



OFFICIAL NOTICE AND AGENDA of a meeting of the Board or a Committee

A meeting of the **Quality Committee** of the North Central Community Services Program Board will be held at **North Central Health Care, 1100 Lake View Dr., Wausau, WI, Board Room** at **12:00 p.m.**, on **Thursday, September 17th**, 2015.

(In addition to attendance in person at the location described above, Committee members and the public are invited to attend by telephone conference. Persons wishing to attend the meeting by phone should contact Dianna Schlicher at 715-848-4422 by one hour prior to the meeting start time for further instructions.)

AGENDA

1. Call to order
2. Moments of Excellence
3. Action: approve July 23, 2015, meeting minutes
4. Outcomes Review
 - a. Organizational Outcomes
 - b. Program Specific Outcomes
 - c. Safety – Adverse Events
5. Closed Session - pursuant to Section 19.85(1)(c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service and review of procedures for providing services by Agency.
 - a. Report of Investigations:
 - i. Corporate Compliance and Ethics
 - ii. Sentinel Events
6. Motion to come out of closed session
7. Possible announcements regarding issues discussed in closed session
8. Auditing Report
9. HIPAA Risk Assessment Action Plan
10. Process Improvement Project – Crisis Services
11. Joint Commission Update
12. Future agendas
13. Adjourn

*Action may be taken on any agenda item.

*In the event that any individuals attending this meeting may constitute a quorum of another governmental body, the existence of the quorum shall not constitute a meeting as no action by such body is contemplated.

Signed: /s/ G. Bezucha
Presiding Officer or His Designee

COPY OF NOTICE DISTRIBUTED TO:

Wausau Daily Herald Antigo Daily Journal
Tomahawk Leader Merrill Foto News
Langlade, Lincoln & Marathon County Clerk Offices
DATE 9/11/15 TIME 12:00 p.m.

VIA: X FAX X MAIL
BY /s/ D. Schlicher

THIS NOTICE POSTED AT

NORTH CENTRAL HEALTH CARE
DATE 9/11/15 Time 12:00 p.m.
By Dianna Schlicher

Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the Administrative office at 715-848-4422. For TDD telephone service, call 715-845-4928.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM QUALITY COMMITTEE MEETING MINUTES

July 23, 2015, 8:30 a.m.

NCHC – Wausau Campus

Present: Darren Bienvenue, Bill Miller, Jean Burgener, Laura Scudiere, Holly Matucheski

Excused: Dr. Eric Penniman

Also present: Gary Bezucha, Becky Schultz, Gretchen Brown, Michael Loy, Toni Simonson, Dr. Gabriel Ticho, Dianna Schlicher

The meeting was called to order at 8:31 a.m.; roll call was noted and a quorum declared. Moments of Excellence were shared.

Minutes

- **Motion**/second by Burgener/Bienvenue to approve the minutes of the May 21, 2015, meeting. Motion carried.

Outcome Data/Safety

- The Committee reviewed organization-wide and program-specific outcome data and safety data.
- Nursing home readmission rates have trended outside of the target range; a Plan, Do, Check, Act (PDCA) process improvement project has been initiated. Staff will report progress at next meeting.
- Access measures were not met due to an increase in referrals in Aquatic Therapy and staff vacancies in Outpatient Services. New staff is being recruited.
- Discussed external/partner satisfaction surveys and possible strategies to improve outcomes. Particular concern was shared regarding Crisis Services. A PDCA process improvement project will be initiated; staff will report back to the committee.
- Patient/client/resident satisfaction is not hitting target ranges. Staff shared actions taken to date, including an in-service provided to leaders by NCHC's company. A PDCA process improvement project is being initiated and staff will report progress at the next meeting.
- **Motion**/second by Bievenue/Matucheski to approve the Outcome Data as presented. Motion carried.
- Adverse event and safety data was reviewed. A continued positive trend in results was noted. No specific negative variations have been identified.
- **Motion**/second by Burgener/Bienvenue to approve the Safety Information and Adverse Events graphs as presented. Motion carried.

Closed Session

- **Motion**/second by Burgener/Matucheski to adjourn into Closed Session, pursuant to Section 19.85(1)(c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service

and review of procedures for providing services by Agency and to allow staff to remain. Motion carried and moved into closed session at 9:18 a.m. Roll Call taken, Yes=5, No=0.

- **Motion**/second by Bienvenue/Burgener to come out of closed session. Motion carried.
- The Committee reviewed and approved the Corporate Compliance and Ethics and Sentinel Events Investigations.

