

APPENDIX A

WILLIAMS IMPLEMENTATION TASKS & TIMELINE

Tasks & Timeline

Outreach & Information Dissemination

Establish positions necessary to conduct Outreach & Information Dissemination

Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Position Description written for Associate Deputy Director of Long Term Care Assessments	DMH	Completed (February)											
Establish head count and funding for the position of Associate Deputy Director LTC Assessment	DHS Budget	Completed (March)											
Post, interview and hire position title Associate Deputy LTC Assessment	DMH						✓	✓					
Develop operational protocol for the Outreach Workers' positions	DMH	Completed (May)											

Recruitment and hiring of contract Outreach Workers

Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Secure funding to establish contract staff positions for 11 Outreach Workers	DHS Budget	Completed (March)											
Release Announcements for Outreach Workers	DMH					✓							
Conduct Interviews for Outreach Workers	DMH						✓						
Outreach Workers Hired - Contracts Signed	DMH							✓					

Training

Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Training Coordinator develops an Outreach and Info Dissemination training protocol	DMH						✓						
Training Coordinator finalizes Outreach and Info Dissemination training curriculum	DMH							✓					
Outreach Workers - Orientation and Training begins	DMH							✓					

Tasks & Timeline													
Outreach & Information Dissemination													
Outreach and Info Material Development													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Obtain funding for a Brochure Writer and Videographer	DMH	Completed (March)											
Brochure Writer retained	DMH	Completed (April)											
Brochure and flyer draft presented	DMH	Completed (May)											
Videographer retained	DMH	Completed (May)											
Brochure and flyer finalized							✓						
Videographer's subject content developed	DMH					✓							
Videographer begin shooting	DMH					✓							
Videographer edits and production completed	DMH						✓						
Outreach Implementation													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	
Outreach Workers begin Information Dissemination	DMH							✓	Ongoing				

Tasks & Timeline
Mental Health Pre-Admission Screening Resident Review

Establish Agreement and System for Completing Resident Reviews

Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Discussions begin between HFS & UIC to establish an Intergovernmental Agreement with UIC, College of Nursing to perform Resident Reviews for the Class Members	HFS, DMH & UIC	✓												
Intergovernmental Agreement Signed with start date and dollar amount confirmed	HFS & UIC							✓						
UIC begins recruitment of qualified professionals and completes hiring	UIC							✓						
Creation of the LTC System Rebalancing Consortium	HFS, DHS & UIC								✓					
Creation of a Resident Review and Assessment Unit for Williams (RRAUW)	UIC								✓					

Training

Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Initiates discussions on orientation/training needs and pre and post testing	HFS, DHS & UIC						✓							
Finalization of the PAS/RR training curriculum and develop training protocol	HFS, DHS & UIC							✓						
Orientation and Training begins for the RRAUW staff	UIC & DMH								✓					
Identification of Clinical Review Team	HFS & DMH							✓						

Tasks & Timeline
Mental Health Pre-Admission Screening Resident Review

Resident Review Evaluations														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Engagement begins with Class Members by eliciting their consent to conduct Resident Review evaluations and completing evaluations	RRAUW									✓	Ongoing			
Findings from the Resident Review evaluations are forwarded to the CRT	RRAUW										✓	Ongoing		
Reassessments conducted annually request, or per Class Member request, quarterly	RRAUW													✓

Tasks & Timeline Transition & Community Services														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Transition Coordination Initiation														
Develop RFI to elicit response from providers interested in providing transition and/or community services to Williams Class Members	DMH						✓							
Develop evaluation methodology for RFI	DMH						✓							
Develop funding models for new and/or enhanced community services	DMH and HFS, DASA, DoA, DRS, DDD as needed							✓						
Release RFI to provider network	DMH							✓						
Evaluate responses	DMH								✓					
Award funding	DMH									✓				
Develop Service Definitions for all Non-Medicaid Enhanced Services (Supported Employment & Education; Peer Support & Mentoring/Social Network Development; Recovery Resource Centers; Peer Directed Volunteer Programs; Family Education & Support; IDDT; Medications & Physical Health Monitoring; Crisis/Diversion Residential Beds; Non-medical Transportation.)	DMH and HFS, DASA, DoA, DRS, DDD as needed							✓						
Develop rates for above defined services	DMH and HFS, DASA, DoA, DRS, DDD as needed								✓					

Tasks & Timeline Transition & Community Services														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Transition Coordination Initiation														
Develop funding mechanisms for above defined services	DMH and HFS, DASA, DoA, DRS, DDD as needed								✓					
Develop reporting requirement for above defined services	DMH and HFS, DASA, DoA, DRS, DDD as needed								✓					
Develop Curriculums for Service Plan Development, Transition Checklist, Risk Mitigation Plan, Emergency Plan, Person-Centered Service Planning, Rule 132 Service Community Support, Rule 132 Services ACT/CST, Rule 132 All Other Services, LOCUS, Non-Medicaid Enhanced Services, Community Service Directory, Resource and Referral Guide	DMH, HFS, DASA, DRS								✓					
Training														
Implement training of above modules	DMH								✓					
Convene Interdepartmental Workgroup to plan, develop and implement process to assure linkage occurs between systems , including service access tools, streamlined referral processes, services sufficiency analyses, services development and resolution of service access problems	DMH and HFS, DASA, DoA, DRS, DDD as needed						✓	Ongoing						

