

Performance Measurement & Management Assessment

Review Year: 2025

	GOAL	EMPLOYEE RESPONSIBLE FOR TRACKING	DATA SOURCE	FREQ. OF DATA	1Q	2Q	3Q	4Q	2024
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**BRACKENWOOD
6 Bed location**

Efficiency	Operate within contracted days.	Finance Department	Daily tracking report	Qtr.	90 out of 90	91 out of 91	92 out of 92	92 out of 92	100%
Efficiency	Communication with individuals' guardians will occur at least 1x monthly	Home Supervisor	Community and Family Contact Sheet	Monthly	100%	100%	100%	92%	98%
Efficiency	CHHS supervisors will speak with a served individual's case manager at least 2x a month	Home Supervisor	Community and Family Contact Sheet/ Email	Monthly	100%	100%	100%	100%	100%
Effectiveness	100% occupancy	Finance Department	Occupancy Report	Annually	98%% Occupancy (50 days with open beds) (6 bed home x 365 days = 2190 days)				
Effectiveness	Clients will participate in their community at least 2x a month.	Home Supervisor	Progress Notes	Monthly	97%	100%	100%	100%	99%
Effectiveness	80% of POS goals will have progress	Home Supervisor	Progress Notes	Monthly	-	-	-	-	100%
Analysis	Currently, the supervisor is meeting the goals as set forth by CHHS administration.								

**CLEVELAND
6 Bed location**

Efficiency	Operate within contracted days.	Finance Department	Daily tracking report	Qtr.	90 out of 90	91 out of 91	92 out of 92	92 out of 92	100%
Efficiency	Communication with individuals' guardians will occur at least 1x monthly	Home Supervisor	Community and Family Contact Sheet	Monthly	100%	100%	100%	100%	100%
Efficiency	CHHS supervisors will speak with a served individual's case manager at least 2x a month	Home Supervisor	Community and Family Contact Sheet/ Email	Monthly	100%	100%	100%	100%	100%
Effectiveness	100% occupancy	Finance Department	Occupancy Report	Qtr.	100% Occupancy (0 days with open beds) (6 bed home x 365 days = 2190 days)				
Effectiveness	Clients will participate in their community at least 2x a month.	Home Supervisor	Progress Notes	Annually	53%	89%	100%	100%	85%
Effectiveness	80% of POS goals will have progress	Home Supervisor	Progress Notes	Monthly	-	-	-	-	95%
Analysis	The home supervisor has maintained high standards. When it comes to community outings during the first quarter, all parties are mindful of the notable weather this region has and in consideration of the client demographics at that location, outings may be been limited.								

**HARRISON
6 Bed Location**

Efficiency	Operate within contracted days.	Finance Department	Daily tracking report	Qtr.	90 out of 90	91 out of 91	92 out of 92	92 out of 92	100%
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Efficiency	Communication with individuals' guardians will occur at least 1x monthly	Home Supervisor	Community and Family Contact Sheet	Monthly	-	-	-	100%	25%
Efficiency	CHHS supervisors will speak with a served individual's case manager at least 2x a month	Home Supervisor	Community and Family Contact Sheet/ Email	Monthly	-	-	-	100%	25%
Access	100% occupancy	Finance Department	Occupancy Report	Annually	94% Occupancy (131 days with open beds) (6 bed home x 365 days = 2190 days)				
Effectiveness	Clients will participate in their community at least 2x a month.	Home Supervisor	Progress Notes	Annually	-	-	-	100%	25%
Effectiveness	80% of POS goals will have progress	Home Supervisor	Progress Notes	Annually	-	-	-	-	95%
Analysis	Limited information for this location due is to lack of documentation. In summer 2025, it was identified that a change was needed in the supervision of this location. In August 2025, CHHS hired a new home supervisor. Since then, there have been significant improvements in the home that include more thorough documentation, communication, and activity.								
PINEHAVEN GREEN 6 Bed Location									
Efficiency	Operate within contracted days.	Finance Department	Daily tracking report	Qtr.	90 out of 90	91 out of 91	92 out of 92	92 out of 92	100%
Efficiency	Communication with individuals' guardians will occur at least 1x monthly	Home Supervisor	Community and Family Contact Sheet	Monthly	56%	67%	94%	94%	78%
Efficiency	CHHS supervisors will speak with a served individual's case manager at least 2x a month	Home Supervisor	Community and Family Contact Sheet/ Email	Monthly	97%	81%	83%	100%	90%
Access	100% occupancy	Finance Department	Occupancy Report	Annually	100% Occupancy (0 days with open beds) (6 bed home x 365 days = 2190 days)				
Effectiveness	Clients will participate in their community at least 2x a month.	Home Supervisor	Progress Notes	Qtr.	67%	78%	100%	94%	85%
Effectiveness	80% of POS goals will have progress	Home Supervisor	Progress Notes	Annually	-	-	-	-	68%
Analysis	Limited goal progress was due to the number of refusals for that goal/objective. Supervisor was provided guidance on how it mitigates the situation to request different goals/objectives if refusals continue after 3-4 months. Supervisor was also educated on the importance of regular communication with care teams and guardians to ensure productive flow of information. Home supervisors notes that clients would refuse outing options and have a greater tendency to want to do things on their own.								
WHITE PINES 6 Bed Location									
Efficiency	Operate within contracted days.	Finance Department	Daily tracking report	Qtr.	90 out of 90	91 out of 91	92 out of 92	92 out of 92	100%