Medical Equipment and Utility Systems Management Plans

- The Committee reviewed the Medical Equipment and Utility Systems Management Plans as presented.
- **Motion**/second by Matucheski/Bienvenue to approve the Medical Equipment and Utility Systems Management Plans. Motion carried.

Auditing Report

- Information is being gathered and will be provided to the Committee at the next meeting.

Joint Commission Update

- The Joint Commission has accepted the 45-day report submitted by NCHC. A 60-day report will be submitted by August 14th.
- The engineer is anticipated to return for a follow-up inspection at any time.
- During leadership meeting with the Joint Commission, staff was commended for the preparation and information provided to Joint Commission.
- Reports on the Requirements for Improvement will be a standing agenda item moving forward.

Future Agenda Items

- Continued discussion regarding Crisis.
- **Motion**/second by Miller/Burgener to adjourn at 9:31 a.m. Motion carried.

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QUALITY OUTCOME DASHBOARD

DEPARTMENT: NORTH CENTRAL HEALTH CARE

FISCAL YEAR: 2015

PRIMARY OUTCOME GOAL	Continuous Improvement Target	Benchmark	↑ ↓	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	2014
CLINICAL																	
Nursing Home Readmission Rate	11-13%	18.2%	↓	24.2%	13.8%	9.1%	11.1%	16.1%	18.5%	0.0%	8.3%					13.2%	11.5%
Psychiatric Hospital Readmission Rate	9-11%	16.1%	↓	11.0%	9.3%	12.7%	7.1%	17.2%	10.7%	12.8%	14.8%					12.0%	10.0%
AODA Relapse Rate	18-21%	40-60%	↓	17.9%	25.0%	26.7%	15.4%	30.0%	20.8%	26.3%	25.8%					23.2%	20.8%
NCHC Adverse Event Rate	3.8-4.0	4.1	↓	3.5	4.1	4.3	4.0	3.8	3.7	4.8	4.5					4.1	4.1
PEOPLE																	
Injury Claims*	50-60	78.95	↓	24	18	24	24	22	20	22	24					24	n/a
Employee Turnover Rate*	20-23%	17%	↓	21.0%	20.2%	18.4%	19.4%	20.3%	22.6%	23.4%	24.6%					24.6%	25.5%
SERVICE																	
Client/Patient/ Resident Satisfaction Percentile Rank	58-66 Percentile	58-66 Percentile	↑	66th	70th	39th	41st	67th	44th	65th	47th					55th	59th
Community Partner Satisfaction Percent Good/Excellent	75-80%	N/A	↑	\	68%	\	\	79%	\	\	73%	\	\		\	73%	71%
COMMUNITY																	
Community Employment Rate	15.8-18%	17.8%	↑	27.2%	25.2%	22.9%	24.7%	24.4%	23.6%	26.3%						24.8%	n/a
NCHC Access Measure	90-95%	NA	↑	98%	98%	91%	83%	70%	59%	59%						79%	n/a
Recidivism Rate for OWI	27-32%	44.7%	↓	31.4%	26.3%	24.4%	36.6%	23.5%	20.0%	12.8%	39.4%					27.2%	31.30%
FINANCE																	
Direct Expense/Gross Patient Revenue	55-59%	N/A	↓	61%	51%	59%	62%	65%	60%	65%						60%	59.7%
Days in Account Receivable	55-60	54	↓	80	79	75	72	71	67	67						67	79
Write-Off Percent of Gross Revenue	.5-.6%	N/A	↓	0.18%	0.27%	0.32%	0.16%	0.59%	0.42%	0.46%						0.34%	n/a

