

**Recovery Technology LLC**  
**Performance Improvement Plan**  
**2023**

**Mission Statement:** The Mission of Recovery Technology is making a positive difference in the quality of lives for the people we support.

**Purpose:** It is the purpose of Recovery Technology's Performance Improvement Program to systematically monitor and improve the organization's service delivery and administrative structures. This purpose is achieved through routine data collection, analysis of organizational performance, quality teamwork and continuous improvement activities. The Performance Improvement Program also supports the organization's Strategic Plan through application of the quality cycle to strategic activities.

**Scope:** The Recovery Technology Performance Improvement Program monitors, evaluates, and improves the effectiveness of services, the efficiency of services, client's access to services and stakeholder satisfaction in all its' programs:

1. Outpatient Therapy (children and adults) including Dialectic Behavior Therapy
2. Case Management (children and adults)
3. Assertive Community Treatment/Integrated Dual Disorder Treatment
4. Psychiatric Services
5. Anger Management Groups
6. Batterer's Intervention Groups
7. Spravato Clinic

The Performance Improvement Program focuses on all key organizational activities including management and treatment and support services. Improving organizational and service quality is a job function of all employees of the organization.

**Roles and Responsibilities:** All persons affiliated with Recovery Technology have a role in its Performance Improvement program:

- a. **Chief Executive Officer:** It is the role of the CEO to set the organization's strategic direction and vision and ensure organizational commitment to quality and the Performance Improvement Program. The CEO is a member of the Performance Improvement Team and serves as the **Director of Performance Improvement**. It is the role of the CEO to ensure implementation of the Performance Improvement and Strategic Plans. The CEO also routinely updates the Leadership team regarding program monitoring. The CEO creates and distributes the Performance Improvement Team agenda and facilitates its monthly meetings. The CEO also ensures the design of useful monitoring indicators, data collection methods, analysis, and reporting, facilitates external audits by payers, accreditation bodies, the State of Michigan, and ongoing compliance with CARF accreditation standards.

- b. **Performance Improvement Team Members:** It is the role of the Performance Improvement team members to perform those quality management functions that ensure the successful implementation of the Performance Improvement and Strategic Plans. Those functions include the collection of valid and reliable data, analysis and report writing, clinical case record reviews, billing verifications, teamwork facilitation and quality training.
- c. **Leadership Team:** Recovery Technology's Leadership Team consists of the Owner, Greg Gallagher, Jim DeBruler, CEO, Devin Dombrowski, Clinical Director, Amy Thomas, Executive Director and Janet Liebendorfer, CFO. The Leadership Team meets weekly and reviews any issues that may have occurred during the week, the minutes of the Performance Improvement Team, any Behavior Risk issues within Recovery Technology, clinical issues, billing issues and other financial matters and ensures the implementation of the Strategic and Performance Improvement Plans as well as other written plans. All members on the Leadership Team are considered equals, and final decisions about Recovery Technology are made by this team.
- d. **Staff:** It is the role of all Recovery Technology Staff to participate in the Performance Improvement Program by sharing their expertise in the teamwork process and ensuring data collected is valid and reliable.

**Data Validity, Reliability, Completeness and Accuracy:** Recovery Technology maintains a data driven Performance Improvement program. Performance improvement is based upon objective analysis of reliable data. Satisfaction surveys are collected from clients, business partners and staff. Recovery Technology has used the same satisfaction measurement tools for over 14 years to measure the same identified indicators accurately and consistently. The Performance Improvement Team routinely verifies the validity of data submitted for performance measurement purposes by asking the question "Are we measuring what we claim to be measuring?" When issues with data validity are noted, the Performance Improvement Team acts to ensure resolution.

Data reliability is also tested by: 1) comparison of Recovery Technology's Quality analysis against external analyses completed by payers, accreditation bodies, or other regulatory entities; 2) comparison of data collection methods against standards established by the State of Michigan Department of Health and Human Services; 3) monitoring of unexpected or unexplained apparent shifts in performance based upon data used; 4) at least annual monitoring and evaluation of data collection methods and sources for ongoing accuracy, completeness and reliability.