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Efficiency	Communication with individuals' guardians will occur at least 1x monthly	Home Supervisor	Community and Family Contact	Monthly	100%	78%	100%	100%	94%
Efficiency	CHHS supervisors will speak with a served individual's case manager at least 2x a month	Home Supervisor	Email/ Community and Family Contact Sheet/ Email	Monthly	100%	100%	100%	100%	100%
Access	100% occupancy	Finance Department	Occupancy Report	Annually	82% Occupancy (385 days with open beds) (6 bed home x 365 days = 2190 days)				
Effectiveness	Clients will participate in their community at least 2x a month.	Home Supervisor	Progress Notes	Annually	94%	100%	100%	100%	99%
Effectiveness	80% of POS goals will have progress	Home Supervisor	Progress Notes	Monthly	-	-	-	-	80%
Analysis	CHHS hired a new home supervisor in September 2025. CHHS continues to review referrals from its funding source to find a productive fit for the locations. This has been a lengthy endeavor due to past referrals not lining up well with the current dynamic of the home.								
WINTERS									
3 Bed Location									
Efficiency	Operate within contracted days.	Finance Department	Daily tracking report	Qtr.	90 out of 90	91 out of 91	92 out of 92	92 out of 92	100%
Efficiency	Communication with individuals' guardians will occur at least 1x monthly	Home Supervisor	Community and Family Contact Sheet	Monthly	100%	100%	100%	100%	100%
Efficiency	CHHS supervisors will speak with a served individual's case manager at least 2x a month	Home Supervisor	Community and Family Contact Sheet/ Email	Monthly	78%	100%	100%	100%	94%
Access	100% occupancy	Finance Department	Occupancy Report	Annually	100% Occupancy (0 days with open beds) (6 bed home x 365 days = 2190 days)				
Effectiveness	Clients will participate in their community at least 2x a month.	Home Supervisor	Progress Notes	Annually	100%	100%	100%	100%	100%
Effectiveness	80% of POS goals will have progress	Home Supervisor	Progress Notes	Annually	-	-	-	-	100%
Analysis	The home supervisor has maintained high standards.								
HCS									
Access	CHHS will increase clientele by 50%.	HCS Coordinator	Client roster	Annually	-	-	-	-	50%
Efficiency	Communication with individuals' guardians will occur at least 1x monthly	HCS Coordinator	Community and Family Contact Sheet/ Email	Monthly	100%	100%	100%	100%	100%