KEY: ↑ Higher rates are positive

↓ Lower rates are positive

* Monthly Rates are Annualized

** Target is based on a 10%-25% improvement from previous year performance or industry benchmarks.

NCHC OUTCOME DEFINITIONS

CLINICAL	
Nursing Home Readmission Rate	Number of residents re-hospitalized within 30 days of admission to nursing home / total admissions. <i>Benchmark: American Health Care Association/National Center for Assistive Living (AHCA/NCAL) Quality Initiative</i>
Psychiatric Hospital Readmission Rate	Percent of patients who are readmitted within 30 days of discharge from the Inpatient Behavioral Health hospital. <i>Benchmark: Medicare Psychiatric Patients & Readmissions in Inpatient Psychiatric Facility Prospective Payment System, May, 2013, The Moran Company</i>
AODA Relapse Rate	Percent for patients admitted to Ambulatory Detoxification or the Behavioral Health hospital for detoxification then readmitted within 30 days of discharge for repeat detoxification. <i>Benchmark: National Institute of Drug Abuse: Drugs, Brains, and Behavior: The Science of Addiction</i>
NCHC Adverse Event Rate	Rate of client/patient/resident occurrences that are considered adverse events per 1000 patient days/visits. Adverse events are occurrences with a high potential for harm, injury or adverse outcome due to human error, process failure or environmental factors. <i>Benchmark: Improvement from 2014 NCHC Rate</i>
PEOPLE	
Injury Claims	The number of employee injuries with associated worker's compensation claims. Monthly figures represent an annualized rate. <i>Benchmark: U.S. Bureau of Labor Statistics, U.S. Department of Labor 2013</i>
Employee Turnover Rate	Percent of employee terminations (voluntary and involuntary) of the total workforce. Monthly figures represent an annualized rate. <i>Benchmark: Society of Human Resource Management (SHRM) for the north central region of the U.S.</i>
SERVICE	
Client/Patient/Resident Satisfaction Percentile Rank	Comparison rate (to other organizations in the Health Stream database) of the percent of level 9 and 10 responses to the Overall rating question on the survey. <i>Benchmark: HealthStream 2015 Top Box Percentile</i>
Community Partner Satisfaction Percent Good/Excellent	Percentage of "Good and Excellent" responses to the Overall Satisfaction question on the survey.
COMMUNITY	
Community Employment Rate	Percent of Community Treatment, Prevocational, and Community Corner Clubhouse clients receiving vocational support/services who are employed. <i>Benchmark: National Alliance on Mental Illness (NAMI)</i>
NCHC Access Measure	% of clients obtaining services within the Best Practice timeframes in NCHC programs. <ul style="list-style-type: none"> • Adult Day Services - within 2 weeks of receiving required enrollment documents • Aquatic Services - within 2 weeks of referral or client phone requests • Birth to 3 - within 45 days of referral • Community Corner Clubhouse - within 2 weeks • Community Treatment - within 60 days of referral • Outpatient Services - within 14 days of referral • Prevocational Services - within 2 weeks of receiving required enrollment documents • Residential Services - within 1 month of referral
Recidivism Rate for OWI	Percentage of AODA clients who receive treatment at NCHC that have 2 or more OWI convictions. <i>Benchmark: 2012-OWI Related Convictions by Violation County and Repeat Offender Status, State of Wisconsin DOT, Bureau of Driver Service, Alcohol & Drug Review Unit</i>
FINANCE	
Direct Expense/Gross Patient Revenue	Percentage of total direct expense compared to gross revenue.
Days in Account Receivable	Average number of days for collection of accounts. <i>Benchmark: WIPFLI, sources 2015 Almanac of Hospital Financial and Operating Indicators published by Optum-Psychiatric Hospitals, 2013 data.</i>
Write-Off percent	Write-offs as a percent of gross revenue

Human Services Operations

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
ADS-Prevoc-Residential	Clinical	% Prevocational Consumers with DVR Referrals that Obtain Community-Based Competitive Employment	↑	65-75%	79%	N/A
	People	Employee Engagement Partnership Mean	↑	71.5-76.5	N/D	64.4
	Service	External Customer Satisfaction: Percent 9/10 responses	↑	92-94%	89.2%	91%
	Community	Percentage of All DVR Referrals Obtaining Community-Based Employment	↑	45-55%	35.8%	N/A
	Finance	% Direct Expense/Gross Patient Revenue – ADS/Prevocational/Residential Services	↓	69-72%	65.55%	N/A
Aquatic Therapy	Clinical	% of Clients Meeting Treatment Goals of 80-100% in 8-12 Sessions	↑	87-90%	81%	88%
	People	Employee Engagement Partnership Mean	↑	77.7-82.7	N/D	69.7
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	92-94%	93.9%	94.5%
	Community	Access to Aquatic Services	↑	90-95%	90%	N/A
	Finance	% Direct Expense/Gross Patient Revenue	↓	41-44%	43.48%	N/A
Birth to 3	Clinical	% of B-3 Children Discharged with No School Intervention Needs	↑	28-32%	18%	N/A
	People	Employee Engagement Partnership Mean	↑	74.7-79.7	N/D	65.9
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	92-94%	92.6%	96%
	Community	Access to Birth-3 Services (≤45 Days)	↑	90-95%	100%	N/A
	Finance	% Direct Expense/Gross Patient Revenue	↓	146-151%	130%	N/A
		% TIER Documentation Complete for Billing by the 5 th of Following Month	↑	90-95%	92%	N/A
Community Corner Clubhouse	Clinical	50% of Members are Working on Supportive or Independent Employment at Least 15 hrs/week	↑	84-86%	92%	82%
	People	Employee Engagement Partnership Mean	↑	86.3-89.3	N/D	81.0
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	72-76%	57.1%	62.1%
	Community	Access to Clubhouse Services	↑	90-95%	93.3%	N/A
	Finance	% Direct Expense/Gross Patient Revenue	↓	75-78%	77.09%	N/A
Community Treatment	Clinical	Percent of Consumers Competitively Employed	↑	16.8-18%	18.8%	15.2%
	People	Employee Engagement Partnership Mean	↑	72.5-77.5	N/D	65.7
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	72-76%	68.5%	64.9
	Community	Access to Community Treatment Services	↑	90-95%	80%	N/A
	Finance	% Direct Expense/Gross Patient Revenue	↓	54-57%	86.61%	N/A