Tasks & Timeline Transition & Community Services														
Training														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Develop Community Service Directory	DMH and HFS, DASA, DoA, DRS, DDD as needed									✓				
Develop Resource & Referral Guide	DMH and HFS, DASA, DoA, DRS, DDD as needed									✓				
Conduct Network Sufficiency Analysis	DMH and HFS, DASA, DoA, DRS, DDD as needed												✓	
Develop Integrated Primary & Behavioral Healthcare Models	DMH and HFS, DASA, DoA, DRS, DDD as needed												✓	
Action	Responsible Party	Jan 2012	Feb 2012	Mar 20 12	Apr 2012	May 2012	Jun 2012	Jul 2012	Aug 2012	Sep 2012	Oct 2012	Nov 2012	Dec 2012	Thru 6/13
Develop funding methodology for Integrated Care Model	DMH and HFS, DASA, DoA, DRS, DDD as needed		✓											
Pilot Integrated Model	DMH and HFS, DASA, DoA, DRS, DDD as needed		✓	✓	✓	✓	✓	✓						
Expand model	DMH and HFS, DASA, DoA, DRS, DDD as needed													✓
Draft 1 st Residential Rule	DMH	Completed (April)												

Tasks & Timeline Transition & Community Services														
Residential Rule														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Draft 1 st Residential Rule	DMH	Completed (April)												
Conduct Residential Survey	DMH				✓	✓	✓	✓	✓					
Analyze results and make policy recommendations	DMH								✓					
Draft 2 nd Residential Rule & review with Stakeholders	DMH										✓			
File with DHS Rules for Ex. Staff review	DMH											✓		
Develop Residential Certification Protocol	DMH													March 2012
File with JCAR	DMH			✓										
Implement Residential Rule	DMH							✓						
Tasks & Timeline Housing														
Identify scattered- site units/apartment														
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012	
Develop job position to coordinate and partnerships with housing developers and property managers	DMH	Completed (February)												
Develop job position for a housing specialist to interface with IHDA and other housing funding resources	DMH	Completed (February)												
Obtain head count for funding and hiring positions	DHS Fiscal	Completed (March)												
Enhance utilization of housing locator service, signature of IGA and reimbursement to IHDA	DHS Fiscal	Completed (May)												

Tasks & Timeline Housing													
Identify scattered- site units/apartment													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Research shared resources	DMH,IHDA	Ongoing											
Convene Housing Focus Committee (quarter)	IHDA & DMH						✓			✓			
Other Housing/Residential Models - Training													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Develops curriculum to train staff and protocol for RRAUW community agencies, and Region Offices on various housing models	CSH, DMH								✓				
Finalizes training curriculum and schedule	CSH, DMH							✓					
Housing Development Expansion (funding to be identified)													
Action	Responsible Party	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May – Dec 2012			
Identify potential developers	IHDA, DMH	Ongoing											
Tasks & Timeline Quality													
Establish necessary positions													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Write position descriptions for the Associate Director of Licensing and QM, the Associate Deputy Director for LTC QM, and one support staff	DMH	Completed (March)											
Write position descriptions for the 10 QA Monitors	DMH						✓						
Establish head count and funding for positions	DHS Fiscal	Completed (February) Completed (March)											
Post, interview, and hire position title Associate Director of Licensing and QM	DMH							✓	✓	✓			
Post, interview, and hire position title Associate Deputy Director for LTC QM	DMH							✓	✓	✓			

Tasks & Timeline Quality													
Establish necessary positions													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Post, interview, and hire position titles for 10 QA Monitors	DMH							✓	✓	✓			
Post, interview, and hire position title for one support staff	DMH						✓	✓	✓				
Compliance Plan													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Describe Compliance Plan in Implementation Plan	DMH	Completed (February)											
Develop Compliance measures	DMH	Completed (February)											
Begin collecting data on Compliance measures	DMH						✓	ongoing					
Report Compliance to Williams Implementation Team	DMH							✓	ongoing				
Monitoring of Outreach and Information Dissemination:													
Develop Outreach QA measures	DMH	✓											
Quality Bureau receives data	DMH		✓										
Quality Bureau analyzes trends and recommends action steps	DMH			✓									
Monitoring of Screening and Assessment (PAS):													
Develop PAS QA measures	DMH		✓										
Quality Bureau receives data	DMH			✓									

Tasks & Timeline													
Quality													
QA / Monitoring													
Action	Responsible Party	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2012	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	Jun 2012	Jul 2012
Monitoring of Screening and Assessment (PAS):													
Quality Bureau analyzes trends and recommends action steps	DMH				✓								
Develop policies and procedures for sampling reviews of PAS evaluations	DMH		✓										
Train QM staff on sampling reviews of PAS evaluations	DMH			✓									
Begin sampling reviews of PAS evaluations	DMH				✓								
Monitoring of Transition Coordination:													
Develop Transition QA measures	DMH		✓										
Quality Bureau receives data	DMH				✓								
Quality Bureau analyzes trends and recommends action steps	DMH					✓							

Tasks & Timeline													
Quality													
QA / Monitoring													
Action	Responsible Party	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	Jun 2012	Jul 2012
Develop policies and procedures for sampling reviews of Service Plans	DMH			✓									
Train QM staff on sampling reviews of Service Plans	DMH				✓								
Quality Bureau begins monitoring Service Plan implementation	DMH					✓	Ongoing						
Outreach staff administer Quality of Life surveys (begin baseline)	DMH			✓	Ongoing								
Compile data and analyze Quality of Life surveys	DMH						✓	Ongoing (quarterly)					
Convene Focus Groups of Class Members on transition process	DMH						✓	Ongoing (twice annually)					
Analyze Focus Group feedback and report on results	DMH							✓	Ongoing (twice annually)				
Monitoring of Housing and Residential Placements:													
Develop Housing and Residential QA measures	DMH		✓										
Begin Residential Rule Monitoring	DMH												July 2013
Analyze preliminary results of Residential Rule Monitoring and recommend action steps	DMH												Oct 2013
Quality Bureau receives data on PSH inspections	DMH						✓	Ongoing					
Quality Bureau analyzes trends and recommends action steps	DMH							✓	Ongoing				

