

Reporting Outcomes

DRAFT

Program and Accreditation Committee

Our goal is to deliver a summary of outcomes and metrics, which helps the committee understand Kerr's outcome strategy, benchmarks, and current performance. Our aim is to reduce the current report to a more straightforward format that is both easier to produce and digest. Below is a table of metrics we propose to add to ongoing reporting and others we plan to sunset from future reporting. **Please note that any metrics removed are data points we will continue to collect for future reporting and analysis as needed.**

Status	Metric(s)	Notes
Remains	<ul style="list-style-type: none"> -Admission, Discharges, Total and Average Clients Served- All programs -Outpatient and ICTS Engagement Metrics -Abuse Allegations in Programs -Grievances in Programs -Client injuries in restraints -Restraint trending in all programs -Runaway from the program- More than 4 hours -ER visits or hospitalizations- Psychiatric -Police Involvement in homes- Not related to runaways -Medication Errors -Employment Program Jobs Created, Placed, Sustained -Discharge Location Subacute, Group Homes, ICTS -Length of Stay Subacute and ICTS -TSR- Subacute -Admission to ER Rates- ICTS -Satisfaction Surveys -ACORN- ICTS and Outpatient -Subacute Readmission Rate 	<ul style="list-style-type: none"> -These metrics drive agency financial health and community need. -Core Program Metric -A Core Risk for the agency -Core Agency Metric -Core Agency Metric -Core Agency Metric -Core Agency Metric -Core Agency Metric -Useful in reviewing screening and fit or programmatic tools to address psychiatric emergencies. -Core Agency Metric -Core Agency Metric. Updating to reflect the percentage of errors. -Core Program Metric -Core Program Metric -Core Program Metric -Core Program Metric -Core Program Metric -Core Agency Metric. Adding guardian surveys. -Core Program Metric. -Update from 90 days to 30 days to match contractual requirements
Added in Q4 20/21	<ul style="list-style-type: none"> -Behavior and Activity/ISP Tracking- Group Homes -Hours of work in Employment Programs -Behavior Supports provided (hours) 	<ul style="list-style-type: none"> -Core Program Metric -Core Program Metric -Core Program Metric
Added once available	<ul style="list-style-type: none"> -Referral Demand for All Programs -School Attendance- Youth Group Home -Community Integration Activities 	<ul style="list-style-type: none"> -Needed to develop agency capacity and planning -Core Program Metric -Core Agency Metric

Sunsets	<ul style="list-style-type: none"> -Demographics (Age, Ethnicity, Race) -ICTS Engagement, 4 visits in 44 days -Client injuries due to accidents or self-harm -Restraint Details (Age, Length, Percentage of children) -ER visits or hospitalizations-Medical -Discharge Location- Outpatient -Length of Stay- Outpatient -Admission to ER Rates- Outpatient -Runaway from the program under 4 hours 	<ul style="list-style-type: none"> -These demographics have had little movement or change in the last 10 years of operational reporting. -This metric is being actively tracked at the program level and consistently met. -These metrics have little bearing on staff performance or agency process. -These metrics are almost solely based on client mix versus staff actions or programming. -ER visits and hospitalizations due to medical issues are client-dependent and not usually reflective of care. Medical neglect will be captured in Abuse Allegations. -Discharge Location is generally not reflective of program performance. -Not a useful metric given the episodic nature of the service line. -Not a useful metric given the level of service -These are often “walks around the block” to calm down for youth in the group home and are not indicative of a problem at the program level.
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