↑ Higher rates are positive
↓ Lower rates are positive

N/D = No data available to date
*Annualized Data

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
Crisis CBRF/ Residential Treatment	Clinical	CBRF 30-Day Hospital Admission Rate	↓	10-12%	3.8%	N/A
	People	Employee Engagement Partnership Mean	↑	66.2-71.2	N/D	61.2
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	54-60%	66.7%	43.8%
		Community Partner Satisfaction Percent Good/Excellent	↑	75-80%	0%	82%
	Finance	% Direct Expense/Gross Patient Revenue	↓	28-31%	7.83%	N/A
Crisis Services	Clinical	Crisis Diversion Rate (No Hospitalization Required)	↑	70-75%	67%	95%
	People	Employee Engagement Partnership Mean	↑	77.2-82.2	N/D	72.2
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	92-94%	75%	88.9%
		Community Partner Satisfaction Percent Good/Excellent	↑	75-80%	57%	60%
	Finance	% Direct Expense/Gross Patient Revenue	↓	280-285%	314.34%	N/A
Inpatient Behavioral Health (Hospital)	Clinical	Hospital 30-Day Readmission Rate	↓	9-11%	11.6%	9.8%
	People	Employee Engagement Partnership Mean	↑	67.6-72.6	N/D	62.2
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	54-60%	21.4%	52.5%
		Community Partner Satisfaction Percent Good/Excellent	↑	75-80%	58%	46%
	Finance	% Direct Expense/Gross Patient Revenue	↓	45-48%	54.25%	N/A
Outpatient Behavior Health Services	Clinical	OWI Recidivism Rate	↓	27-32%	25.5%	32.5%
	People	Employee Engagement Partnership Mean	↑	74.6-79.6	N/D	67.5
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	72-76%	61.7%	64.9%
	Community	Outpatient Services Access	↑	90-95%	76%	N/A
	Finance	% Direct Expense/Gross Patient Revenue	↓	63-66%	67.77%	N/A
Human Services Operations Overall	Clinical	HSO Overall Hospitalization Rate	↓	1.0-1.5%	1.0%	N/A
	People	Employee Engagement Partnership Mean	↑	71.6-76.6	N/D	N/A
	Service	HSO External Customer Satisfaction: Percent 9/10 Responses	↑	83.3-87.2%	75.2%	N/A
	Community	HSO Accessibility	↑	90-95%	79%	N/A
	Finance	% Direct Expense/Gross Patient Revenue	↓	55-59%	60%	N/A



Higher rates are positive
Lower rates are positive

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*Annualized Data

Mount View Care Center

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
MV-Legacies by the Lake	Clinical	Fall Rate	↓	6.2-7.2	4.3	N/A
		New/Worsening Pressure Ulcers Rate	↓	0.45-0.54	0.0	N/A
	People	Employee Engagement Partnership Mean	↑	72.9-77.9	N/D	69.9
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	85.7%	95%
	Finance	% Direct Expense/Gross Patient Revenue	↓	45-48%	56.01%	51.78%
MV-Long Term Care	Clinical	Fall Rate	↓	3.4-4.1	4.2	N/A
		New/Worsening Pressure Ulcers Rate	↓	0.68-0.81	0.0	N/A
	People	Employee Engagement Partnership Mean	↑	58.3-63.5	N/D	56.2
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	45.5%	95%
	Finance	% Direct Expense/Gross Patient Revenue	↓	47-50%	56.01%	55.59%
MV-Post Acute Care	Clinical	Fall Rate	↓	2.7-3.2	4.2	N/A
		New/Worsening Pressure Ulcers Rate	↓	1.5-1.9	0.1	N/A
	People	Employee Engagement Partnership Mean	↑	70.3-75.3	N/D	66.3
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	70.3%	72.1%
	Finance	% Direct Expense/Gross Patient Revenue	↓	47-50%	56.01%	63.93%
Mount View Care Center Overall	Clinical	Rehospitalization within 30 days of Admission	↓	11-13%	13.8%	4.0%
	People	Employee Engagement Partnership Mean	↑	70.2-75.2	N/D	68.9
		Employee Turnover (Annualized)	↓	18-20%	31.7%	N/A
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	69.3%	77%
	Finance	% Direct Expense/Gross Patient Revenue	↓	46-49%	56.01%	56.38%

