Performance Measurement and Management Plan
Residential & CSS Services
FY 2025

Effectiveness:

Minimize psychiatric hospitalizations: 6.1% of the 134 consumers served were admitted to short-term hospitalization for the year, against a goal of 5%, an increase of 1.6% from the previous year. During the year, eight consumers were transferred to long-term hospitalization and returned, while one of the eight consumers was discharged from CODI. Staff continue to educate consumers on the importance of taking medication as prescribed, attending day programs, and advocating for consumers during appointments. The number is higher than expected due to the state hospitals continuing to refer consumers who are not ready for community discharge and who can, in fact, benefit from a long-term hospital stay.

Maximize consumer financial independence: Eight consumers were placed in employment for the year, against a goal of eight, an increase of two from the previous year. Staff will continue assisting consumers with their employment goals and link them to DVRS for additional assistance if needed. This goal was increased to 13 consumers per year.

Increase consumer functioning for improved community integration: 88% of consumers made progress towards a community integration goal for the year, against a goal of 75%. This goal was not measured the previous year. For the next fiscal year, the goal was increased to 90%.

Increase number of consumer socialization opportunities: Nineteen socialization opportunities for consumers were held for the year, against a goal of 16. This goal was not measured the previous year.

Efficiency:

Maximize billable bed days: The average occupancy in residential beds for the year was 93%, against a goal of 85%.

Maximize staff time spent in face-to-face contact with CSS consumers: For the year, staff averaged sixty percent in face-to-face contact with consumers, against a goal of 65%, a 5% increase from the previous quarter. This goal will increase to 90% due to financial analysis completed for program sustainability. The Behavioral Health Clinical Director (previously Recovery Plan Coordinator) and VP of Residential Services will continue to meet with caseworkers to discuss ways to increase face-to-face time and inform them of the percentage increase.

Service Access:

Minimize time taken to enroll in services: The average number of days from referral to admission was 13, against a goal of 21.

Community Employment Services
FY 2025

Efficiency:

Maximize consumer financial independence with job coaching: Eighteen DVRS referrals were placed in employment with job coaching against a goal of eight, a decrease of one consumer from the previous year. However, last year the goal was not separated from job coaching, and without job coaching, which would then have been an increase of three. For the next fiscal year, the goal was increased to 12.

Maximize consumer financial independence without job coaching: Four DVRS referrals were placed in employment without job coaching, against a goal of four. This goal was not measured the previous year.

Effectiveness:

Increase the number of consumers transitioning from job coaching to Long-Term Follow-Along (LTFA) support: Eight consumers transitioned from job coaching to LTFA support to increase the viability of long-term employment, against a goal of four. This goal was not measured the previous year.

Maximize the percentage of LTFA consumers who can maintain their employment for over three years: Sixty-six percent of consumers in LTFA retained their employment for more than three years, against a goal of 60%. This goal was not measured the previous year.

Raise the proportion of consumers who experience an increase in their hourly wage: Fifteen percent of consumers received a wage increase, against a goal of 10%. This goal was not measured the previous year.

Service Access:

Increase DVRS referrals for supported employment: Forty referrals from DVRS were received against a goal of twelve. This goal was not measured the previous year. For the next fiscal year, the goal will be increased to 24.

Minimize wait time for engaging with referral: The average number of days from referral to service initiation was three days, against a goal of five days, a decrease from the previous year by one day.

Extended Employment Services
FY 2025

Effectiveness:

Maximize number of hours consumers earn minimum wage: Fifty-four consumers spent 11,662 hours earning minimum wage against a goal of 10,000 hours, totaling $145,051.80. This goal was not measured the previous year.

Enhance opportunities for OES consumers to participate in food service/maintenance program: An average of 45 consumers worked on enclaves in food service and maintenance for the year, against a goal of 24. This goal was not measured the previous year.

Increase number of consumer socialization opportunities: Eleven women's groups were held against a goal of 12. One group was canceled because the facilitator left and needed to be replaced.