Tasks & Timeline Quality													
QA / Monitoring													
Action	Responsible Party	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	Jun 2012	Jul 2012
Quality Bureau receives data on HQS annual inspections for PSH	DMH												Nov 2012
Quality Bureau analyzes trends and recommends action steps	DMH												Dec 2012
Quality Bureau receives data on independent housing	DMH						✓	Ongoing					
Quality Bureau analyzes trends and recommends action steps	DMH							✓	Ongoing				
Monitoring of Community Services:													
Develop Community Services QA measures				✓									
Quality Bureau analyzes findings from certification and Post Payment Review of providers of services to Williams Class Members	DMH									✓	Ongoing		
Quality Bureau receives data regarding community service adequacy	DMH				✓	Ongoing							
Quality Bureau analyzes trends and recommends action steps	DMH					✓	Ongoing						

Tasks & Timeline Quality													
Problem Resolution and Risk Management													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Complaints, Grievances, and Appeals:													
Develop policies and procedures for Williams complaints, grievances, and appeals	DMH					✓							
Train DMH Regional staff and Toll Free Line staff in policies and procedures for Williams complaints, grievances, and appeals	DMH						✓						
Communication plan developed and deployed to Williams Class Members on how to file complaints, grievances, and appeals	DMH							✓					
DMH Regional staff and Toll Free Line staff begin processing Williams complaints, grievances, and appeals	DMH							✓					
Assoc Deputy for Transition and Deputy Director of System Rebalancing report appeals data to Quality Bureau	DMH									✓	Ongoing		

Tasks & Timeline													
Quality													
Problem Resolution and Risk Management													
Action	Responsible Party	Feb 2011	Mar 2011	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Establish advocacy assistance function for Williams Class Members in the community (establish policies and procedures and train staff)	DMH						✓						
Outreach staff communicate advocacy assistance function to Williams Class Members in the community	DMH							✓	Ongoing				
Sentinel Indicators:													
Define Sentinel Indicators	DMH	Completed (February)											
Revise Sentinel Indicators	DMH	Completed (May)											
Begin collecting and analyzing data	DMH							✓	Ongoing				
Report Sentinel Indicator results to Williams Implementation Team	DMH								✓	Ongoing			
Quality Improvement Committee													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Develop charter, membership, and by-laws of the Quality Improvement Committee	DMH								✓				
Begin Convening Quality Improvement Committee	DMH									✓			

Tasks & Timeline Quality													
IMD Monitoring													
Action	Responsible Party	Feb 2011	Mar 20 11	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	All 2012
Insert language into the DPH Nursing Facility Rules under Subpart S that clarifies to NF/IMD staff that they must cooperate with transition activities	DPH & HFS							✓					
Send NF/IMDs Provider Notices that reaffirm need for cooperation w/ transition activities	HFS							✓					
Amend SB145 and NHCA (SB326) Subparts S & T to give the Dept of Public Health statutory authority to cite a NF/IMD for retaliation	DPH												June 2012
IMD closure protocol finalized (to address rapid downsizing of NF/IMDs)	DMH, HFS, DPH								✓				

Tasks & Timeline Information Technology														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 2011	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan - Jul 2012
Initial meeting with System Partners	DMH, HFS, DPH, MIS-DHS, IHDA	Completed (January)												
Weekly meetings with System Partners	DMH, HFS, DPH, MIS-DHS, IHDA	Ongoing												
Development of Resident Review Module	HFS	November 2010												
Develop Resident Review data interface from HFS to DMH database	HFS, DMH, UIC									✓				
Daily/Weekly Interface	HFS, DMH	Ongoing												
Development of outreach database.	DMH							✓						
HFS provides WCD members eligibility file	HFS, DMH	Monthly												
Collection of outreach data	DMH								✓					
Requirements Gathering Planning/Phase I (Initial Draft)	DMH, HFS, DPH, MIS-DHS, IHDA	Completed (March)												
Requirement Gathering and Finalization Phase I Transition Coordination October, 2011 Release	DMH, HFS, DPH, MIS-DHS, IHDA				✓	✓	✓	✓						
Design and Development/Programming – Phase I October 2011 Release	DMH, HFS, DPH, MIS-DHS, IHDA							✓	✓					

Tasks & Timeline Information Technology														
Action	Responsible Party	Jan 2011	Feb 2011	Mar 2011	Apr 2011	May 2011	Jun 2011	Jul 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan - Jul 2012
Testing Phase I – October Release	DMH								✓	✓				
Deployment – Phase I October Release	DMH/ HFS/MIS/DHS										✓			
Requirement Gathering and Finalization Phase II – December, 2011 Release	DMH, HFS, DPH, MIS-DHS, IHDA				✓	✓	✓	✓	✓	✓				
Design and Development/Programming – Phase II December 2011 Release	DMH/ HFS/MIS/DHS									✓	✓			
Testing – Phase II December Release	DMH/ HFS/MIS/DHS										✓	✓		
Deployment – Phase II December Release	DMH/ HFS/MIS/DHS												✓	
Finalize Job Descriptions for IT/Decision Support Staff	DMH							✓						
Hire Staff to Support IT Implementation and Provide Decision Support	DMH									✓				
Requirement Gathering and Finalization Phase III – April 2012 Release	DMH, HFS, DPH, MIS-DHS, IHDA					✓	✓	✓						

Tasks & Timeline Information Technology														
Action	Responsible Party	July 2011	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	June 2012	July 2012
Design and Development/Programming – Phase III April 2012 Release	DMH/ HFS/MIS/DHS							✓	✓					
Testing – Phase III April 2012 Release	DMH/ HFS/MIS/DHS							✓	✓	✓				
Deployment – Phase III April 2012 Release	DMH/ HFS/MIS/DHS									✓				
Maintenance and System Updates Where Necessary	DMH/ HFS/MIS/DHS										✓	✓	✓	
Analyze data to develop and generate reports and information to support planning, quality improvement, evaluation and compliance activities	DMH	Ongoing from September 2011 thru 2014												