↑ Higher rates are positive
↓ Lower rates are positive

N/D = No data available to date
*Annualized Data

Financial Division

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
Business Operations	People	Employee Engagement Partnership Mean	↑	78.9-83.9	N/D	70.8
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	84%	84%
	Finance	Direct Expense Budget	↓	\$754,368-\$802,520	\$742,687*	\$719,555
		Audit Results – Adjusting Journal Entry (AJE)	↓	2-4 AJEs	0	0
		Financial Statements: Done by 3 rd Tuesday Following Month	↑	100%	100%	100%
Demand Transportation	Clinical	Double Occupancy per Trip per Week	↑	11-13	11	11
	People	Employee Engagement Partnership Mean	↑	78.9-83.9	N/D	70.8
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	83%	78%
		Community Partner Satisfaction Percent Good/Excellent	↑	75-80%	100%	100%
	Community	% Excellent on External Satisfaction Survey	↑	85-90%	N/D	N/A
	Finance	% Direct Cost/Gross Patient Revenue	↓	320-325%	214.06%	N/A
Information Services	Clinical	Timeliness of Chart Completion (Hospital record within 25 days post discharge)	↑	70-75%	75.2%	N/A
	People	Employee Engagement Partnership Mean	↑	78.9-83.9	N/D	70.8
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	86%	90%
	Finance	Direct Expense Budget	↓	\$2,534,148-\$2,695,903	\$2,279,287*	\$2,344,120
Patient Accounts and Enrollment	People	Employee Engagement Partnership Mean	↑	78.9-83.9	N/D	70.8
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	81%	89%
	Finance	Direct Expense Budget	↓	\$761,900-\$810,532	\$783,783*	\$727,153
		Write-Off Percent of Gross Revenue	↓	.5-.6%	0.35%	N/A
Purchasing	People	Employee Engagement Partnership Mean	↑	78.9-83.9	N/D	70.8
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	97%	98%
		% Paperwork Accuracy	↑	95-100%	97%	97.8%
		Deliver All Packages on the Day of Arrival	↑	95-100%	98%	99.9%
	Finance	Direct Expense Budget (\$17,425-\$18,538/month)	↓	\$209,109-\$222,456	\$216,627*	\$209,759

↑ Higher rates are positive
↓ Lower rates are positive

N/D = No data available to date
*Annualized Data

Support Services

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
Adult Protective Services	Clinical	% of At-Risk Investigations Closed within 30 Days	↑	55-65%	64%	75%
		% of Repeat At-Risk Cases Opened within 1 month of Closure	↓	10-15%	6%	N/A
	People	Employee Engagement Partnership Mean	↑	77.7-80.7	N/D	69.8
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	92-94%	89.3%	91%
		Community Partner Satisfaction Percent Good/Excellent	↑	75-80%	73%	73%
	Finance	Direct Expense Budget	↓	\$430,215-\$457,675	\$432,161*	N/A
Communications & Marketing	People	Employee Engagement Partnership Mean	↑	84.9-87.9	N/D	82.9
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	80%	81%
	Community	Website Growth: Outpatient Services – Mental Health Page Views	↑	>325/month	301	N/A
		Website Growth: Skilled Nursing Page Views	↑	>300/month	331	N/A
	Finance	Direct Expense Budget	↓	\$177,578-\$188,913	\$177,819*	N/A
County/City IT	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	61%	40%
	Finance	IT Utilization – Partnership	↓		40.35%	39.78%
Housekeeping	Clinical	Adverse Events (Housekeeping Cause)	↓	3-5	0	N/A
	People	Employee Engagement Partnership Mean	↑	81.5-84.5	N/D	79.5
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	60.5%	75%
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	91%	N/A
	Finance	Direct Expense Budget	↓	\$1,133,417-\$1,205,763	\$1,052,460*	N/A
Laundry	People	Employee Engagement Partnership Mean	↑	89.1-92.1	N/D	87.1
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	33.6%	37.5%
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	100%	N/A
	Finance	Direct Expense Budget	↓	\$386,660-\$411,340	\$408,110*	N/A