Recovery Technology collects data from the following sources:

1. Financial/budget reports

2. Accessibility reports
3. Satisfaction Surveys (client, business, employee)
4. Risk Management reports
5. Human Resource Activity
6. Technology
7. Health and Safety Reports/Emergency Response Reports
8. Outcome Reports
9. Service Delivery (Discharge and annual reports)
10. Incident Reports
11. Formal/Informal Complaints
12. Demographic Data

During the Performance Improvement Team's monthly meetings, reports from each department are gathered on the effectiveness, efficiency, access, and satisfaction of each program (see team meeting minutes).

### **The Quality Cycle**

**Philosophy:** Recovery Technology practices a continuous quality improvement cycle which consists of planning, monitoring, reporting, and responding.

**Planning:** The quality cycle is driven not only by this Performance Improvement Plan but also by Recovery Technology's Strategic Plan. These plans provide a basis that focuses efforts and activities and delineates clear goals and timelines to be achieved.

**Monitoring:** The quality cycle is informed by the continuous collection of valid and reliable performance data. Each performance indicator describes the data necessary for measurement, their source and the method utilized to analyze the data.

**Reporting:** Data collected are analyzed to routinely inform the organization. Reporting provides clarity around the areas that are working well, as well as areas that present opportunities for improvement.

**Response:** The quality cycle is fueled by data driven, performance improvement response. Responses include not only the quality improvement teamwork process, but also working in partnership with LifeWays and other payers toward systemic change, informing stakeholders and gathering their input, and systematically improving organizational treatment processes, policies, and business practices. Response addresses areas for improvement, re-measures indicators for effect, and standardizes practices across the organization.

**Annual Review:** Performance Improvement Plan is reviewed annually for continued efficacy. The review includes:

- a. Current accuracy of the descriptions of the program structure and Performance Improvement Committee Membership.
- b. The efficacy of performance indicators (does the Performance Improvement plan monitor what it should, at the frequency it should and in the way it should?)
- c. The achievement of each performance indicator.
- d. Recommendations of revisions to the program structure and performance monitoring plan.

Performance Improvement Partnerships: Recovery Technology is committed to partnering with other organizations within the mental health treatment continuum of care to ensure clients receive the highest quality service. These partnerships include facilitation of external audits of Recovery Technology programs, thoroughly addressing requests for improvement as a result of external audits, participation in LifeWays and other payer network quality improvement efforts, assistance and cooperation with audits performed by the Michigan Department of Health and Human Services, maintenance of CARF accreditation, implementation of best practices and other activities identified as improving quality of care.

**Strategic Planning:** On an annual basis, the CEO and the organization's leadership team engage in strategic planning. Strategic planning is the process of determining the organization's long-term goals.

Strategic planning begins with an environmental scan which includes the following elements:

- a. Review of the organization's performance measurement data, including input from all stakeholder groups.
- b. Review of the results of external audits performed during the previous year.
- c. Review of the organization's financial status.
- d. Review of the organization's written vision statement.
- e. Review of the organization's written mission statement.
- f. Review of the organization's written corporate values/code of ethics.
- g. Review of the progress on the previous year's strategic plan.
- h. Analysis of the organization's current ability to meet its contracts and serve its clients.

i. Review of all plans and outcome reports

Recovery Technology utilizes the information collected as a part of the environmental scan to complete an analysis. This includes brainstorming of the organization's current strengths, weaknesses, opportunities, and threats identified through discussing their relevance, immanence, and their ability to be generalized across the organization; evaluating the continued relevance of the current plan and evaluate whether the fundamental strategic vision for Recovery Technology has changed.

**Stakeholder Input:** Recovery Technology routinely solicits, collects, analyzes, and uses input from stakeholders to create and continuously improve its services. These stakeholders include persons served, personnel, and community members in general. Recovery Technology utilizes a variety of mechanisms to gather stakeholder input, including customer satisfaction surveys, routine meetings with contract managers representing payers and client/family input forms and monitoring of online activity and comments from our website.