APPENDIX B
Williams Housing Development Schedule

HOUSING SECTION

Permanent Supportive Housing	Year 1				Year 2		
	10/11	1/12	3/12	6/12	9/12	11/12	3/13
	40 units	60 units	60 units	96 units	150 units	84 units	150 units

APPENDIX C
WILLIAMS COMMUNITY SERVICE OVERVIEW of NEEDS & SUPPORTS

Mental Health Services	Healthcare	Housing	Vocational	Co-Occurring Sub. Abuse	Co-Occurring Dev. Disability	Other Public Supports	Natural Supports
Mental Health Assessment and Planning	Medications	Permanent Supported Housing	Vocational Rehabilitation & Career Counseling	Outpatient Substance Abuse Services	Assessment, Screening, Advocacy	Supportive Nutrition	Family and Friends
Psychiatric Mental Health Services (e.g., psychotropic medications)	Home Health Services and Supports		Physical Restoration	Day Treatment Substance Abuse Services	In-home Supports	Consultation/ Education	Church, Spiritual/Faith
Rehabilitative Mental Health Services (e.g., Community Support)	Assistive Equipment		Training, Placement, Follow Along	Medically Monitored Detoxification	Day Services	Family Case Management (Pregnant Women and Infants)	Libraries
Residential Support Services	Skilled Nursing Care		Supported Employment	Residential Substance Abuse Services	Residential & Community Integrated Living Arrangements	Home Visitation Program to prevent child abuse	Community Support Groups
	Lifestyle / Behavioral Modification Resources		School to Work Transition		Intermediate Care Facilities DD (ICFDDs)		Community Colleges
	Primary Care				Support Service Teams		Food Pantries
	Specialty Care						
	= Medicaid Funded Services				= Other Available Services		
	=Other State Government Funded Services						

APPENDIX D
Williams Implementation Compliance Tool

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
V .5.	Ensure availability of community services, supports and other resources of sufficient quality, scope and variety	Availability of community-based services, supports and resources of sufficient quality, scope and variety to meet state obligations under the Consent Decree.	<p>1. Network Sufficiency Analysis comparing community based services, supports and resources needed by class members to available community services, supports and resources</p> <p>2. Number of services meeting established compliance and quality standards/ Total number of services available to Williams Class Members</p> <p>3. # of persons in need of services but not receiving services/ total number in need</p>	<p>1. Network sufficiency analysis informed by preferences and needs of CM and informed by resident review evaluations</p> <p>2. Quality/compliance surveys of services, housing and residential services (following adoption of Residential Rule)</p>	