↑ Higher rates are positive
↓ Lower rates are positive

N/D = No data available to date
*Annualized Data

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
Maintenance/ Grounds	Clinical	Adverse Events (Maintenance Cause)	↓	5-10	5	N/A
	People	Employee Engagement Partnership Mean	↑	90.9-93.9	N/D	88.9
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	52.9%	75%
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	100%	N/A
	Finance	Direct Expense Budget	↓	\$1,852,066-\$1,863,900	\$1,481,146*	N/A
Transportation	People	Employee Engagement Partnership Mean	↑	84.1-97.1	N/D	N/A
	Service	ESS Overall External Customer Satisfaction: Percent 9/10 Responses		82-86%	50.2%	N/A
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	73%	N/A
	Finance	Direct Expense Budget	↓	\$73,189-\$77,861	\$29,071*	N/A
Environmental Services Overall	Clinical	Adverse Events (Environmental Cause)	↓	10-15/year	5	N/D
	People	Employee Engagement Partnership Mean	↑	87.1-90.1	N/D	85.1
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	82-86%	50.2%	56.3%
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	91%	93%
	Finance	Direct Expense Budget	↓	\$3,499,450-\$3,722,819	\$3,055,687*	\$3,105,445
Human Resources	People	Employee Engagement Partnership Mean	↑	84.9-87.9	N/D	82.9
		Employee Turnover Rate	↓	20-23%	23.4%*	22.9%
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	81%	41%
	Finance	Direct Expense Budget	↓	\$941,245-\$1,001,324	\$825,535*	\$720,834
Nutrition Services	Clinical	Diet Order Accuracy	↑	95-99%	93%	93.0%
	People	Employee Engagement Partnership Mean	↑	78.2-83.2	N/D	73.2
	Service	External Customer Satisfaction: Percent 9/10 Responses	↑	51.3-58.3%	39.9%	46.6%
		% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	90%	N/A
	Finance	Direct Expense Budget	↓	\$2,464,544-\$2,621,855	\$2,649,483*	\$2,732,879
Pharmacy	Clinical	Pharmacy Medication Error Rate	↓	0.81%-0.090%	0.024%	0.10%
	People	Employee Engagement Partnership Mean	↑	69.5-74.5	N/D	68.2
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	68%	77%
	Finance	% Direct Expense/Gross Patient Revenue	↓	38-41%	36.69%	N/A

↑ Higher rates are positive
↓ Lower rates are positive

N/D = No data available to date
*Annualized Data

Department	Domain	Outcome Measure	↓ ↑	Target Level	YTD	2014 Year End
Quality	Clinical	NCHC Adverse Events	↓	3.8-4.0	3.9	4.0
	People	Employee Engagement Partnership Mean	↑	84.9-87.9	N/D	69.8
		NCHC Injury Claims	↓	50-60	22*	N/A
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	77%	75%
	Finance	Direct Expense Budget	↓	\$553,341-\$588,661	\$539,146*	\$797,287
Volunteer Services	Clinical	% Volunteers Complete Required Annual Health Stream Training	↑	75%	N/D	N/A
	People	Employee Engagement Partnership Mean	↑	84.9-87.9	N/D	82.9
	Service	% Excellent on Internal Customer Satisfaction Survey	↑	80-85%	100%	96%
	Community	Increased # Volunteers	↑	10-15%	8.9%*	N/A
	Finance	Direct Expense Budget	↓	\$91,967-\$97,837	\$89,402*	\$93,720