- a. **Client Satisfaction Surveys:** Client satisfaction surveys are continuously distributed, collected and analyzed.
- b. **Business Satisfaction Surveys:** Business satisfaction surveys are continuously distributed, collected and analyzed.
- c. **Employee Satisfaction Surveys:** Employee satisfaction surveys are continuously distributed, collected and analyzed.
- d. **Payor contract management meetings:** On a regular basis the CEO and other leadership personnel participate with representatives of payer organizations in a review of Recovery Technology's contractual performance. Feedback provided by the payer is integrated into Recovery Technology's Performance Improvement Program and Strategic Planning process.
- e. **Client/Family input forms:** These forms are kept in both Recovery Technology lobbies, on the website and staff may also provide them to clients or stakeholders. These forms provide the opportunity to express concerns and ideas for improvement. These forms are presented to the Performance Improvement Team for action in the meeting after they are received. The Performance Improvement Team utilizes input for planning and performance improvement activities. The Performance Improvement Team responds to each form (when contact information is provided), describing the activity(ies) that will occur as a result of the input.
- f. **External Audit Reports:** Recovery Technology routinely receives audits from various payer organizations (including Medicaid Health Plans, LifeWays, and third-party insurance carriers) and regulatory bodies (including the Michigan Department Health and Human Services, Mid-State Health Network, LifeWays and CARF). At the conclusion

of each external audit, Recovery Technology receives an audit report, which details audit findings and recommendations. These audit reports generally require a response in the form of a Corrective Action Plan. There are three phases to the corrective action plan development process:

1. **Phase I: Corrective Action planning:** Identification of problems and administrative/service delivery policies and procedures affected by potential system changes made.
2. **Phase II: Corrective Action description:** Writing a precise and clear plan of correction that describes the changes to be made; expected results of those changes; monitoring currently in place or to be developed to ensure changes have the desired effect. An effective corrective action plan must validate the effectiveness of the corrective action to ensure that the problem does not reoccur.
3. **Phase III: Corrective Action Implementation:** Managing a corrective action project to resolution is essential. Phases I and II of the corrective action plan development process must be completed with attention to implementation. For each corrective action plan developed, the developer must consider: who will be responsible for implementation of the corrective action plan; what policies and procedures must be revised/developed in order to effectively implement the corrective action proposed; what are the timelines for effective corrective action; who must receive training/re-training in the proposed corrective action; how will Recovery Technology know that the planned corrective action has been effective in addressing/improving the identified issue?

**Environment of Care/Accessibility:** Recovery Technology promotes accessibility and the removal of barriers for the persons served and other stakeholders. Recovery Technology addresses accessibility issues to:

- a. Enhance the quality of life of clients served in our programs.
- b. Implement non-discriminatory employment practices.
- c. Meet legal and regulatory requirements.
- d. Meet the expectations of stakeholders in accessibility.

At every meeting, the Performance Improvement Team reviews inspection reports on Recovery Technology's facility. These reports identify barriers in the following areas: architecture, environment or location, transportation, attitudes, finances, employment, and communication. Barriers identified because of these reports are addressed at each meeting with follow up occurring at subsequent meetings and included in an annual Accessibility outcome report.

**Incident/Critical Incident/Sentinel Event Review:** Recovery Technology continually reviews and acts upon adverse occurrences that take place in clients' lives while receiving services. This review process must evaluate the extent to which:

-Recovery Technology services and/or staff were involved in precipitating events/circumstances to the critical incident/sentinel event.

-Additional precautions that could have prevented the critical incident/sentinel event.

-Procedural changes that might prevent the critical incident/sentinel event from occurring in the future.

This critical incident/sentinel event review utilizes a root cause analysis process. This root cause analysis process takes place at the Leadership level and is augmented by routine clinical record reviews and service utilization review processes. The root cause analysis process requires that staff complete incident reports within 24 hours of the occurrence.

**Clinical Record Review:** Comprehensive, accurate and timely record of individualized services provided to our clients is paramount to the organization's success. Not only do payers require adherence to medical records standards, but also the maintenance of superb clinical records is necessary to achieve high quality care for our clients. Recovery Technology is committed to an internal record review procedure that continually ensures client records are comprehensively and accurately maintained. On an annual basis, the clinical record review process ensures that a representative sample of each program's client population is reviewed. Reviews are completed using a standardized, objective data collection tool, which addresses the standards and requirements of payers.