¹ Due Dates Refer to Dates Specified in the Consent Decree

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI 6 a. 1	Within 2 years of Final Implementation Plan, evaluation of each CMs preferences, strengths, needs to determine community based services required to live in PSH or another appropriate community - based setting.	<p>Process Indicator:</p> <p>Evaluation tools assessing preferences, strengths and needs of CMs</p> <p><u>Outcome Indicators:</u></p> <p>Percentage and number of CMs with completed evaluations</p>	<p><u>Process Measures</u></p> <p>1. Is evaluation strengths based? (Y/N)</p> <p>2. Does evaluation assess needs? (Y/N)</p> <p>3. Does evaluation indicate preferences? (Y/N)</p> <p><u>Outcome Measures:</u></p> <p>Number of completed evaluations on Class Members who give consent using evaluation tools meeting above criteria/total number of IMD residents who give consent evaluated by 4/30/2012</p>	<p>1. Chart Review of a statistical sample of assessments to determine if assessments tools focusing on strengths, needs and preferences were used and information documented</p> <p>2. Report on completed Resident Reviews</p>	Sept, 2013
VI. 6a. 2, VI. 6d.	Any CM has right to decline evaluation with right to receive an evaluation any time thereafter upon request	<p>1. Number and % of individuals declining evaluation</p> <p>2. Number and % of individuals declining initial evaluation who subsequently request an evaluation</p>	<p>1. # of CMs declining evaluations/Total Number of Class Members</p> <p>2. # completed evaluations for individuals initially declining evaluation/ Total number of CMs requesting evaluation after declining initial evaluations</p>	MH PAS/RR Reports generated from MIS	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI. 6. b.	Defendants shall ensure evaluations are conducted by Qualified Professionals	Number and percentage of MH PAS/RR Screeners who are Qualified Professionals	# of MH PAS/RR Screeners who are Qualified Professional/ All MS PAS/RR Screeners	Personnel Records/ Human Resource files	
VI. 6. c.	Class members shall be informed about community based transition options, including PSH and supervised/supported settings	<p>Outcome Indicator:</p> <p>Number and percentage of Class members informed about community based options</p> <p>Process Indicators:</p> <ol style="list-style-type: none"> 1. Outreach materials describe PSH 2. Outreach materials describe community based services 	<p>Outcome Measures:</p> <p>Number of CMs informed about community based settings including PSH/ number of Class Members</p> <p>Process Measures</p> <p>Did materials describe PSH? (Y/N) Did materials describe community based options? (Y/N)</p>	<p>Reports providing information regarding type and number of outreach contacts submitted by outreach workers-Generated by MIS</p> <p>Review of materials developed for outreach purposes</p>	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI. 6. d. (see also Vla.)	As part of each CMs annual evaluation, the reasons for each CMs opposition to moving out of an IMD to a community based setting will be fully explored and addressed.	<p>Process Indicators:</p> <p>Evaluation form developed to document reasons for declining move from IMDs</p> <p>Evaluation form developed to document discussion with CMs regarding opposition to move from IMDs</p> <p>Outcome Indicators:</p> <p>Number and percentage of CMs who opposed moving out of IMDs with annual reevaluations documenting reasons for CM opposition to moving out of IMDs</p> <p>Number and percentage of CMs who opposed moving out of IMDs with annual reevaluations documenting that reason for opposition has been explored and addressed.</p>	<p>Process Measures</p> <ol style="list-style-type: none"> 1. Does form document reasons for declining move? (Y/N) 2. Does form document discussion between evaluator and CM regarding reasons for declining move? (Y/N) <p>Outcome Measure:</p> <p>Number of CMs who opposed moving out of IMDs with annual reevaluations documenting reasons for opposition to moving out of IMDs/Total number of CMs who opposed moving out of IMDs with annual reevaluations</p> <p>Number of CMs who opposed moving out of IMDs with annual reevaluations documenting that reason for opposition has been explored and addressed/ Total number of CMs who opposed moving out of IMDs with annual reevaluations</p>	<p>1. Review of evaluation form developed for evaluation</p> <p>2. MH PAS/RR Reports</p>	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI. 7. a.1	<p>Service Plans specific to each Class Member assessed as appropriate for transition to a community setting must be promptly developed.</p> <p>Service Plans must: Be periodically updated to reflect needs and preferences of the CM including his/her desire to move to a community-based setting after declining to do so</p> <p>Incorporate services for Class Members, while they reside in IMDs, where appropriate to assist in acquisition of basic and instrumental activities of daily living skills and illness self-management</p>	<p>Number and percentage of CMs assessed as appropriate for transition to a community setting with service plans completed within number of days specified by policy (to be developed)</p> <p>Number and % of CMs who decline transition with service plans updated at intervals specified by policy to reflect needs and preferences</p> <p>Number and % of CMs with service plans updated at intervals specified by policy to incorporate services where appropriate to assist in acquisition of basic and instrumental ADLs and illness self-management</p>	<p>Number of CMs assessed as appropriate for transition to a community setting with service plans completed within number of days specified by policy/ Number of CMs assessed as appropriate for transition to a community setting</p> <p>Number of CMs who decline transition with service plans updated at intervals specified by policy that reflect needs and preferences and services that assist in acquisition of ADLs and illness-self management as appropriate/Total number of CMs with service plans</p> <p>Number of CMs with service plans updated at intervals specified by policy that reflect services that assist in acquisition of ADLs and illness-self management as appropriate/Total number of CMs with service plans</p>	<p>Community Service Plan Transition Report</p> <p>Report—Chart Review for statistical sample</p>	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI. 7 b.	<p>Describe the Community-Based Services including services the class member will need to transition to a community –based Setting and provide a timetable for completing that transition</p> <p>For CMs not appropriate for PSH, the service plan shall specify what services CM needs that could not be provided in PSH and shall describe the community based residential services in the most integrated setting appropriate in which consumer needs to live.</p>	<p>Number and percentage of CMs with service plans indicating assessed service needs to transition to a community setting and a timetable for completing the transition</p> <p>Number and percentage of CMs assessed as inappropriate for PSH with service plans:</p> <ol style="list-style-type: none"> 1. Documenting services not provided in PSH 2. incorporating alternate community-based living arrangements 	<p>Number and percentage of CMs with service plans indicating assessed service needs to transition to a community setting and a timetable for completing the transition/ Total number of CMs with service plans</p> <p>Number of CMs assessed as inappropriate for PSH with service plans documenting services not provided in PSH and incorporating alternate community-based living arrangements/ Number of CMs assessed as inappropriate for PSH but who require community-based living arrangements</p>	Report—Chart Review for statistical sample	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI. 7 c., 7d.	<p>Service plans must be developed by a Qualified Professional.</p> <p>The qualified professional also shall consult with other appropriate people of the Class Member's choosing.</p>	<p>Number and percentage of Service Plans developed by Qualified Professionals</p> <p>Number and percentage of CMs with service plans developed in consultation with CMs designees by qualified professionals</p>	<p># of TCU staff who are Qualified Professional/ All TCU staff completing service plans</p> <p>Number of CMs with service plans developed in consultation with CMs designees by qualified professionals/Total number of CMs with service plans indicating selection of a designee</p>	<p>Personnel Records/ Human Resource files Periodic review of service plans</p> <p>Report—Chart Review for statistical sample as well</p>	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date¹
VI. 7. d.	Services Plans shall focus on CMs personal vision, strengths and needs in home, community and work environment and shall reflect the value of supporting the individual with relationships, productive work, participation in community life, and personal decision-making	Number and % of service plans that focus on CMs personal vision, strengths and needs	Number of CMs with service plans that demonstrate focus on CM personal vision, strengths and needs/Total number of CMs with service plans	Report—Chart Review for statistical sample as well	
VI. 7. e., 9b.	Service plans shall include full range of Rule 132 services not limited by availability	Services plans reflect a full range of Rule 132 services	Variety of Rule 132 services reflected in Service plans/ All Rule 132 Services	Chart Review – Statistical Sample	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date¹
VI.7. f.	The service plan shall be completed within sufficient time to provide appropriate and sufficient transitions for Class Members in accordance with the benchmarks set forth in the Decree	All CMs (100%) have service plans completed within number of days of assessment as specified in policy(cutoff to be established)	# of CM service plans completed within number of days of assessment as specified in policy/Total number of CM service plans completed	MIS – Service Plan Report	
VI. 8.a.	By the end of Year 5: all Class Members who have been assessed as appropriate and who do not oppose will be offered the opportunity to move to a Community-Based setting	Number and percentage of CMs who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting	# Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting / All Class Members who do not oppose transition and have been assessed as appropriate for transition	Community Transition Report	Sept 2016