↑ Higher rates are positive
↓ Lower rates are positive

N/D = No data available to date
*Annualized Data

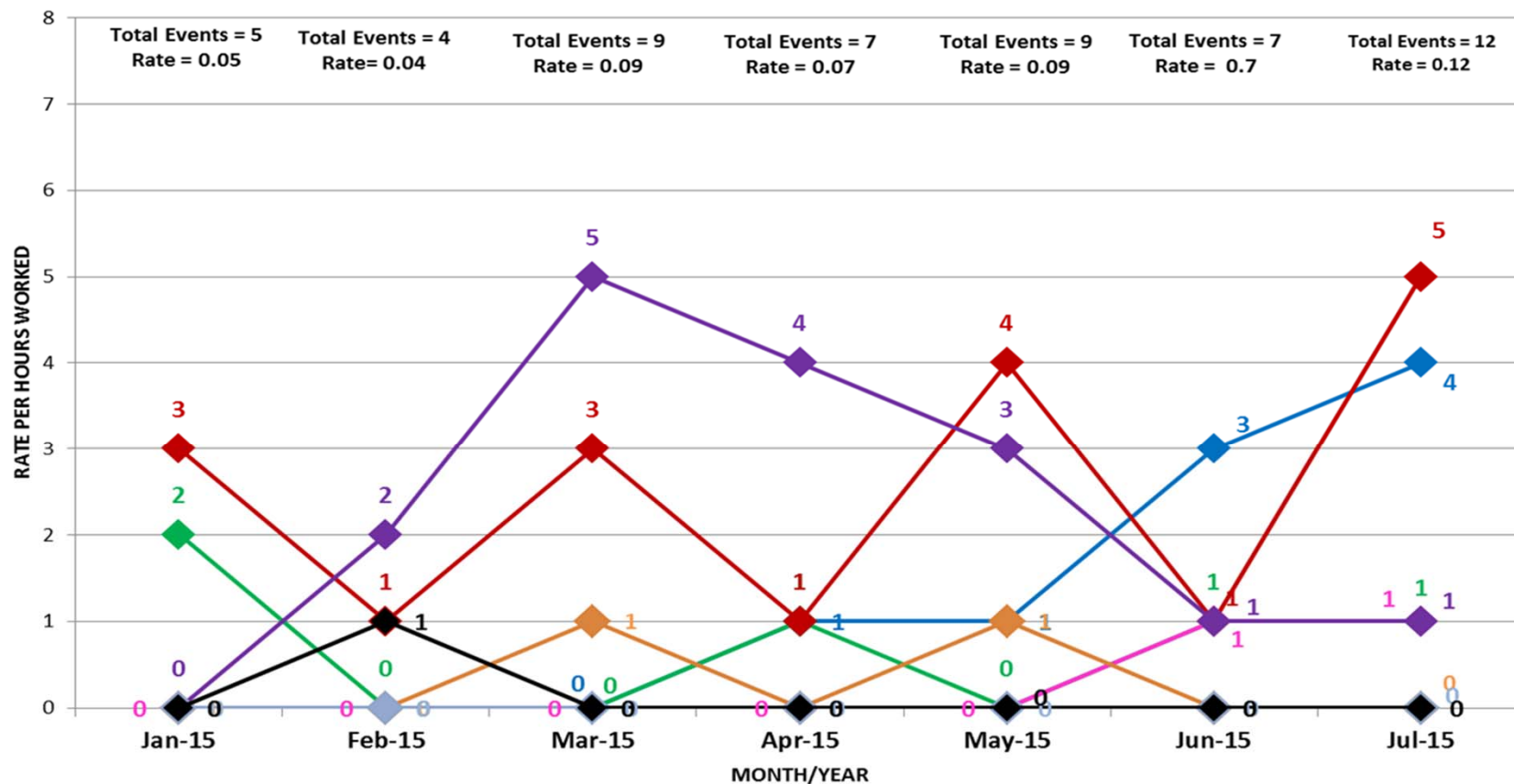
2014 Cumulative Rates

Overall Cumulative Rate= **0.11**
 Altercation Rate=0.009
 Fall Rate= 0.02
 Direct Patient Care Rate= 0.04
 Other Work Activities Injury= 0.02
 Struck by/against/between object= 0.01
 Lost/Theft/Damaged= 0.001
 Motor Vehicle= 0.002
 Other = 0.002

NCHC EMPLOYEE ADVERSE EVENTS

2015 Cumulative Rates

Overall Cumulative Rate **0.08**
 Altercation 0.013
 Fall 0.007
 Direct Patient Care 0.26
 Other Work Activities 0.023
 Struck by/Against/Between 0.003
 Lost/Theft Damage 0.003
 Motor Vehicle 0.00
 Other 0.001



Adverse Event: Unexpected occurrence with a high potential for harm, injury or adverse outcome due to human error, process failure or environmental factors.