Efficiency:
Maximize percentage of time consumers earn wages through production work: Sixty-eight percent of the time, consumers earned wages through production work, against a goal of 85%, a one-percent decrease from the previous year. Curexa Pharmacy provided less work this year, resulting in a reduction of production activities. It appears that Curexa is increasing automation within its operations. In response, staff continue actively marketing to the community to generate more consumer work opportunities.

Maximize percentage of consumers who earn state minimum wage: Fifty-eight percent of consumers earned the state minimum wage, against a goal of 50%. This goal was not measured the previous year.

Service Access:
Minimize wait time for engaging with referral: The average wait time for engaging with referral is three days, against a goal of five days.

Increase admissions to OES: Nineteen new consumers were enrolled in vocational services during the year against a goal of sixteen, an increase from the previous year (5).

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Quality Improvement
FY 2025

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Efficiency:
Ensure consumer grievances are tracked, investigated, and replied to in accordance with policy: Three consumer grievances were received, an increase of one from the previous year. Grievances were investigated and replied to in accordance with policy.

Ensure all CIRs are tracked and follow-up completed by policy: One hundred percent of CIRs requiring follow-up received follow-up 100% of the time, the same as the previous year.

Ensure maintenance staff are cleaning sites: Effective January 1, 2025, we began performing and tracking site visits to ensure maintenance staff are cleaning sites. Over the last two quarters, 59 supervisory site visits were completed, against a goal of 59, which included 80 contracted buildings. This goal was not measured the previous year.

Maintain a minimum 90% rating on ACCSES NJ quality success reports: Effective January 1, 2025, we began tracking the rating on ACCSES NJ quality success reports. For the last two quarters, we received a 90.2% rating on the reports. This goal was not measured the previous year.

Service Access:
Gather consumer and staff feedback to develop policies or practices to enhance inclusion and maximize consumer/staff input: Our goal is for the President/CEO, Chief Compliance Officer

(CCO), or VP of Residential Services to attend monthly house and staff meetings and meet quarterly to discuss feedback and actions taken our additional follow-up. The President/CEO, CCO, or VP of Residential Services attended all the meetings in the past fiscal year, and shared information gathered during Leadership Team meetings. Three meetings were cancelled due to licensing inspection.

Leadership will use information gathered at consumer and staff meetings to develop policies or practices to enhance inclusion and maximize consumer/staff input: Our goal is to review Advocacy and Residential House Meeting Minutes at Leadership to assess for possible changes to policies or practices to enhance inclusion and present to the Board semi-annually. The Board received Advocacy Activities two times throughout the year. Based on reviews, changes have been made to facilities, increased support for consumers, education on supported employment, DVRS, benefits, and benefit counselors associated with DVRS, and a grab bar installed in the shower for safety are just some examples.

Compliance
FY 2025

Efficiency:

Maintain DVRS level of capacity to ensure contract compliance: The level of capacity for the year was 95%, against a goal of 90%. This goal was not measured the previous year.

Maintain percentage of laborers diagnosed with a disability in the state set-aside contracts: The percentage of individuals diagnosed with a disability in the state set-aside contracts was 53% against a goal of 75%. It was brought to our attention by ACCSES NJ that we should be tracking laborers. Our goal was revised to track the percentage of laborers with a disability diagnosis.

Increase community outreach and enhance communication with mental health providers to increase percentage of CSS consumers enrolled: The level of capacity for the year was 74%, against a goal of 90%. The Recovery Plan Coordinator is collaborating with referral sources to expand our pool of available applicants. The VP of Residential Services continues to review applicants to see if they meet the criteria for our CSS program. This goal was not measured the previous year.

Risk Management/Safety
FY 2025

Efficiency:

Minimize risk and property management issues: Priority work orders shall be completed within two business days. Priority work orders were completed within two days 65% of the time, a 7% decrease from the previous year. To address this decline, the President/CEO and COO met with the Property Management Manager to review productivity levels and reinforce the importance of completing work orders within the established parameters to ensure that future completion rates align more closely with expectations and reduce risk exposure.

