

**NORTH COUNTRY COMMUNITY MENTAL HEALTH
NORTHERN AFFILIATION
ADMINISTRATIVE MANUAL**

CHAPTER: Affiliation Chapter 6
PROCEDURE NAME: Comparative Performance Monitoring
PROCEDURE NUMBER: 6002

POLICY:

NCCMH will produce regular comparative data reports based on the Michigan Mission-Based Performance Indicator System. The range of reports will include Operations Committee Comparative Performance Reports, Provider Quality Oversight Committee Comparative Performance Reports, and CSSN-Specific Comparative Performance Reports.

PURPOSE:

To assure the consistent ongoing evaluation of the performance of the service delivery system, NCCMH, Northern Affiliation, has developed a process by which performance will be monitored at multiple levels throughout the organization.

PROCEDURES:

- I. All participating CSSNs will submit the Michigan Mission-Based Performance Indicator System data to NCCMH by the third day of the following month.
- II. NCCMH will produce Comparative Performance Reports with the following specifications.
 - A. Operations Committee reports will graphically depict the longitudinal performance of NCCMH compared to the statewide performance of the public mental health system, as well as any contractual performance objectives.
 - B. Provider Quality Oversight Committee reports will graphically depict and compare the longitudinal performance of each CSSN to contractual performance objectives.
 - C. CSSN-Specific Reports will graphically depict and compare the longitudinal performance of the specific CSSN to NCCMH, Northern Affiliation and statewide public mental health system performance.
- III. The reports will be processed with resulting action items intended to improve performance in the following ways:
 - A. Operations Committee will review the reports monthly at regular meetings. NCCMH, Northern Affiliation performance that does not exceed statewide performance of the public health system or contractual performance objectives, will be a focus of review with directives from the Operations Committee being developed.
 - B. Provider Quality Oversight Committee will review the reports monthly at regular meetings. Performance variation among CSSNs will be the focus of review with resulting action items being developed.
 - C. CSSN-Specific Reports will be reviewed by local CSSN quality improvement committees or teams in order for the local provider to compare its performance to that of NCCMH, Northern Affiliation, and the statewide public mental health system. Review will result in quality improvement initiatives that are prioritized according to the CSSN's own priorities for performance improvement.
- IV. Documentation of reviews of Comparative Performance Reports will occur at all levels and will include a description of what was reviewed, discussion, and action items that result from the review following a Plan-Do-Check-Act cycle.

REFERENCES:

DISTRIBUTION:

REVISED: October 2003

APPROVED: By the Operations Committee 06/06/01

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