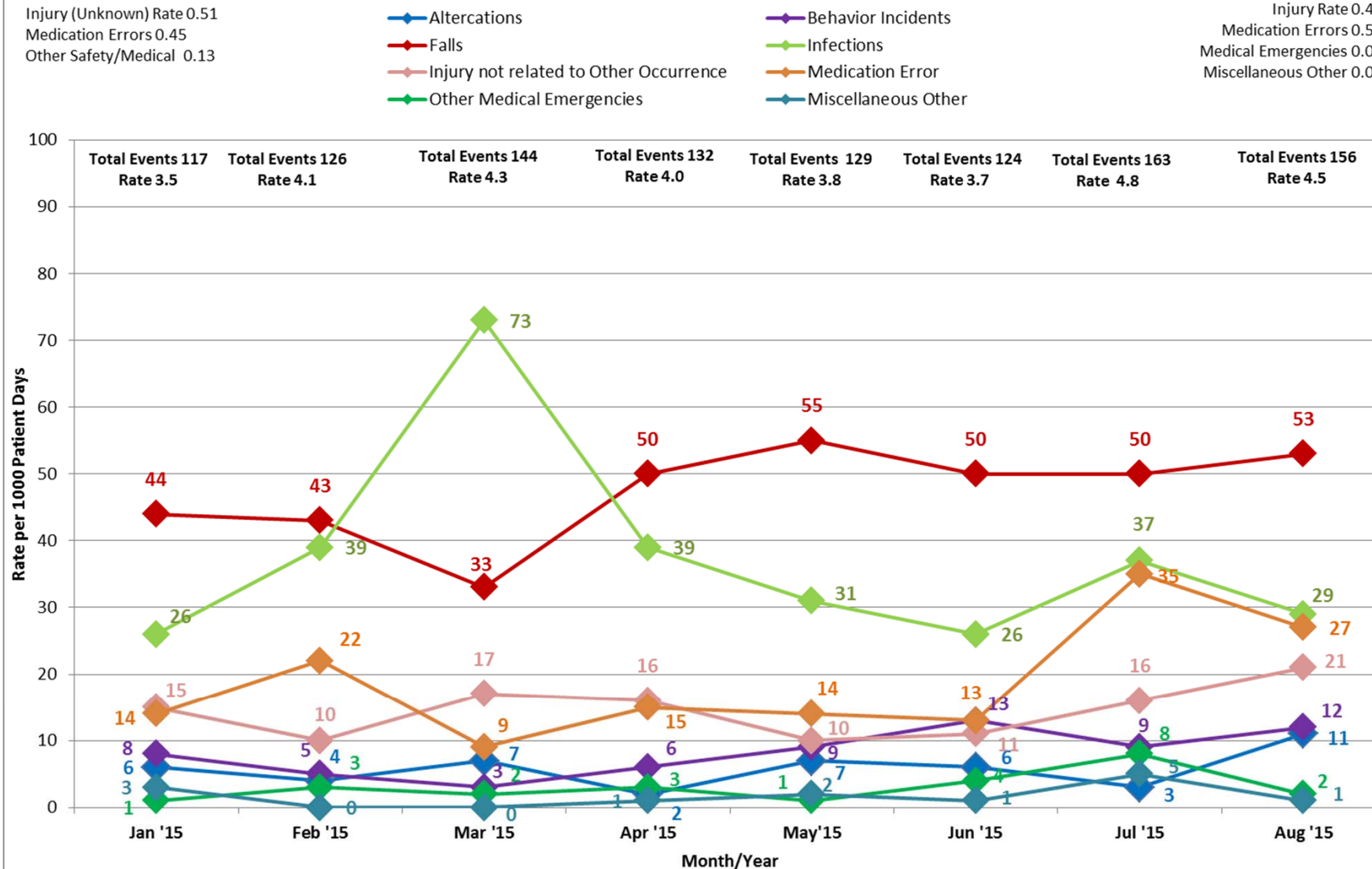
2014 Cumulative Rate 4.1

Altercation Rate 0.23
 Behavior Rate 0.18
 Fall Rate 1.49
 Infection Rate 1.13
 Injury (Unknown) Rate 0.51
 Medication Errors 0.45
 Other Safety/Medical 0.13

NORTH CENTRAL HEALTH CARE CLIENT/PATIENT/RESIDENTS ADVERSE EVENT DATA

2015 Cumulative Rate 4.1

Altercation Rate 0.17
 Behavior Rate 0.24
 Fall Rate 1.42
 Infection Rate 1.12
 Injury Rate 0.44
 Medication Errors 0.56
 Medical Emergencies 0.09
 Miscellaneous Other 0.05



Adverse Event: Unexpected occurrence with a high potential for harm, injury or adverse outcome due to human error, process failure or environmental factors.