Proactively address work order submitted through quarterly inspection reports: Eighty-eight percent of work orders generated from Quarterly Inspection Reports were completed within prescribed time constraints, a 12% increase from the previous year.

Increase safety awareness throughout OES and Residential: Eighty meetings were held to increase safety awareness against a goal of eighty. This goal was not measured the previous year.

For FY26, included in this section, we will also begin tracking property management staff productivity. CODI is assessing staff productivity to determine if the current property management workforce is appropriately sized for the organization's operational needs.

Staff Training and Development
FY 2025

Efficiency:
Maximize staff competency and knowledge: For the fiscal year, 97% of staff completed Relias Electronic Training against a goal of 100%, which was the same as the previous year.

Identify and train DDD and DMHAS residential counselors to work at dual locations: Four staff were identified and trained to work at dual locations against a goal of four. This goal was not measured the previous year.

Business Functions
FY 2025

Effectiveness:
Maintain financial solvency: The goal for current assets/liabilities is 2:1. The current assets/liabilities were 2:1, a decrease from the previous year (2.25:1).

Minimize staff turnover to sector standards or below: For the fiscal year, the staff turnover rate was 11% against the industry standard of 19%, an increase from the previous year (6%).

Efficiency:
Increase number of billable insurance carriers: The CFO increased the number of billable insurance carriers by two against a goal of four. The CFO is now approved to bill for Aetna and UnitedHealthcare. The CFO started the application process with WellPoint during the second quarter. However, WellPoint has not responded even after continuous follow-up. The CFO is also working on enrollment in Fidelis. Once these last two insurance carriers are approved, we will be able to bill all insurance carriers.

Leadership:
Meet monthly to review staff productivity, utilization report, file reviews, CIR report, and consumer feedback: Nine meetings were held against a goal of twelve; however, all twelve months of staff productivity, utilization reports, CIR reports, and consumer feedback were reviewed during the nine meetings.

Meet quarterly to discuss consumer and staff feedback to maximize input: During the fiscal year, the President/CEO, Chief Compliance Officer, and VP of Residential Services met six times against

a goal of four to discuss consumer and staff feedback. Initially, the goal was to meet monthly; however, the goal was adjusted to quarterly.

Finance:
Increase capital improvement fund: $360,000 of capital improvement funds were deposited against a goal of $480,000. During the last quarter of the fiscal year, CODI could still not bill consumers who switched their insurance during the previous quarters, hindering cash flow. The total amount for the year was $328,214. We are hoping to recoup some of this when billings to UnitedHealthcare commence. CODI became an approved provider on June 13. Due to financial constraints, this outcome will be removed for this fiscal year. Additionally, in preparation for the coming year, employee PTO/vacation buyouts and the 4% 401(k) contribution for employees with five plus years of service have been suspended until further notice.

Decrease supply costs by utilizing centralized purchasing: Supply costs decreased by 12% for the fiscal year by utilizing centralized purchasing against a goal of 10%.

Ensure adequate funding for ATS program sustainability: The daily attendance days for the year were 1668 against a goal of 1980, resulting in a revenue loss of $9841.

Ensure adequate funding for EE program sustainability: The daily attendance days for the year were 14,838 against a goal of 15,396. We are fully funded through the contract, so there are no negative ramifications unless we go under 90% LOC for three months or more. We were 558 days short of 100%. If we did not have a contract, this would equate to $46,235.88.

Ensure adequate funding for SE program sustainability: The amount of SE revenue deposited for the year was $54,632.25 against a goal of $97,122. In September, DVRS increased the hourly rate.

For FY26, included in this section, we will begin tracking the hours contributed by volunteers and interns and translating those hours into financial and operational value in our performance measurement and management plan. The value added by volunteers and interns is essential for nonprofit organizations to demonstrate their impact, justify funding, improve operations, and recognize the contributions of their unpaid workforce.

