when consumers present challenging behaviors.</p>	<p><u>Final Outcome Measure:</u> 10% improvement on Consumer VRAI, Q3, Q4 &amp; Q5.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><u>Baseline Measure (July 2007):</u> Consumer VRAI, Q3 – 67% Consumer VRAI, Q4 – 74% Consumer VRAI, Q5 – 55%</p> <p><u>Interim Measure (July 2008):</u> 5% improvement on Consumer VRAI, Q3, Q4 &amp; Q5.</p>	<p><u>Responsible Party:</u> Clinical Department Heads led by Medical Director.</p>
<p><b><u>Strategy 5:</u></b> Measure and improve staff knowledge of trauma-informed services, competency in motivation enhancing interventions, and assessment and treatment of co-occurring disorders.</p>	<p><u>Final Outcome Measure:</u> Evidence that concepts are integrated into treatment plans, when appropriate.</p> <p><b><u>DUE DATE: July 2010</u></b></p>	<p><u>Baseline Measure (July 2007):</u> No formal mechanisms in place to measure.</p> <p><u>Interim Measure (July 2008):</u> 90% of clinical staff attend at least one training event in each of these three areas annually.</p>	<p><u>Responsible Party:</u> Clinical Department Heads led by Director of Clinical Services Development.</p>

## **Treatment Planning**

**Goal: Consumers who receive services at NVMHI will be an integral part of the treatment planning process.**

<p><b><u>Strategy 1:</u></b> Continue current Treatment Planning Workgroup project involving redesign of treatment planning forms and process to better integrate consumer input and influence on goals and treatment.</p>	<p><b><u>Final Outcome Measure:</u></b> 90% adherence on relevant Treatment Quality monitors.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Treatment Planning forms and process have inconsistent consumer-directed content. Revisions being developed by Treatment Planning Workgroup.</p> <p><b><u>Interim Measure (Jan. 2008):</u></b> Pilot completed of new Treatment Planning forms and process better integrating consumer input.</p> <p><b><u>Interim Measure (July 2008):</u></b> 75% adherence on relevant Treatment Quality monitors.</p>	<p><b><u>Responsible Party:</u></b> Treatment Planning Workgroup, Chaired by Director of Clinical Services Development.</p>
<p><b><u>Strategy 2:</u></b> Develop and implement a structure to support client preparation prior to treatment planning meetings to support increased involvement in the process.</p>	<p><b><u>Final Outcome Measure:</u></b> 10% improvement on Consumer VRAI, Q3, Q4 &amp; Q11.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Consumer VRAI, Q3 – 67% Consumer VRAI, Q4 – 74% Consumer VRAI, Q11 – 67%</p> <p><b><u>Interim Measure (July 2008):</u></b> 5% improvement on Consumer VRAI, Q3, Q4 &amp; Q11.</p>	<p><b><u>Responsible Party:</u></b> Treatment Planning Workgroup, Chaired by Director of Clinical Services Development.</p>

**Treatment Planning (continued)**

<p><b><u>Strategy 3:</u></b> Develop structure for the consumer and the treatment team to jointly evaluate treatment planning meetings.</p>	<p><b><u>Final Outcome Measure:</u></b> 90% Patient Satisfaction Survey at D/C, Q2.</p> <p><b><u>DUE DATE: July 2010</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Patient Satisfaction Survey at D/C, Q2 – 80%. No formal mechanism for evaluating treatment planning meetings.</p> <p><b><u>Interim Measure (July 2008):</u></b> Workgroup formed to develop mechanism for evaluating treatment planning meetings. First draft of evaluation tool developed and initial pilot started.</p> <p><b><u>Interim Measure (July, 2009) Results of pilot used to modify mechanism for implementation.</u></b></p>	<p><b><u>Responsible Party:</u></b> Treatment Planning Workgroup, Chaired by Director of Clinical Services.</p>
<p><b><u>Strategy 4:</u></b> Each service will identify actions that will support consistent treatment team attendance by nursing staff and others, including family members, CSB representatives and other community members, at treatment planning</p>	<p><b><u>Final Outcome Measure:</u></b> 20% improvement on Treatment Team Observation Checklist, Q4, Q5, Q8.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Team Observation Checklist, Q4–100% Team Observation Checklist, Q5– 33% Team Observation Checklist, Q8– 67%.</p> <p><b><u>Interim Measure (July 2008):</u></b> 10% improvement on Treatment Team Observation Checklist, Q4, Q5, Q8.</p>	<p><b><u>Responsible Party:</u></b> Clinical staff led by Nursing Unit Managers and Clinical Department Heads.  CSB Executive Directors</p>

