

ComServ Inc. Report Card FY 22-23

Report Card

ComServ is committed to continually improving its organization and service delivery to individuals served and therefore sets targets for measuring its performance for the year. This report card serves as an at-a-glance snapshot or summary of the results of the established FY 22-23 performance indicators, outcomes measures expected of individuals receiving services and those established as business performance indicators.

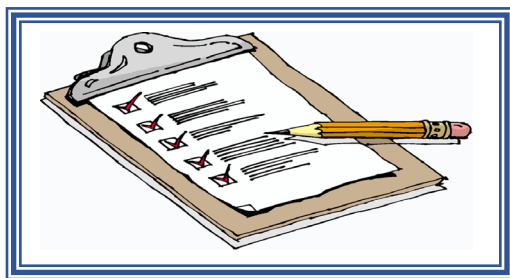
As this new year started, we continued to be impacted by the COVID-19 Coronavirus pandemic first declared a national emergency in March 2020. As a result, data collection could be challenging. At times, this resulted in partial data and outcome measures reflecting minimal or incomplete results. Several measures will be carried forward to the next year.

Scoring

- ▶ The report card score is based on tallying the number of targets “met” vs “not met.”
- ▶ Targets scored as N/A were excluded when totaling results.

Overall Results

- ▶ 31 of 38 targets were “met” (82%)
- ▶ 7 of 38 targets were “not met” (18%)















82%










# Performance Indicators	# Targets MET	# Targets NOT MET
38 (48 – 10 not applicable)	31	7



See detailed report that follows.

OUTCOMES: Services

PERFORMANCE INDICATOR			
Respite Services	Goal	Results	
25% of total authorized respite services utilized 13 individuals were authorized to receive respite and only 5 individuals used.	25%	39%	 Met
80% of respite recipients are satisfied with their respite experience(s). 100% satisfaction indicated.	80%	100%	 Met
75% of families/care providers indicate respite services meet the needs for alternate care for their individual. Note: Families/care providers not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	75%	N/A See note.	
Average utilization rate of authorized respite services exceeds 25% 40% average utilization rate. 5 individuals used their authorized respite services during the year.	>25%	40%	 Met
75% of respite recipients indicate services provided when/where needed 100% indicated services provided when/where needed	75%	100%	 Met
AFL (Alternative Family Living) / Host Family Services	Goal	Results	
100% completion of required initial & annual home inspections by MCO 100% inspections completed. There was a total of 12 AFL Providers.	100%	100%	 Met
90% completion of home inspections by AFL Supervising QP 92% of AFL home inspections completed.	90%	92%	 Met
90% of individuals receiving AFL services are satisfied with AFL 86% satisfaction of individuals with their AFL placement. Though established measure was not met; results were still good in that 6 of 7 individuals responding were satisfied.	90%	86%	 Not Met
80% of guardians, families (of individual) are satisfied with AFL placement Note: Guardians/families not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	80%	N/A See note.	
At least 2 families interviewed prior to placement of individual with AFL NOTE: 3 new AFLs during the year. Only one family and one AFL provider at the time of each placement.	2 family interviews	N/A See note..	
75% of individuals/families agree services are available in desired area 86% of individuals agree. Result based solely on participation of individuals in the survey process. Family member/LRP/guardian was not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	75%	86%	 Met
Employment Support (ES) - Supported Employment	Goal	Results	
≥30% of individuals in ES (employed) will maintain employment or transition to other employment without service disruptions 100% of individuals working (18 during the year) maintained continuous employment	≥30%	100%	 Met
75% of individuals are satisfied with their job and/or ES services 100% satisfaction. 25 individuals in supported employment.	75%	100%	 Met
75% of families/care providers are satisfied with ES received by individual Note: Families/care providers not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	75%	N/A See note..	
Establish relationship with at least 2 potential employers for new job options NOTE: Though still facing COVID-19 pandemic, we were able to add two new employment options/employers.	2 new employers	100%	 Met
80% of individuals in employment services indicate services are provided when & where needed 100% indicated ES services were provided when & where needed.	80%	100%	 Met






OUTCOMES: Services

PERFORMANCE INDICATOR			
Community Integration	Goal	Results	
90% of individuals (at Creative Opportunities Day Program) participate in health-related activities 100% participation in health-related activities.	90%	100%	 Met
85% of individuals report they like their day services 96% satisfaction indicated	85%	96%	 Met
85% of families and guardians report satisfaction with day services Note: Families/guardians not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	85%	N/A See note..	
A minimum of 20 health activities provided during the year for individuals participating in health activities attending day program-Creative Opportunities 21 health related activities were provided during the year at day program.	20 activities for year	21 activities for year	 Met
80% of individuals/families agree service is accessible/available when need 96% of individuals agree. Result based solely on participation of individuals in the survey process. Family member/LRP/guardian was not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	80%	96%	 Met
Community Housing	Goal	Results	
75% of individuals agree their life is better because of housing services received from ComServ 91% agreed their quality of life is better because of housing services received.	75%	91%	 Met
100% of individuals (ComServ is responsible for taking to medical appts) see a primary care physician at least annually 100% of individuals in community housing services received annual primary care visit.	100%	100%	 Met
80% of individuals in housing services agree they like where they live 93% agreed they like where they live	80%	93%	 Met
80% of families/guardians indicate their family member's life is better because of housing services received from ComServ Note: Families/guardians not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	80%	N/A See note..	
List of primary Medicaid medical & dental providers maintained will include those located in residential areas of individuals (50%) NC Medicaid site served as primary source when searching for a Medicaid medical or dental provider located close to residence of individuals in our homes (Alexander, Burke, Caldwell, Cleveland & McDowell counties). <ul style="list-style-type: none"> Medical providers accepting individuals with Medicaid found in all <u>5 counties</u>. Dental providers accepting Medicaid & who provide dental services to persons with special needs found in all <u>5 counties</u>. Alexander, Caldwell, Cleveland, McDowell, and Burke County. 	50%	100%	 Met
80% of Individuals, families (LRP) agree service is accessible & available when & where needed 93% of individuals agree. Result based solely on participation of individuals in the survey process. Family member/LRP/guardian was not surveyed for this measure. Survey process to be revised in new year to ensure surveys are conducted.	80%	93%	 Met