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI.8.b.	Within one (1) year no individual with Mental Illness shall be admitted to an IMD without prescreening having first been conducted through the MH PASRR Process and an initial Service Plan completed.	Number and percentage of individuals with mental illnesses admitted to IMDs with prescreening performed by MH PASRR and initial service plan completed	# of individuals with mental illnesses receiving a prescreening prior to admission and initial service plan admitted to IMDs /Total number of individuals with mental illnesses admitted to IMDs	MH PAS/RR Report	Sept 2012
VI.8.c.	1.Year 1: 256 Class Members who have been assessed as appropriate and who do not oppose transition must be offered placement in a Community-Based setting	1. # and percentage of Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting	1.# of Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting/256	Transition Coordination Report	Sept 2012
	2. Year 1: 256 PSH units must be developed for the benefit of Class Members	2. # of PSH units developed for the benefit of Class Members	2.# of PSH units developed for the benefit of Class Members/256	PSH Housing Unit Report	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI.8.d.	<p>1. Year 2: minimum of 640 Class Members (includes year one 256) who have been assessed as appropriate and who do not oppose transition must be offered placement in a Community-Based setting</p> <p>2. Year 2: 640 PSH units must be developed for the benefit of Class Members</p>	<p>1. # and % of Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting</p> <p>2. # and % Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting</p>	<p>1. # Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting/640</p> <p>2. # Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting/640</p>	Transition Coordination Report	Sept 2013

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI. 8.e.	<p>1.Year 3: minimum of 40% of Class Members who have been assessed as appropriate and who do not oppose must be offered placement in a Community-Based setting</p> <p>2.By the end of Year 3: Community-based settings developed sufficient for placement of 40% of Class Members</p>	<p>1.# and % of Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting</p> <p>2.# and % of Community-based settings developed</p>	<p>1. # Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting /All Class Members who have been assessed as appropriate and who do not oppose transition to community setting</p> <p>2. # of Community-based settings developed/Total number of class members</p>	Transition Coordination Report	Sept 2014

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI.8.f.	<p>1.By the end of Year 4: minimum of 70% of Class Members who have been assessed as appropriate and who do not oppose must be offered placement in a Community-Based setting</p> <p>2.Year 4: Community-based settings sufficient for placement of 70% of Class Members</p>	<p>1. # and % of CMs who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting</p> <p>2. # of Community-based settings developed</p>	<p>1. # Class Members who have been assessed as appropriate and who do not oppose transition who were offered placement in a Community-Based setting /All Class Members who have been assessed as appropriate and who do not oppose placement in a community based setting</p> <p>2. # of Community-based settings developed/Total number of class members</p>	Transition Coordination Report	Sept 2015

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI.8.g and h	By the end of Year 5: all Class Members who have been assessed as appropriate and whose service plans provide for placement in community based settings and who do not oppose will be offered the opportunity to move to a Community-Based setting either PSH or alternative	1. # and % of CMs who have been assessed as appropriate and whose service plans provide for placement in the community and who do not oppose community transition who were offered placement in a Community-Based setting - - PSH or alternative	1. # CMs who have been assessed as appropriate and whose service plans provide for placement in the community, who do not oppose transitioning who were offered placement in a Community-Based setting / Total number of CMs who have been assessed as appropriate for community placement whose treatment plans provide for community placement, who do not oppose transition to a community based setting—PSH or alternative	Transition Coordination Report	Sept 2016

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date¹
VI.8.h.	By the end of Year 5: all Class Members who have been assessed as appropriate for community based living and who do not oppose community based settings should be offered the opportunity to move to these settings. These individuals shall receive services specified on the plan within 120 days of the date in which the Service Plan was developed.	Number and % of CMs assessed as appropriate for community based living who have not opposed transition receiving services specified on the service plan within 120 days of the date the service plan was developed.	Number of CMs assessed as appropriate for community based living who have not opposed transition receiving services specified on the service plan within 120 days of the date the service plan was developed/ Number of CMs assessed as appropriate for community based living with service plans who have not opposed transitioning to community	Transition Coordination Report	Sept 2016
VI.9.a.	All CMs not transitioning from IMDs to PSH will have ongoing reassessments with treatment objectives to prepare them for transition to the most integrated setting, including PSH.	Number and % of CMs not transitioning from IMDs to PSH who receive annual assessments with treatment objectives to prepare them for transition to the most integrated setting, including PSH.	Number CMs not transitioning from IMDs to PSH who receive annual assessments with treatment objectives to prepare them for transition to the most integrated setting, including PSH/Total Number of CMs not transitioning from IMDs to PSH	Transition Coordination Report	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date ¹
VI.9.b., V5.	<p>1.All CMs who move to a community based setting will have access to all clinically and medically necessary appropriate community based services;</p> <p>2. Reasonable measures will be undertaken to ensure CMs housing remains available in the event that they are temporarily placed in a hospital or other treatment facility.</p>	<p>See V.5. above</p> <p>2. Number and % of individuals temporarily placed in a hospital or other treatment facility whose housing remains available for specified period of time (policy to be developed)</p>	<p>See V.5. above</p> <p>2. Number and % of individuals temporarily placed in a hospital or other treatment facility whose housing remains available for a specified period of time/ Number and % of individuals temporarily placed in a hospital or other treatment facility.</p>		
VI.9.c	CMs shall not be subjected to any form of retaliation in response to any option selected nor shall they be pressured to refrain from exploring appropriate alternatives to IMDs.	Number and % of CMs reporting that their rights to transition to alternatives to IMDs are being violated	Number of CMs reporting that their rights to transition to alternatives to IMDs are being violated	Complaints received from CMs	

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date¹
VII.10.a	CMs shall have the opportunity to receive complete and accurate information regarding their rights to live in community based settings/and or receive community-based services and available options and opportunities for doing so.	# of and % CMs receiving introductory meetings in which information was provided regarding their rights to live in Community-Based settings and/or received Community Based Services	# of CMs receiving introductory meetings in which information was provided regarding their rights to live in Community-Based settings and/or received Community Based Services /Total number of class members	Reports tracking outreach provided to CMs	
VII.10.b.	Implementation plan describes methods by which such information will be disseminated.	Implementation plan contains tasks describing how outreach information will be disseminated.	Implementation plan contains tasks describing how outreach information will be disseminated.	Implementation Plan	Feb 2011
VII.10.C.	Process by which CMs may request services will be maintained.	Implementation plan describes the process for maintaining CMs request for services.	Implementation plan describes the process for maintaining CMs request for services.	Implementation Plan	Feb 2011