## Design of the Clinical Record

**Goal: The clinical record will reflect the use of person-centered and recovery-based principles, be organized to facilitate ready access to information, and promote efficient and effective documentation.**

### Strategy 1:

Implement guidelines for documentation across the facility that support “person first” language and recovery principles.

Final Outcome Measure:  
20% improvement on Record Review, Q13.

**DUE DATE: July 2009**

Baseline Measure (July 2007):  
Record Review, Q13 – 43%

Interim Measure (Jan. 2008):  
Complete evaluation of existing documentation templates for support of “person first” language and recovery principles.

Interim Measure (July 2008):  
Develop guidelines for using “person first” language in all documentation.  
10% improvement on Record Review, Q13.

Responsible Party:  
Clinical  
Department Heads

### Strategy 2:

Continue work started by the Treatment Planning Workgroup to provide a structure for integrating motivation-enhancing interventions and Stages of Change into treatment plans.

Final Outcome Measure:  
1) 10% improvement on Treatment Team Observation Checklist, Q11 & Q12.

**DUE DATE: July 2009**

Baseline Measure (July 2007):  
1) Team Observation Checklist, Q11- 67%  
Team Observation Checklist, Q12 – 67%

Interim Measure (July 2008):  
1) 10% improvement on Treatment Team Observation Checklist, Q11 & Q12.

Responsible Party:  
Treatment Planning  
Workgroup,  
Chaired by Director  
of Clinical Services  
Development

Implementation by  
Clinical  
Department Heads.

**Design of the Clinical Record (continued)**

**Strategy 3:**

CO evaluate composition, structure and process for designing an EHR to assure integration of recovery principles in a manner that facilitates efficient and effective documentation.

Final Outcome Measure:  
Facility workgroup participants report being empowered to think innovatively about a record design that will support recovery-based treatment and meet relevant external review requirements.

**DUE DATE: July 2009**

Baseline Measure (July 2007):  
CO to establish

Interim Measure (July 2008):  
CO to establish

Responsible Party:  
CO project Team Leader

## **Consumer Activities and Opportunities**

**Goal: Activities and opportunities provided will increasingly reflect and incorporate recovery-based principles.**

<p><b><u>Strategy 1:</u></b> Continue full consumer involvement in establishing Calming Rooms and Calming Kits on each unit.</p>	<p><u>Final Outcome Measure:</u> 10% improvement on Consumer VRAI, Q5.</p> <p><b><u>DUE DATE:</u> July 2008</b></p>	<p><u>Baseline Measure (July 2007):</u> Consumer VRAI, Q5 – 55%</p> <p><u>Interim Measure (Jan. 2008):</u> 5% improvement on Consumer VRAI, Q5.</p>	<p><u>Responsible Party:</u> Clinical staff led by PSR Director.</p>
<p><b><u>Strategy 2:</u></b> Continue full consumer involvement in creating Stages of Change murals.</p>	<p><u>Final Outcome Measure:</u> Completion of murals</p> <p><b><u>DUE DATE:</u> July 2008</b></p>	<p><u>Baseline Measure (July 2007):</u> Programming focused on Stages of Change beginning to be offered.</p> <p><u>Interim Measure (Jan. 2008):</u> 25% increase in available programming on Stages of Change. Beginning development of Stages of Change murals.</p>	<p><u>Responsible Party:</u> Clinical staff led by Director of PSR.</p>
<p><b><u>Strategy 3:</u></b> Develop resource teams, including consumers, to establish and maintain Recovery Kiosks on each unit to distribute recovery and leisure literature/resources.</p>	<p><u>Final Outcome Measure:</u> 50% improvement on Hospital Unit Observation Checklist, Q6 &amp; Q14.</p> <p><b><u>DUE DATE:</u> July 2008</b></p>	<p><u>Baseline Measure (July 2007):</u> Unit Observation Checklist, Q6 - 80% Unit Observation Checklist, Q14 – 0%</p> <p><u>Interim Measure (Jan. 2008):</u> Resource teams developed established on each unit with initial ideas and materials for Recovery Kiosks identified.</p>	<p><u>Responsible Party:</u> Clinical staff led by PSR Director and Nursing Unit Managers.</p>