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Efficiency	HCS Coordinator will speak with a served individual's case manager at least 2x a month	HCS Coordinator	Community and Family Contact Sheet/ Email	Monthly	100%	100%	100%	100%	100%
Effectiveness	80% of contracted services will be provided.	HCS Coordinator	Progress Notes	Annually	-	-	-	-	80.4%
Analysis	Current HCS Coordinator was hired April 2025. Since then, then department has seen tremendous growth in communication, documentation, billing, and service provision.								
ADMIN									
Efficiency	The financial department will maintain at least 90% compliance in their annual audit	Director of Finance	Audit Report	Annually					100%
Efficiency	The financial department will conduct quarterly financial audits.	Director of Finance	Google Calendar	Quarterly	✓	✓	✓	✓	✓
Effectiveness	A CHHS rep will speak on the radio 3x a month	CEO	Google Calendar	Monthly	✓	✓	✓	✓	✓
Effectiveness	A CHHS representative will attend community events (Chamber, job fairs, Rotary, etc.) 3x in the next year.	CQA/ Corporate Compliance Officer	Google Calendar	Monthly	Oct. 22 - State of the Community Address Nov 4 – Chamber Connecting Women Dec 10 – Chamber After Hours				✓
Effectiveness	CHHS plant inspections will be completed once annually	CEO and Maintenance	Safety Report	Annually					X
Effectiveness	CHHS will spend \$10,000 towards employee incentives.	Director of Finance	Financial Report	Annually					✓
Analysis	CHHS has decided to move the timing of its plant inspections to the spring. This allows for a greater opportunity to review potential damage from the winter. Addressing these concerns early in the year with its funding sources and landlords allows time to procure funding, find contractors, and address issues prior to the next weekend.								
ALL PROGRAMS									
Efficiency	Utilization Management will be completed for calendar year.	CQA/ Corporate Compliance Officer	Utilization Management Form	Annually					X
Efficiency	Risk Assessment will be completed	CQA/ Corporate Compliance Officer	Risk Management and Accessibility Plan	Annually	Feb 2025				✓
Effectiveness & Efficiency	95% of employees will receive required trainings within the required timeframes.	Office Manager	MITC	Quarterly					
Effectiveness	CHHS will have a turnover rate of 50%	Officer Manager	MITC	Annually					72%
Effectiveness	CHHS will increase staffing by 20%	Officer Manager	MITC	Annually					16%
Satisfaction	CHHS will receive an average of 4 out of 5 in satisfaction from their annual	CQA/ Corporate Compliance Officer	Satisfaction Survey	Annually					4.48

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	satisfaction surveys (Supports & Stakeholders)								
Satisfaction	CHHS will receive an average of 4 out of 5 in satisfaction from their annual satisfaction surveys (Employees)	CQA/ Corporate Compliance Officer	Satisfaction Survey	Annually					4.7
Satisfaction	CHHS will receive an average of 4 out of 5 in satisfaction from their annual satisfaction surveys (Individuals)	CQA/ Corporate Compliance Officer	Satisfaction Survey	Annually					4.75
Analysis	CHHS's efforts to acquire staff have paid off, even if we did not meet our target. The turnover rate has maintained itself over the past few years, thus a goal adjustment may be necessary. CHHS has seen a dramatic increase in satisfaction survey responses after making them available electronically for staff, guardians, and case managers. We still receive surveys via paper from clients and some guardians. Utilization management was not completed in 2025 due to the CQA being away on maternity leave for part of the year and then only working in the office on a limited part-time basis for most of the year.								
STANDING COMMITTEES									
Safety	Physical locations will score 90% on CMH Site Reviews	Home Supervisor	CMH Site Reviews	Annually					BW – 85% CLV – 100% HSN – 93% PHG – 93% WP – 100%
Analysis	After Brackenwood's site review, CHHS created an action plan to remediate the issues, which has since been completed, submitted, and accepted.								

Validity

- All care related documentation is formally reviewed by supervisors on a monthly basis.
- All aforementioned 'data sources' are submitted by the 'employee responsible for tracking' via fax, scanning, or physical drop off to the main office and reviewed by administration at the 'frequency of data' indicated. At that time, any discrepancies or issues noticed by administration are addressed with the 'employee responsible for tracking'.
- At least annually, the Clinical and Quality Administrator completes an internal audit that reviews all required documentation completed at the location for issues, completeness, and consistency.

Extenuating and Influencing Factors That May Impact Results

- The Performance Measurement & Management Assessment is monitored monthly by CHHS administration. In the event that performance measures are not meeting minimum requirements, administration will assess if these performance measures are appropriate for the department or if they require an action plan for additional support.