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Board Governance
FY 2025

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Effectiveness:
Based on board recommendations, develop and implement board training: Four board trainings were conducted, against a goal of four.

Complete annual policy review: 100% of policy reviews were completed.

Complete annual board assessment: 100% of board members completed the annual board assessment.

Complete annual self-assessment: 100% of board members completed the annual self-assessment.

Finance:
Financial statements are presented to CEO and Board quarterly: Four financial statements were presented to the CEO and Board.

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Satisfaction
FY 2025

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Residential/CSS Satisfaction:
Enhance initial Residential/CSS consumer satisfaction: One hundred percent of respondents reported that CODI staff was welcoming and inclusive, and one hundred percent reported satisfaction with access to services.

Enhance consumer satisfaction: One hundred percent of respondents reported that CODI services met their needs against a goal of 100%, a 3% increase from the previous year.

Enhance stakeholder satisfaction: One hundred percent of respondents reported that consumers' needs were met through CODI services, the same as the previous year.

Extended Employment/ATS Satisfaction:
Enhance initial EE/ATS consumer satisfaction: One hundred percent of respondents reported that CODI staff was welcoming and inclusive, and one hundred percent reported satisfaction with access to services.

Enhance consumer satisfaction: Ninety-eight percent of respondents reported that the program met their needs against a goal of 100%, which was a 10% increase from the previous year. Forty-eight consumers agreed that the program meets their needs; however, two EE consumers disagreed.

Enhance stakeholder satisfaction: One hundred percent of respondents reported that consumers' needs were met through CODI services, the same as the previous year.

Supported Employment Satisfaction:
Enhance initial EE consumer satisfaction: One hundred percent of respondents reported that CODI staff was welcoming and inclusive, and one hundred percent reported satisfaction with access to services.

Enhance consumer satisfaction: One hundred percent of respondents reported that the program meets their needs against a goal of 100%.

Enhance stakeholder satisfaction: One hundred percent of respondents reported that CODI services met consumers' needs.

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
RESIDENTIAL & CSS SERVICES
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Effectiveness:									
Minimize psychiatric hospitalizations	Percentage admitted to short-term hospital	CIR Report	Annually	Residential & CSS consumer	VP of Residential Services	5%	6.1%	Unmet	4.5%
Maximize consumer financial independence	Number of consumers placed in employment	Case Records	Annually	Residential & CSS consumers	VP of Residential Services	8	8	Met	6
Increase consumer functioning for improved community integration	Percentage of consumers who made progress towards a goal	Foothold	Annually	Residential & CSS consumer	VP of Residential Services	75%	88%	Met	N/A
Increase number of consumer socialization opportunities	Number of game nights and winner's group held	Sign in Sheet	Quarterly	Residential consumers	VP of Residential Services	16	19	Met	N/A
Efficiency:									
Ensure adequate funding by maximizing residential beds	Percentage of occupancy needed to ensure adequate funding	Attendance reports	Annually	Residential consumers	CFO	85%	93%	Met	N/A
Maximize staff time spent in face-to-face contact with CSS consumers	Percentage of time spent in face-to-face contact	Foothold	Annually	C/W's	CCO	65%	60%	Unmet	55%
Service Access:									
Minimize time taken to enroll in services	Number of days to initiation of services	Foothold	Annually	Residential & CSS admissions	VP of Residential Services	21 days	13 days	Met	33 days