Decree Article Reference #	Article	Indicator	Measure	Data Collection Method and Source	Due Date¹
V11.10.d.	<p>1.The implementation plan describes methods for engaging CMs in discussion regarding transition to community services</p> <p>2. The implementation plan provides opportunities for residents to visit and observe community based settings</p>	<p>1. Implementation plan contains tasks describing how CMs will be engaged in discussion regarding transition to community services</p> <p>2. Implementation plan contains tasks describing how CMs will be provided opportunities for residents to visit and observe community based settings</p>	<p>1. Implementation plan contains tasks describing how CMs will be engaged in discussion regarding transition to community services</p> <p>2. Implementation plan contains tasks describing how CMs will be provided opportunities for residents to visit and observe community based settings</p>	Implementation Plan	Feb 2011

APPENDIX E
Risk Management Sentinel Indicators

OUTREACH & INFORMATION DISSEMINATION			
RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Access to Class Members in IMDs	100% Access	Number of Times Refused Entry to Facility Number of Times Access to Class Member is Blocked	Track and monitor number of incidents and analyze incidence and pattern. Results reported to: Assoc. Deputy for LTC Assessment Deputy Director for System Rebalancing Quality Improvement Committee Williams Implementation Team
Organizational/Staff Resistance: Ability of each facility to conduct monthly Community Meetings Ability of each facility to provide appropriate space for Outreach Worker to meet with Class Members	1 meeting per month Private space for 1:1 meetings	Number of Community Meetings held per Quarter by facility. Number of problems reported from field by facility.	Incidents reported to HFS for immediate intervention. Track and monitor number of incidents and analyze incidence and pattern. Results reported to: Assoc. Deputy for LTC Assessment Deputy Director for System Rebalancing Quality Improvement Committee Williams Implementation Team
Language/Communication Barrier: Failed Outreach due to language barrier Class Member refuses Outreach	100% Outreach	Number of times outreach failed due to language Number of Class Member Refusals by Facility; document reason if possible	Document language needs; provide interpreters as needed. Track and monitor number of incidents and analyze incidence and pattern. Results reported to: Assoc. Deputy for LTC Assessment Deputy Director for System Rebalancing Quality Improvement Committee Williams Implementation Team

MENTAL HEALTH PRE-ADMISSION SCREENING & RESIDENT REVIEW

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Class Member fails to receive a PAS-RR Screening	100% Screened	Number of Class Members not screened; document reason	<p>Document reason screening did not occur; analyze patterns and trends</p> <p>Track and monitor number of missed screenings and analyze pattern. Results reported to: Associate Deputy LTC Reform Williams Implementation Team Quality Improvement Committee</p>
Class Member refuses PAS-RR Screening	Not Applicable	Number of Class Members refusing PAS-RR screening; document reason for refusal	<p>Monitor and track Class Member's refusal for screening; analyze incidents</p> <p>Results go to: Associate Deputy LTC Assessment Williams Implementation Team Quality Improvement Committee</p>
Completion of PAS-RR Delayed	100% Timely Completion	Number of PAS-RR Screenings completed after 60 days from initial contact by PAS-RR Screener	<p>Monitor and track screenings completed after 60 days of initial contact.</p> <p>Results go to: Associate Deputy LTC Assessment Williams Implementation Team Quality Improvement Committee</p>

MENTAL HEALTH PRE-ADMISSION SCREENING & RESIDENT REVIEW

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Class Member Disagreement with Clinical Review Team Recommendation	Not Applicable	Number of Class Members who file an appeal and request a reevaluation after 90 days of initial evaluation; document reason for appeal	Monitor and Track number of appeals; analyze incidents Results go to: Associate Deputy LTC Assessment Williams Implementation Team Quality Improvement Committee
Inability to Obtain Clinical Information from IMDs	100% Access	Number of incidents where Screeners are unable to obtain clinical information on Class Members from IMDs	Monitor and track where Screeners are denied access to clinical information; analyze patterns and trends Reports go to: Associate Deputy LTC Assessment Williams Implementation Team Quality Improvement Committee

TRANSITION COORDINATION/COMMUNITY SERVICES

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Timeliness of Linkage to Class Member to Community Provider of Choice	100% Timely Linkage	Number of Class Members not linked to a community mental health provider within 21 days of assignment to the Transition Coordination Unit.	Monitor and track compliance with linkage of Class Member to the community mental health provider; analyze trends and patterns for non-compliance Reports go to: Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee

TRANSITION COORDINATION/COMMUNITY SERVICES

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Timeliness of Contract Securing Housing	100% Timely Housing Contracts	Number of housing contracts not completed within 120 days of Class Member application approval.	Track and monitor housing contract compliance by Class Member application approval; analyze trends and patterns Reports go to: Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee
Timeliness of Move From Securing Housing Resource or Lease Signing	100% Timely Move	Number of Class Members not transitioning into community-based setting within 14 days of securing a housing resource and/or signing of lease.	Track and monitor transition of Class Member into community-base setting; analyze trends and patterns Reports go to: Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee
Verification of Introduction/Letters of Contact	100% of Meeting Attendees	Number of Class Members signing a letter of introduction	Track and monitor receipt of notification letter; Class Member signature on letter Reports go to: Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee

TRANSITION COORDINATION/COMMUNITY SERVICES

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Staff Qualifications & Training	100% Hired Meet Qualification Standards	Number of Staff hired based on qualification standards and complete DMH mandated training.	<p>Monitor and track RFP vendor staff qualifications; completion of DMH mandated training;</p> <p>BA direct staff, MSW/MA supervisory staff and license; criminal background clearance; Sexual Offenders Registry; DMH mandated training</p> <p>Reports go to: DMH Executive Staff Overseeing William Implementation DMH Quality Bureau Williams Implementation Team</p>

