

Peer Support Services Quality Improvement Annual Report June 2024

Target Objectives & Results	Source	Review Timeframe & Date Collected	Objective Met	Analysis and Actions to Address Findings
Using a full month's sample of daily entries, more than 50% of participants will indicate that progress was made toward their goal on the majority of entries.	Daily Entries	FY 2023 - 2024 (one month sample)		
100% of participants indicated progress on the majority of entries.		Jun-24	Yes	The results are positive. Continue to monitor feedback daily to ensure participants sense that progress is being achieved.
80% of PSS respondents either agree or strongly agree that the services that are receiving at Aurora are helping them reach their personal and recovery goals.	BCRC Annual Satisfaction Survey	2024		
100% (3/3) Agree, 0 Neutral, 0 Disagree		March 1 - March 30, 2024	Yes	BCRC's survey was changed this year to only have 3 response options (instead of 5) : Agree, Neutral, and Disagree. No new actions needed.
85% of PSS respondents report an overall improvement in their quality of life since engaging with Aurora.	BCRC Annual Satisfaction Survey	2024		
100% (3/3) Agree, 0 Neutral, 0 Disagree		March 1 - March 30, 2024	Yes	No new actions needed.
85% of PSS respondents indicate Overall Satisfaction with the services they are receiving.	BCRC Annual Satisfaction Survey	2024		
100% (3/3) Agree, 0 Neutral, 0 Disagree.		March 1 - March 30, 2024	Yes	No new actions needed.
100% of PSS participant records are reviewed semi-annually for the presence of ISPs and dates of compliance, updated releases, updated emergency contact information, and updated diagnostic information.	Participant Records/Review Checklist Spreadsheet	FY 2023-2024		
100% of PSS records were reviewed for updated compliance.			Yes	The review demonstrated compliance with regulations. Continue to follow and update procedures as requested.
Aurora PSS participates in 100% of all requested audit activity. Should an area of improvement be identified, 100% of CAPs will be integrated into the QM Plan.	Audit Letters, QM Plan	FY 2023-2024		
100% of requested audit activity was participated in. There were no resulting CAPs.		6/1/2024	Yes	No new actions needed.