**Consumer Activities and Opportunities (continued)**

<p><b><u>Strategy 4:</u></b>          Establish programming to teach consumers about their role in helping relationships and treatment partnerships for self empowerment and advocacy.</p>	<p><b><u>Final Outcome Measure:</u></b>          50% increase in available programming to teach consumers about their role in helping relationships and treatment partnerships for self empowerment and advocacy beginning to be offered.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b>          Programming to teach consumers about their role in helping relationships and treatment partnerships for self empowerment and advocacy beginning to be offered.</p> <p><b><u>Interim Measure (July 2008):</u></b>          25% increase in available programming to teach consumers about their role in helping relationships and treatment partnerships for self empowerment and advocacy beginning to be offered.</p>	<p><b><u>Responsible Party:</u></b>          Clinical staff led by PSR Director.</p>
<p><b><u>Strategy 5:</u></b>          Develop and utilize resource list for staff to initiate outings that build connections with communities.</p>	<p><b><u>Final Outcome Measure:</u></b>          5% improvement in Consumer VRAI, Q8.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b>          Consumer VRAI, Q8 – 83%</p> <p><b><u>Interim Measure (July 2008):</u></b>          Current score maintained at plus or minus 5% % Consumer VRAI, Q8.</p>	<p><b><u>Responsible Party:</u></b>          Clinical staff led by PSR Director</p>

**Consumer Activities and Opportunities (continued)**

**Strategy 6:**

Evaluate and modify mechanisms for consumer input and evaluation of existing groups by individual group and by overall centralized programming.

Final Outcome Measure:  
1) 10% improvement on Consumer Interview, Q11F.

**DUE DATE: July 2009**

Baseline Measure (July 2007):  
1) Consumer Interview, Q11F – 65%

Interim Measure (July 2008):  
1) 5% improvement on Consumer Interview, Q11F.

Responsible Party:  
Clinical staff led by PSR Director.

**Strategy 7:**

Develop structure and implement programs that include consumer co-leadership and a consumer mentorship program.

Final Outcome Measure:  
1) 20% of programs offered will include a consumer co-leadership component.

**DUE DATE: July 2010**

Baseline Measure (July 2007):  
1) No formal mechanism to support consumer co-leadership,.

Interim Measure (July 2008):  
1) Programs to include a consumer co-leadership component will be identified/developed.

Responsible Party:  
Clinical staff led by PSR Director.