Timeframes & Communication

- All aforementioned 'data sources' are reviewed by administration at the 'frequency of data' indicated.

Results of this Performance Measurement & Management Assessment are communicated to employees, clients, and stakeholders via an annual newsletter and via our website (updated annually).

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Service Delivery Performance

- Trends
 - During times where there are staffing challenges, documentation has either been delayed or limited.
 - Ending of Q3 2025, staffing challenges emerged and continued into Q4. This trend does not have one specific antecedent.
 - Need for HCS/CLS services in the local community.
- Areas Needing Performance Improvement
 - The Brackenwood location struggled with documentation being limited or delayed.
- Action Plan Needed?
 - Yes No
 - If Yes, date of action plan Date of Supervisor's Evaluation and date of review 6 months after evaluation.
 - The Brackenwood home supervisor has been provided an action plan to address documentation concerns. This plan is dated 10/2025.
- Overall Analysis
 - CHHS performed well to ensure clients maintained productive lifestyles on all accounts (access, effectiveness, and efficiency).

Business Function Performance

- Trends
 - With the labor market trending more positive, it has started to free up administration from assisting with client care and allowed for focus to be more on hiring, growing the HCS department, and greater involvement and success in its goals. It is important to note that beginning Q4 2025, staffing numbers declined, which meant for higher administrative involvement in client care again.
- Causes
 - CHHS's hourly rate is higher than most entry level positions in the community. The HCS department's growth is contributed towards the general need for the service in the area and the job's appeal to applicants (flexible hours, day-time shifts). There is no one cause for the decline in staffing numbers, as those staff reported several different reasons.
- Areas Needing Performance Improvement
 - Getting the office manager back to their primary role of assisting the administration team as opposed to predominately aiding White Pines AFC.
- Action Plan Needed?
 - Yes No
 - If Yes, date of action plan _____ and date of review _____
- Overall Analysis
 - CHHS will continue to advocate for increased funding for its employees and operations. The overall strength of the organization has improved significantly, which can be seen in the satisfaction surveys, inspections from licensing and North Country CMH, longevity of CHHS employees, and remarks from its satisfaction surveys. CHHS will prioritize employee satisfaction and increasing staffing numbers to not only drive down overtime hours, but to aide in getting the office manager back into the office.

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Corporate Compliance

- Does any policy or procedure need revision?
 - Yes – Below are revisions that were made to CHHS’s Policy and Procedures Manual dated 2.2026.
 - Extension cords can be used for decorations, but they must be a NRTL approved, used on a temporary basis only, and must not go across any walkways, driveways, or other area that has foot traffic.
 - When clocked in, employees cannot complete personal tasks without CEO approval. If an employee is provided approval to complete a personal task, they must be clocked out during the duration of the task and will not be provided mileage compensation. Clients cannot join nor aide employees in personal tasks.
 - Paid Time Off
 - HCS Services - Food purchased by the individual served is solely for the individual. CHHS employees are not permitted to eat the food of a client and are responsible for their own meals during shifts. Staff are prohibited from cooking their food at the client’s home, outside of the use of a microwave. If a client offers to share meals or food with a CHHS employee, that employee must decline.
 - Filing A Formal Complaint
 - Investigation & Resolution of Alleged Infringement of Rights
 - Refund Policy
 - Individuals Served and Their Visitors
 - HCS - Failure to provide verified documentation will impact employee payroll, including a delay or no payment
- Are there any compliance complaints for 2025?
 - Yes
 - It was discovered that an HCS employee was forging the signature of a client and falsified their actual time spent providing client care. Funding source and MDHHS were notified.
- Any compliance risks noticed in 2025?
 - Utilization managements were not completed for 2025.
- Areas Needing Performance Improvement
 - Utilization managements are to be completed
 - Administration’s oversight of documentation
 - Regular submission of biweekly emails to care teams from supervisors.
 - Cleanliness of CHHS owned vehicles (removal of garbage and wiping down dashboards, consoles, and the inside of doors.
 - Brackenwood – Organization and timeliness of paperwork need to be improved. Location needs to be decluttered.
 - Pinehaven Green – Location needs to be cluttered and surfaces more adequately cleaned.
 - White Pines – the two open beds need to be filled.