HOUSING

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Timeliness of Rental Payments	100% Timely Rental Payments	Number of Class Members receiving preliminary eviction notice	<p>Monitor and track preliminary eviction notice received by Class Member; document reason</p> <p>Reports go to: Associate Deputy LTC Reform Williams Implementation Team Quality Improvement Committee</p>

HOUSING			
RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Monitor Production of Housing Stock	100% Compliance with Consent Decree Targets	Number of Permanent Supportive Housing (PSH) Units	<p>Example: Monitor and track number of PSH units; 256 by end of year one</p> <p>Reports go to: Associate Deputy LTC Reform Williams Implementation Team Quality Improvement Committee</p>
Housing Disruptions	Not Applicable	Number of housing disruptions	<p>Track and monitor housing disruptions by Class Member; document reason</p> <p>Reports go to: Associate Deputy Transition Coordinator Associate Deputy Housing Coordinator Williams Implementation Team Quality Improvement Committee</p>
Compliance with Housing Quality Standards (HQS)	100% Compliance with HQS	Number of PSH Units out of compliance with HQS	<p>Monitor and Track PSH Units noncompliant with HQS; analyze trends and patterns</p> <p>Reports go to: Associate Deputy LTC Reform Williams Implementation Team Quality Improvement Committee</p>

HOUSING			
RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Housing Critical Incidents	System Response within 24 hours	Number of Housing Incidents by Class Member	Track and Monitor housing incidents; analyze trends and patterns Reports go to: Associate Deputy Housing Coordinator Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee
Timeliness of receipt of Transition funds from Subsidy Administrator	100% Timely Receipt of Transition Funds	Number of Class Members not receiving timely transition funds from Subsidy Administrator	Track and monitor timeliness of Class Members receiving transition funds from Subsidy Administrator; analyze trends and patterns; document reason for delay Reports go to: Associate Deputy Housing Coordinator Associate Director LTC Reform Williams Implementation Team Quality Improvement Committee
Barriers to securing Housing	Not Applicable	Number of Class Members not securing housing due to barriers	Track and monitor by Class Members barriers to securing housing; document barrier; analyze trends and patterns

TRANSITION COORDINATION/COMMUNITY SERVICES

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Critical Incidents	System Response within 24 hours of notification	Number of critical incidents by Class Member	<p>Standard critical incident report completed by Clinical Home and reported to Transition Coordinator Unity and Deputy Director for System Rebalancing</p> <p>Reports go to: Associate Director of Community Services Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee</p>
Inadequacy of Service Network	Not Applicable	Number of delayed transitions to community-based settings due to inadequate services	<p>Monitor and track through Network Sufficiency analysis; analyze trends and patterns</p> <p>Reports go to: Associate Director of Community Services Associate Deputy Transition Coordinator Williams Implementation Team Quality Improvement Committee</p>

TRANSITION COORDINATION/COMMUNITY SERVICES

RISK	PERFORMANCE STANDARD	MEASURE	ACTION
Inability/failure to execute necessary linkages to services	100% Timely Linkage	Number of unexecuted linkages to services	<p>Monitor and track through the Clinical Home provider and TCU</p> <p>Reports go to: Associate Director of Community Services Associate Deputy Transition Coordinator Quality Improvement Committee Williams Implementation Team</p>

APPENDIX F Acronyms & Abbreviations

AABD	Aid to the Aged, Blind & Disabled
ACT	Assertive Community Treatment
ADA	Americans with Disabilities Act
ADL	Activities of Daily Living
AMI	Area Median Income
BALC	Bureau of Accreditation, Licensure and Certification, Department of Human Services
BHAP	Bridge Housing Assistance Payments
CM	Class Member(s)
CMS	Federal Center for Medicare & Medicaid Services
CRSS	Certified Recovery Support Specialist
CRT	Clinical Review Team
CSR	Community Support Residential
CST	Community Support Team
DASA	Division of Alcoholism of Substance, Department of Human Services
DDD	Division of Developmental Division, Department of Human Services
DMH	Division of Mental Health, Department of Human Services
DHS	Department of Human Services
DRS	Division of Rehabilitation Services, Department of Human Services
DOA	Department of Aging
FMR	Fair Market Rental
FQHC	Federally Qualified Health Centers
FTE	Full-Time Equivalent
HAP	Housing Assistance Payment
HCD	Human Capital Development, Department of Human Services
HFS	Department of Healthcare & Family Services
HIPAA	Health Information Portability & Accountability Act

HQS	Housing Quality Standards
HUD	Department of Housing and Urban Development
ICP	Individual Care Plan
IHDA	Illinois Housing Development Authority
IMD	Institute for Mental Disease
IT	Information Technology
LIHTC	Low Income Housing Tax Credit
LOCUS	Level of Care Utilization System
LTC	Long-Term Care
MFP	Money Follows the Person
MHP	Mental Health Professionals
MH PASRR	Mental Health Pre-Admission Screening and Resident Review
OIG	Office of the Inspector General
PHA	Public Housing Authorities
PSH	Permanent Supportive Housing
PSR	Psychosocial Rehabilitation
QAP	Qualified Allocation Plan
QIC	Quality Improvement Committee
QLS	Quality of Life Survey
RFP	Request for Proposal
RRAUW	Resident Review and Assessment Unit for <i>Williams</i>
RSS	Recovery Support Services
SA	Subsidy Administrator
SMI	Serious Mental Illness
SSI	Social Security Income
SSDI	Social Security Disability Income
UIC	University of Illinois at Chicago

WIT	Williams Implementation Team
WRAP	Wellness Recovery Action Plan