**Consumer Activities and Opportunities (continued)**

<p><b><u>Strategy 8:</u></b> Provide, observe and support nursing staff with skills to use unstructured time in living units as an opportunity for increasing communal living skills and recovery activities.</p>	<p><b><u>Final Outcome Measure:</u></b> 1) 90% adherence to established criterion for using unstructured time as an opportunity for increasing communal living skills and recovery activities.  2) 85% Patient Satisfaction at D/C, Q3  <b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> 1) No formal mechanism to provide and support nursing staff skills to use unstructured time as an opportunity for increasing communal living skills and recovery activities.  2) Patient Satisfaction at D/C, Q3 – 80%  <b><u>Interim Measure (Jan. 2008):</u></b> 1) Formal mechanism established to teach nursing staff skills for using unstructured time as an opportunity for increasing communal living skills/ recovery activities.  <b><u>Interim Measure (July 2008):</u></b> 1) At least 50% adherence to established criterion for using unstructured time as an opportunity for increasing communal living skills/ recovery activities. 2) Maintain at +- 5% Patient Satisfaction at D/C, Q3</p>	<p><b><u>Responsible Party:</u></b> Nursing Staff Development department led by Chief Nurse Executive.</p>
<p><b><u>Strategy 9:</u></b> Increase services provided by consumer-run agencies, i.e. LMEC, DBSA, NAMI-NoVa.</p>	<p><b><u>Final Outcome Measure:</u></b> 20% increase in number of consumers involved in consumer-run services and programs.  <b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Number of consumers per month involved in at least one of the consumer-run programs offered at NVMHI - 26.  <b><u>Interim Measure (July 2008):</u></b> 5% increase in number of consumers involved in consumer-run services and programs.</p>	<p><b><u>Responsible Party:</u></b> PSR Director</p>

**Consumer Activities and Opportunities (continued)**

<p><b><u>Strategy 10:</u></b>          Increase (pre) vocational, vocational, and volunteer service opportunities offered by community-based agencies, i.e. LMEC, PRS, Inc. and DRS.</p>	<p><b><u>Final Outcome Measure:</u></b>          15% increase in number of consumers involved in volunteer and paid employment in the community.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b>          Number of consumers involved in volunteer and paid employment in the community (snapshot) – five</p> <p><b><u>Interim Measure (July 2008):</u></b>          10% increase in number of consumers involved in volunteer and paid employment in the community.</p>	<p><b><u>Responsible Party:</u></b>          PSR Director</p>
<p><b><u>Strategy 11:</u></b>          Expand consumer involvement in committees, planning initiatives, and evaluation activities throughout the facility.</p>	<p><b><u>Final Outcome Measure:</u></b>          Workgroup, Planning and Evaluation activities that are reported through MEC will address consumer involvement.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b>          Sporadic involvement of consumers in facility-wide workgroups, committees, planning initiatives and evaluation activities.</p> <p><b><u>Interim Measure (July 2008):</u></b>          Structure will be established for consumer involvement in planning and evaluation activities.</p>	<p><b><u>Responsible Party:</u></b>          Senior Leadership Team</p>

**Relationship to the Community**

**Goal: Facility will continue to work closely with the community to promote integrated service continuum of recovery based services**

<p><b><u>Strategy 1:</u></b> Work with members of Regional Recovery Workgroup to increase the number of WRAP trainers available to NVMHI consumers.</p>	<p><b><u>Final Outcome Measure:</u></b> WRAP sessions are consistently scheduled and provided on-site for NVMHI consumers as a part of regular programming.</p> <p><b><u>DUE DATE: July 2008</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> One WRAP trainer currently in area. WRAP sessions provided on-site for NVMHI consumers approximately 50% of calendar year.</p> <p><b><u>Interim Measure (Jan. 2008):</u></b> Additional consumers in the area trained as WRAP facilitators, who begin discussions with NVMHI to increase WRAP sessions provided on-site to NVMHI consumers.</p>	<p><b><u>Responsible Party:</u></b> PSR Director</p>
<p><b><u>Strategy 2:</u></b> Collaborate with CSB's regarding interface processes to support consumers' return to community at the earliest possible time and to a living place of choice.</p>	<p><b><u>Final Outcome Measure:</u></b> 1) 50% improvement on Tx. Team Observation Checklist, Q5. 2) 20% improvement on Consumer VRAI, Q11.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> 1) Team Observation Checklist, Q5 - 33% 2) Consumer VRAI, Q11 - 67% 3) Content of PTM meetings reflect variability in community readiness to facilitate patient choice</p> <p><b><u>Interim Measure (Jan. 2008):</u></b> 1) 25% improvement on Tx. Team Observation Checklist, Q5. 2) NVMHI will host regional leadership meeting to dialogue about recovery informed discharge planning and examine the degree to which current facility and community processes and attitudes are aligned with recovery informed thinking.</p>	<p><b><u>Responsible Party:</u></b> Facility director and CSB Executive Directors</p>