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
COMMUNITY EMPLOYMENT SERVICES
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME TO MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Efficiency:									
Maximize consumer financial independence with job coaching	# of DVRS referrals who achieve successful job placement with job coaching	SE Roster	Annually	SE consumers	CCO	8	18	Met	19
Maximize consumer financial independence without job coaching	# of DVRS referrals who achieve successful job placement without job coaching	SE Roster	Annually	SE consumers	CCO	4	4	Met	N/A
Effectiveness:									
Increase the number of consumers transitioning from job coaching to Long-Term Follow-Along (LTFA) support	# of consumers who move from intensive job coaching to LTFA	SE Roster	Annually	SE consumers	CCO	4	8	Met	N/A
Maximize the percentage of LTFA consumers who can maintain their employment for over three years	Percentage of LTFA consumers who retain employment for more than three years	SE Roster	Annually	SE consumers	CCO	60%	66%	Met	N/A
Raise the proportion of consumers who experience an increase in their hourly wage	Percentage of consumers who increase their hourly rate	SE Roster	Annually	SE consumers	CCO	10%	15%	Met	N/A
Service Access:									
Increase DVRS referrals for supported employment	# of DVRS referrals received	SE Roster	Annually	SE consumers	CCO	12	40	Met	N/A
Minimize wait time for engaging with referral	Average # of days	Status Memo	Annually	SE consumers	CCO	5 days	3 days	Met	4 days

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
OES SERVICES
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED FROM	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Effectiveness:									
Maximize number of hours consumers earn minimum wage	# of hours consumer work earning a minimum wage	#Consumers = 54 Wages Total = $145,051.80	Annually	EE consumers	VP of OES	10,000 hrs	**11,662 hrs**	**Met**	**N/A**
Enhance opportunities for OES consumers to participate in food service/maintenance program	Average number of consumers working on enclaves	Payroll report	Annually	EE consumers	VP of OES	24	**45**	**Met**	**N/A**
Increase number of consumer socialization opportunities	Number of Women's Groups Held	Meeting Minutes	Annually	ATS & EE consumers	VP of OES	12	**11**	**Unmet**	**N/A**
Efficiency:									
Maximize percentage of time consumers earn wages through production work	Percentage of consumers earning wages	Payroll report	Annually	EE consumer	VP of OES	85%	**68%**	**Unmet**	**69%**
Maximize percentage of consumers who earn minimum wage	Percentage of EE consumers earning state minimum wage	#Consumers = 54 Wages Total = $145,051.80	Annually	EE consumers	VP of OES	50%	**58%**	**Met**	**N/A**
Service Access:									
Minimize wait time for engaging with referral	Number of days from referral to start	Consumer Status memos	Annually	EE consumers	VP of OES	5 days	**3 days**	**Met**	**2 days**
Increase admissions to OES	Number of new OES consumer admissions	Consumer Status Memos	Annually	All consumers	VP of OES	16	**19**	**Met**	**5**

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
QUALITY IMPROVEMENT
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Efficiency:									
Ensure consumer grievances are tracked, investigated, and replied to in accordance with policy	Percentage of grievances received and tracked	Grievance Report	Annually	All consumers	CCO	100%	100% (3 grievances)	Met	100% (2 grievances)
Ensure all CIRs are tracked, and follow-up completed in accordance with policy	Percentage of CIRs requiring follow-up	Accreditation Now	Annually	Quality Improvement Department	CCO	100%	100%	Met	100%
Ensure maintenance staff are cleaning sites	Number of supervisory site visits	Site Visit Form	Quarterly	Maintenance Department	Maintenance Director	59	59	Met	N/A
Maintain a minimum 90% rating on ACCSES NJ quality success reports	Percentage of rating on ACCSES NJ quality success reports	ACCSES NJ Quality Success Reports	Quarterly	Maintenance Department	Maintenance Director	90%	90.2%	Met	N/A
Service Access:									
Gather consumer and staff feedback to develop policies or practices to enhance inclusion and maximize consumer/stakeholder input	Attend monthly house and staff meetings	House and Staff Meetings	Quarterly	A+ and B consumers	CIO	138	135	Unmet	93
Leadership will use information gathered at consumer and staff meetings to develop policies or practices to enhance inclusion and maximize consumer/staff input	Distribute to Board Semi-annually	Advocacy, Residential House Meeting, and Leadership Meeting Minutes and Suggestion Boxes	Semi-Annually	All consumers	CCO	2	2	Met	2