### **Performance Measurement**

Performance measures are developed to monitor the implementation, use and outcomes of organizational functions and service delivery. These performance measures have been developed to measure:

-The effectiveness of services (addressing the quality of care and service outcomes)

-The efficiency of services (administratively oriented measures)

-Service access

-Satisfaction/feedback

Performance measures are continuously monitored to effectively identify areas for improvement. Measures are established under each of the four domains (effectiveness,



efficiency, satisfaction, access) and prioritized (High, Medium, Low and Ongoing Priorities) as well as who the responsible person or persons are for monitoring of the goal.

**Goals:** The following Goals have been established for the Quality Improvement Program to be achieved by December 31, 2023:

**1. Recovery Technology will use clients' completion of goals from their treatment plans to measure clinical improvement (effectiveness) (High Priority/Ongoing). This data will be collected and reviewed by the Performance Improvement Team on an annual basis. Data will be collected from discharge summaries and annual status reports. Department supervisors are responsible for ongoing monitoring.**

Objective #1: Outpatient Therapy will achieve at least 60% improvement.

Objective #2: Case Management will achieve at least 50% improvement.

Objective #3: ACT will achieve at least 30% improvement.

Objective #4: IDDT will achieve at least 25% improvement.

Objective #5: DBT will achieve at least 50% improvement.

Objective #6: Anger Management will achieve 75% improvement.

Objective #7: Batterer's Intervention Program will achieve 75% improvement.

**2. Recovery Technology will receive a rating of 95% or better on all satisfaction surveys (satisfaction) (High Priority/Ongoing). This data will be collected and reviewed by the Performance Improvement Team on a monthly basis. The CEO and Performance Improvement Team Members are responsible for ongoing monitoring.**

Objective #1: Recovery Technology will receive a rating of 95% or better on all business satisfaction surveys (satisfaction)(High Priority/Ongoing).

Objective #2: Recovery Technology will received a rating of 95% or better on all employee satisfaction surveys (Satisfaction)(High Priority/Ongoing).

Objective #3: Recovery Technology will receive a rating of 95% or better on all client satisfaction surveys (satisfaction)(High Priority/Ongoing).

**3. Recovery Technology will continue to strengthen a healthy work environment (effectiveness, efficiency) (High Priority/Ongoing). Data will be collected by Human Resources. The CEO and Performance Improvement Team Members are responsible for ongoing monitoring.**

Objective #1: Training regarding staff burnout and compassion fatigue will be provided over the course of the year.

Objective #2: Recovery Technology Leadership will take steps to decrease burnout and compassion fatigue.

**4. Recovery Technology will ensure that all staff consistently receive their annual training in a meaningful way that will improve their clinical practices and strengthen the workplace (efficiency and effectiveness) (High Priority/Ongoing). Data will be collected by Human Resources. The CEO and Performance Improvement Team Members are responsible for ongoing monitoring.**

Objective #1: Recovery Technology will achieve 100% compliance for all staff in all required training.

Objective #2: Recovery Technology will offer relevant training to our staff on subjects that will benefit them clinically and in their work with clients.

Objective #3: Recovery Technology will continue to use Relias Trainings and in-house trainings.

**5. On an annual basis, regulatory audits will demonstrate superior organizational performance by receiving a score of 95% or better (efficiency and effectiveness) (Low Priority/Ongoing). The Performance Improvement Team Members are responsible for ongoing monitoring.**

Objective #1: Recovery Technology will perform audits on random files in each department. The Performance Improvement Team will review the results of these audits and look for patterns and trends and areas for improvement.

Objective #2: Recovery Technology will participate in all external audits and incorporate any recommendations or plans of corrective action into practice.

**6. Recovery Technology will maintain profitability in each of its departments. Data will be collected by the Finance Department and reviewed by the Performance Improvement Team, the Leadership Team and Department Supervisors who are all responsible for ongoing monitoring.**

Objective #1: On a weekly basis, staff will be given data regarding their productivity. Staff who are underperforming will be assisted in increasing their productivity. Staff who are meeting their benchmarks will be paid a bonus.

Objective #2: Leadership will monitor billing department activity by measuring the length of time claims are entered and then paid.

Objective #3: Billing submitted versus billing paid will be compared to assure there are no discrepancies. Any discrepancies will be evaluated for improvement.