PERFORMANCE INDICATOR			
Services Coordination	Goal	Results	
100% completion of a TCM Care Management Comprehensive Assessment for all individuals who consent & are admitted to TCM services. 100% of individuals consenting & admitted to TCM services received assessment.	100%	100%	 Met
*75% of individuals report satisfaction with services received **See Note below regarding implementation with TCM Services effective 12/1/2022.	75%	N/A See note below regarding TCM services	
*75% of families/LRP/guardians report satisfaction with TCM services received by individual served **See note below regarding implementation with TCM Services effective 12/1/2022	75%	N/A See note below regarding TCM services	
100% utilization of TCM start-up funds to initiate services & establish 3 TCM teams/service sites 100% utilization of start-up funds. This new service was implemented 12/1/2022. Funds were utilized to establish 3 teams with each consisting of 1 Care Manager & 2 Extenders all under the direction of a TCM Director. Offices/services locations were set up in Morganton, Hickory & Gastonia.	100%	100%	 Met
75% of TCM recipients indicate services provided when/where needed **See note below regarding implementation with TCM Services effective 12/1/2022	75%	N/A See note below regarding TCM services	

**NOTE: Tailored Care Management (TCM) is a new service for ComServ effective 12/1/2022. From the start, there have been significant challenges ranging from the state to the local level with both the Managed Care Organizations and providers of this service that have greatly impacted and slowed progress with service provision. These challenges continued through the end of the FY and into the new FY and as a result surveys to solicit feedback regarding experience and satisfaction with services by individuals, families/LRP/guardians has not occurred at this time. Care Managers continue to work diligently to reach those with service access needs.

OUTCOMES: Business *Indicator established by MCO

PERFORMANCE INDICATOR	Goal	Results	
*100% of Level I incidents reported, responded to timely & per policy 99% compliance with timely reporting & responding per policy. Though established measure was not met, still excellent results in that 150 of 151 incidents report, followed policy/procedures.	100%	99%	 Not Met
*85% of Level II incidents reported, responded to timely & per policy 92% incidents appropriately responded to & reported.	85%	92%	 Met
*85% of Level III incidents reported, responded to timely & per policy 75% incidents appropriately responded to & reported. 2 of 4 total reports did not meet ALL criteria for reporting, responding, and timeliness.	85%	75%	 Not Met
95% compliance - (unannounced) tests of emergency procedures per policy/ requirements 94% of all emergency drills conducted & reports completed & received. Two homes experienced significant staff shortages & turnover (including key positions); & several COVID outbreaks that contributed to drills not being completed. Service Director has worked diligently to resolve issues in these homes.	95%	94%	 Not Met
95% compliance - comprehensive health & safety inspections per policy/ requirements 89% of all comprehensive health & safety inspection reports completed & received. Same note as above for emergency drills. Several inspections were not completed.	95%	89%	 Not Met

OUTCOMES: Business *Indicator established by MCO

PERFORMANCE INDICATOR	Goal	Results	
95% compliance with van maintenance checks of ComServ vans 88% of all van maintenance inspections completed & received. Same note as above for emergency drills. Several van checks were not completed.	95%	88%	 Not Met
≥90% satisfaction with services received (Individuals served) 94% satisfaction; results included combining survey outcomes for Community Integration, Community Housing, Respite, & Supported Employment services; and, agree & somewhat agree survey responses.	≥90%	94%	 Met
≥90% satisfaction with services received (Legally Responsible Person / Guardian) 94% satisfaction indicated.	≥90%	94%	 Met
≥90% satisfaction with services exchanged with ComServ (service related) Stakeholders 100% satisfaction indicated. (results based on excluding NA answers)	≥90%	100%	 Met
≥90% satisfaction with services exchanged with ComServ (Business Stakeholders) 96% satisfaction indicated. (results based on excluding NA answers)	≥90%	96%	 Met
≥90% of complaints/grievances of individuals/legally responsible persons responded to, documented, & resolved 100% compliance. 1 complaint; responded to appropriately, resolved timely per policy	≥90%	100%	 Met
≥90% of employee grievances responded to, documented & resolved There were no employee grievances during the year.	≥90%	N/A No employee grievances	
≥90% overall satisfaction with employment with ComServ 89% satisfaction results included combining strongly agree & agree survey responses.	≥90%	89%	 Not Met
100% review of reasons staff (voluntarily resigning) left ComServ employment 100% reviewed occurred.	100%	100%	 Met
≥90% of corporate compliance reports responded to, investigated as applicable & resolved 100% compliance. One corporate compliance investigation occurred.	≥90%	100%	 Met
*100% participation in MCO audits & submission of required corrective action plans (when applicable) 100% participation: 12 AFL health & safety reviews; 1 MCO health & safety review 100% participation: MCO review with no required correction action.	100%	100%	 Met