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
COMPLIANCE
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Efficiency:									
Maintain DVRS level of capacity to ensure contract compliance	Percentage of attendance days	Attendance/ MEER Report	Quarterly	EE consumers	VP of OES	90%	**95%**	**Met**	**N/A**
Maintain percentage of individuals diagnosed with a disability in the state set aside contracts	Percentage of individuals diagnosed with a disability	Personnel Files	Quarterly	Maintenance staff	DHR	75%	**53%**	**Unmet**	**N/A**
Increase community outreach and enhance communication with mental health providers to increase percentage of CSS consumers enrolled	Percentage of consumers enrolled in CSS	Foothold	Quarterly	CSS consumers	CCO	90%	**74%**	**Unmet**	**N/A**

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
RISK MANAGEMENT/SAFETY
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Efficiency:									
Minimize risk and property management issues	Enhance percentage of work orders completed within prescribed time constraints	Facilities department	Annually	Facilities Dept.	COO	Priority - 2 days- 100%	**65%**	**Unmet**	**72%**
Proactively address work orders submitted through quarterly inspection reports	Percentage of completed work orders generated from Quarterly Inspection Reports	Quarterly Inspection Reports	Annually	All programs	COO	100%	**88%**	**Unmet**	**76%**
Increase safety awareness throughout OES and Residential	# of meetings communicating safety tips	Meeting minutes	Annually	OES & Residential	COO	80	**80**	**Met**	**N/A**

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
STAFF TRAINING AND DEVELOPMENT
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Efficiency:									
Maximize staff competency and knowledge	Percentage of staff completing training	Relias Tracking Report	Annually	Human Resources	DHR	100%	97%	Unmet	97%
Identify and train DDD and DMHAS residential counselors to work at dual locations	Number of staff cross-trained	106 Training Documentation	Annually	Residential Staff	VP of Residential Services	4	4	Met	N/A

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
Business Functions
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Effectiveness:									
Maintain financial solvency	Current Assets/Current Liability	QuickBooks	Annually	Finance	CFO	2:1	**2:1**	**Met**	**2.25**
Minimize staff turnover to sector standards or below	Staff turnover	Payroll Records	Annually	Human Resources	CFO	Less than 19% (industry standard)	**11%**	**Met**	**6%**
Efficiency:									
Increase number of billable insurance carriers	# of new insurance carriers	CFO	Annually	Finance	CFO	4	**2**	**Unmet**	**N/A**
Leadership:									
Meet monthly to review staff productivity, utilization report, file reviews, CIR report, and consumer feedback	Number of Leadership meetings	Leadership Agenda/Meeting Minutes	Annually	Leadership Team	CCO	12	**9**	**Unmet**	**N/A**
Meet quarterly to discuss consumer and staff feedback to maximize input	Number of meetings with President/CEO, CCO, & VP of Res.	Meeting Minutes	Annually	Residential	CCO	4	**6**	**Met**	**N/A**
Finance:									
Continue to reserve $40,000/month for capital improvements	Amount of capital improvement funds deposited	QuickBooks	Annually	Finance	CFO	$480,000	**$360,000**	**Unmet**	**$480,000**
Decrease supply costs by utilizing centralized purchasing	Percentage of reduction in supply costs	Invoices	Annually	Residential & Maintenance	CFO	10%	**12%**	**Met**	**N/A**
Ensure adequate funding for ATS program sustainability	Daily attendance days needed for ATS program sustainability	Attendance	Annually	ATS	CFO	1980	**1668**	**Unmet**	**N/A**
Ensure adequate funding for EE program sustainability	Daily attendance days needed for EE program sustainability	Attendance	Annually	EE	CFO	15,396	**14,838**	**Unmet**	**N/A**
Ensure adequate funding for SE program sustainability	Amount of SE revenue deposited	QuickBooks	Annually	SE	CFO	$97,122	**$54,632.25**	**Unmet**	**N/A**

