

**COMMUNITY MENTAL HEALTH CENTER
OF EAST CENTRAL GEORGIA**

SUBJECT: Data Collected From Stakeholders
POLICY NUMBER: PIM - 5.01
EFFECTIVE DATE: 11/98
RESCISSION DATE:

SUPERSEDES: Policy #PI-1.00	REVIEWED DATE: LAST REVISION DATE: 10/2004
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POLICY:

The Community Mental Health Center of East Central Georgia (CMHC) collects data that provides information about the needs of our stakeholders. The purpose of collecting needs information is to monitor the CMHC's success in accomplishing its mission, which is to provide the highest quality behavioral healthcare in a professional and responsive manner that is valued by clients, families, communities and employees.

DEFINITION:

- I. **Stakeholders:** Individuals or groups who have an interest in the activities and outcomes of an organization and its programs and services. They include, but are not limited to, the persons served, families, governance or designated authority, purchasers, regulators, referral sources, personnel, employers, advocacy groups, contributors, supporters, landlords, business interests, and the community.

PROCEDURES:

- I. The Performance, Risk, Information Management and Evaluation (PRIME) Team is responsible for:
- A. Identifying data collection methods and/or instruments.
 - B. Coordinating data collection.
 - C. Compiling and reporting data.
 - D. Facilitating data analysis.
 - E. Identifying opportunities to improve the quality of programs and services.
- II. Information from Stakeholders is obtained using the following data collection methods:
- A. Comments: The CMHC's Comment Cards and collection boxes are available and accessible to persons served and to employees:
 - 1. Person Served/Family Comment Cards (see Attachment I) are available at every program location and may be sent to the CMHC's Client Advocate by:
 - a) Depositing in the collection box

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- b) Using the United States Postal System mail, or
 - c) Leaving the card with the Program Manager.
 2. Employee Comment Cards (see Attachment II) are sent to the Human Resources Manager by:
 - a) Dropping in the collection boxes located in Augusta, Thomson and Washington.
 - b) Using the United States Postal System Mail.
 - c) Using the intercampus mail system.
 - d) Dropping the card at the Human Resources Office in Building I, 3421 Mike Padgett Highway.
 3. The Client Advocate and the Human Resources Manager review the comments at the Performance Improvement/Risk Management meetings and make recommendations for corrections/improvements.
- B. Surveys: Survey questionnaires are used to collect information from persons served and from other stakeholders.
 1. The Client Satisfaction Questionnaire (CSQ-8) (Attachment III) is administered annually to persons served.
 - a) The survey population is a ten percent sample selected randomly that is representative of the CMHC's program services, disability/age groups and locations.
 - b) Survey results are reported in accordance with sampling procedures and the demographics of the persons served.
 2. The Stakeholders Survey (see Attachment IV) is administered annually to collect information from stakeholders other than persons served and their families.
 - a) Information is solicited from community organizations that have a mutual interest in the persons served by the CMHC.
 - b) Survey results are reported in accordance with the CMHC's program services, disability/age groups and locations.
 3. The Exit Interview (see Attachment V) is administered to employees separating from employment.
 - a) Employee participation is voluntary.
 - b) The questionnaire is designed to collect information concerning employee retention issues.
 - c) Results are reported at Performance Improvement/Risk Management Committee meetings.
 4. The Post Discharge Follow-up (Attachment VI) is administered to person served following discharge from services.
 - a) The survey population is all persons discharged from services
 - b) Survey results are compiled and reported in accordance with organizational demographics.
 5. Special Purpose Surveys are designed for use in collecting information about the needs of Stakeholders.

- C. Meetings – The CMHC participates in a variety of meetings with local and state community partners that involve the exchange of information about the needs of persons served and/or their families.
 - 1. Information from these meetings is retained via minutes of meetings.
 - 2. The CMHC incorporates information from its partners in addressing the needs of persons served.
- D. Fund source and regulatory representatives conduct on-site audits and a variety of oversight activities of the CMHC’s business and clinical operations.
 - 1. Fund source and regulatory agencies provide written reports of findings.
 - 2. The CMHC develops plans to correct deficiencies and/or to implement recommendations.
 - 3. The CMHC’s Leadership Team monitors corrective actions to insure that recommendations are implemented.

ATTACHMENTS:

- I. Comment Cards – Client
- II. Comment Cards – Employee
- III. Client Satisfaction Questionnaire (CSQ-8)
And Additional Satisfaction Questions
- IV. Stakeholders Survey
- V. Exit Interview Questionnaire for Voluntary Separation from CMHC
- VI. CMHC Form #200 Discharge Summary (Post Discharge Follow-Up)

REFERENCE:

- I. CARF: Behavioral Health Standards Manual, Section 1.C.1 and 2., Section 1.C.5.a.b.c.

Acting Executive Director

Date

CSB Chair

Date

:JNP