

# Benchmarking Insights

## Happy Holidays!

We want to express our heartiest wishes for a joyous holiday season and “good outcomes” in all that you do in 2009!

## Benchmarking for Financial Survival

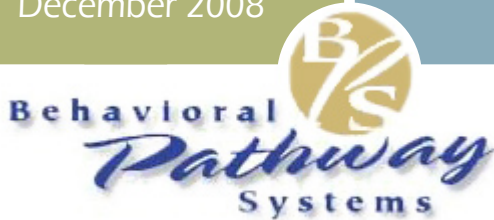
Behavioral health and human services providers face unprecedented financial challenges as our nation grapples with its worst economic crisis in decades. The impacts of these challenges on the organizational performance of providers may be very broad. The most immediate “victim” may be measures of financial stability, as revenue drops over the next year or more. As the agency anticipates and adjusts to these changes, other cascading impacts may be observed. Organizational climate indicators such as staff retention and morale may very well decline in the midst of uncertainty and heightened expectations. Operational indices such as access may also be challenged by a combination of increased demand and diminished resources due to staffing reductions. Clinical measures such as client satisfaction and therapeutic outcome may also suffer.

Benchmarking offers an illuminating way to help ensure that your organization is keeping pace with others in adjusting to these challenges. It may be difficult to avoid negative trends in this challenging environment. However, if your agency’s rate of decline significantly exceeds that of others, that would be important to know. Adopting the strategies of those faring reasonably well may prove to be crucial to survival. Benchmarking brings providers together around a common bond and, at tough times like these, it may be an important survival technique.

## Best Practices for Positive Outcomes in Youth Residential Settings

Important insights into successful residential treatment outcome for youth emerged from a recent process benchmarking workshop conducted by Behavioral Pathway Systems. Process benchmarking is a method pioneered by BPS that uses benchmarking data as a vehicle to the identification of potential best practices.

It was found that seventeen organizational tactics and characteristics differentiated programs with high rates of favorable discharge status from others. A partial list of these promising practices includes:



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- Active involvement of families in the treatment planning process, ongoing care, and discharge planning
- Presence of active, scheduled programming of at least 3 hours per day
- Absence of turnover in program leadership
- Establishing a “culture of excellence”
- Focusing on the specific needs posed by the discharge community
- Providing adequate staffing ratios
- Providing cultural competency training to staff in relation to the discharge community
- Arranging for residents to see a prescribing professional at least once per week and receiving appropriate psychotropic medications, if applicable
- Maintaining a strong working relationship with agencies in the community

These “evidence-based” practices all contributed to successful discharge outcome but the involvement of the family at all phases of care appeared to be particularly vital. Programs reporting that at least 80% of available families are actively involved were up to 250% more likely to report high rates of favorable discharge. These findings should be regarded as hypotheses to be considered, rather than empirical fact, due to sample size considerations.

## Contact Us!

We want to create an active and vibrant community of individuals and organizations interested in benchmarking, performance management, and outcomes. If you have thoughts, ideas, suggestions, tips, or questions, we’d like to hear from you. Please feel free to contact us at [info@bpsys.org](mailto:info@bpsys.org).