Board Governance
FY 2025

OBJECTIVE	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Effectiveness:									
Based on board recommendations, develop and implement board training	Number of board trainings	Board minutes	Quarterly	Board Members	CEO	4	**4**	**Met**	**N/A**
Complete annual policy review	Percentage of policy reviews completed	Sign off sheet	Annual	Board Members	CEO	100%	**100%**	**Met**	**N/A**
Complete annual board assessment	Percentage of board assessments completed	Board assessments	Annual	Board Members	CEO	100%	**100%**	**Met**	**N/A**
Complete annual self-assessment	Percentage of self-assessments completed	Self-Assessments	Annual	Board Members	CEO	100%	**100%**	**Met**	**N/A**
Finance:									
Financial statements including capital improvement expenditures are presented to CEO and Board quarterly	Financial statement	QuickBooks	Quarterly	Finance	CFO	4	**4**	**Met**	**4**

PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN
SATISFACTION
FY 2025

OUTCOME	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Residential/CSS Satisfaction:									
Enhance Residential/CSS consumer satisfaction	Percentage of consumers who report CODI staff was a welcoming and inclusive	Intake Survey	Annually	Residential & CSS consumers	VP of Residential Services	100%	**100%**	**Met**	**100%**
Enhance Residential/CSS consumer satisfaction	Percentage of consumers who report satisfaction with access to services	Intake Survey	Annually	Residential & CSS consumers	VP of Residential Services	100%	**100%**	**Met**	**100%**
Enhance consumer satisfaction	Percentage of consumers who report the program meets their needs	Satisfaction Survey	Annually	Residential & CSS consumers	VP of Residential Services	100%	**100%**	**Met**	**97%**
Enhance stakeholder satisfaction	Percentage of stakeholders who report consumer's needs are met	Satisfaction Survey	Annually	Residential & CSS consumers	VP of Residential Services	100%	**100%**	**Met**	**100%**
Extended Employment/ATS Satisfaction:									
Enhance EE/ATS consumer satisfaction	Percentage of consumers who report CODI staff was a welcoming and inclusive	Intake Survey	Annually	EE & ATS consumers	VP of OES	100%	**100%**	**Met**	**100%**

OUTCOME	INDICATOR	DATA SOURCE	TIME OF MEASURE	APPLIED TO	OBTAINED BY	GOAL	ACTUAL	RESULT	PREVIOUS YEAR
Extended Employment/ATS Satisfaction:									
Enhance EE/ATS consumer satisfaction	Percentage of consumers who report satisfaction with access to services	Intake Survey	Annually	EE & ATS consumers	VP of OES	100%	**100%**	**Met**	**100%**
Enhance consumer satisfaction	Percentage of consumers who report the program meets their needs	Satisfaction survey	Annually	EE & ATS consumers	VP of OES	100%	**98%**	**Unmet**	**88%**
Enhance stakeholder satisfaction	Percentage of stakeholders who report consumer's needs are met.	Satisfaction Survey	Annually	EE & ATS consumer	VP of OES	100%	**100%**	**Met**	**100%**
Supported Employment Satisfaction:									
Enhance SE consumer satisfaction	Percentage of consumers who report CODI staff was a welcoming and inclusive	Intake Survey	Annually	SE consumers	CCO	100%	**100%**	**Met**	**100%**
Enhance SE consumer satisfaction	Percentage of consumers who report satisfaction with access to services	Intake Survey	Annually	SE consumers	CCO	100%	**100%**	**Met**	**100%**
Enhance consumer satisfaction	Percentage of consumers who report the program meets their needs	Satisfaction Survey	Annually	SE consumers	CCO	100%	**100%**	**Met**	**100%**
Enhance stakeholder satisfaction	Percentage of stakeholders who report consumer's needs are met.	Satisfaction Survey	Annually	SE consumers	CCO	100%	**100%**	**Met**	**100%**