**Relationship to the Community (continued)**

<p><b><u>Strategy 3:</u></b> Increase relationships with community-based, consumer-run programs and services, i.e. LMEC, DBSA, NAMI-NoVa.</p>	<p><b><u>Final Outcome Measure:</u></b> 20% increase in number of consumers involved in consumer-run services and programs.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Number of consumers per month involved in at least one of the consumer-run programs offered at NVMHI - 26.</p> <p><b><u>Interim Measure (July 2008):</u></b> 10% increase in number of consumers involved in consumer-run services and programs.</p>	<p><b><u>Responsible Party:</u></b> PSR Director</p>
<p><b><u>Strategy 4:</u></b> Establish links with area group homes to develop peer support/ mentoring programs for consumers transitioning towards discharge.</p>	<p><b><u>Final Outcome Measure:</u></b> Decrease in 30 day re-admission rate for consumers discharged to area group homes.</p> <p><b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> No systematic plan for transitioning consumers who are being discharged to area group homes. Plan for transitioning inconsistent and varies per consumer and CSB.</p> <p><b><u>Interim Measure (July 2008):</u></b> Links established to enable initial discussions with area group homes focused on identifying common areas of difficulty that may lead to re-admission for NVMHI consumers.</p> <p><b><u>Interim Measure (Jan. 2009)</u></b> Initial implementation of peer support/mentoring programs at identified area group homes to support successful transitions.</p>	<p><b><u>Responsible Party:</u></b> Director of Social Work and Utilization Manager</p>

**Other Areas Relevant to Enhancing Recovery**

**Goal: The facility will continuously look for other ways to increase the recovery experience.**

<p><b><u>Strategy 1:</u></b> Expand discussions related to informed consent to include broader discussions of on-going medication use, choices and implications of decisions about types of medication and adherence to prescribed regime..</p>	<p><b><u>Final Outcome Measure:</u></b> 20% improvement on Pt. Satisfaction Survey at D/C, Q9.  <b><u>DUE DATE: July 2008</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> Pt. Satisfaction Survey at D/C, Q9 – 73% <b><u>Interim Measure (Jan. 2008):</u></b> 10% improvement on NVMHI Pt. Satisfaction Survey at D/C, Q9.</p>	<p><b><u>Responsible Party:</u></b> Medical Staff led by Medical Director.</p>
<p><b><u>Strategy 2:</u></b> Request that the A LOT group identify key deficit based/risk averse policies for CO revision.</p>	<p><b><u>Final Outcome Measure:</u></b> Identified policies revised to be aligned with concepts of choice, control, risk, and learning inherent in unexpected outcomes.  <b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> A LOT dialogue about need to address these policies. <b><u>Interim Measure (July 2008):</u></b> Policies identified and prioritized with recommendations for revisions.</p>	<p><b><u>Responsible Party:</u></b> CO and ALOT team</p>
<p><b><u>Strategy 3:</u></b> Continue with efforts to decrease aggression.</p>	<p><b><u>Final Outcome Measure:</u></b> 1) 50% reduction in the number of Pt-Pt Incidents and Pt-Staff Incidents. 2) 20% improvement on Pt. Satisfaction Survey at D/C, Q4. 3) 20% improvement on Consumer Interview, Q15.  <b><u>DUE DATE: July 2009</u></b></p>	<p><b><u>Baseline Measure (July 2007):</u></b> 1) Pt .- Pt. Incidents – 20 for the month. Pt. - Staff Incidents – 17 for the month. 2) Pt. Satisfaction Survey at D/C, Q4 –76% 3) Consumer Interview, Q15 – 61% <b><u>Interim Measure (July 2008):</u></b> 1) 25% reduction in the number of Pt-Pt Incidents and Pt-Staff Incidents. 2) 10% improvement on Pt. Satisfaction Survey at D/C, Q4. 3) 10% improvement on Consumer Interview, Q15.</p>	<p><b><u>Responsible Party:</u></b> Senior leadership Team</p>