<table>
<thead>
<tr>
<th>Indicator Category</th>
<th>Data Source</th>
<th>Performance Target</th>
<th>Practitioner Performance</th>
<th>Practitioner Performance</th>
<th>Practitioner Performance</th>
<th>Practitioner Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>VOLUME DATA</td>
<td>VISTA</td>
<td>1250 per year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Encounters</td>
<td>VISTA</td>
<td>500 per year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 1. PATIENT CARE/PROCEDURAL SKILLS

- **Timely completion of progress note:** Signed within 24 hours for individual treatment and 48 hours for groups.
  - **Clinical Pertinence Review:** 90% or greater completed

- **Suicide Risk Assessment completed with all required elements within 24 hours for Positive PTSD or Depression reminder.**
  - **Suicide Prevention Coordinator’s Report:** <2 instances per quarter of failure to create or complete suicide risk assessment.

- **Master treatment plan is documented in MH Suite and updated at appropriate time intervals.**
  - **Clinical Pertinence Review:** 90% or greater completed or updated

- **Timely completion of encounters. Complete on the same day for individuals and within 48 for group.**
  - **Clinical Pertinence Review:** 90% or greater completed

### 2. MEDICAL / CLINICAL KNOWLEDGE

- **FPPE Generated.**
  - MH Leadership: No

- **Completes peer review training and completes peer reviews as assigned in the appropriate time period.**
  - MH Leadership: Yes

### 3. PRACTICE BASED LEARNING IMPROVEMENT

- **Attends M&M or reviews minutes/audio recording.**
  - MH Leadership/Sign in sheet: >=75%

- **Participates in performance or process improvement tasks forces, work groups or committees as requested.**
  - MH Leadership: Yes
### 4 INTERPERSONAL AND COMMUNICATION SKILLS

<table>
<thead>
<tr>
<th>Electronic medical record entries are appropriate in tone and content</th>
<th>Clinical Pertinence Review</th>
<th>90% or greater completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progress notes provide clear assessment of current status, plan and follow-up recommendation</td>
<td>Clinical Pertinence Review</td>
<td>90% or greater completed</td>
</tr>
</tbody>
</table>

### 5 SYSTEMS BASED PRACTICE

<table>
<thead>
<tr>
<th>When veteran is in treatment with more than one discipline the chart provides clear indication of communication either by summarizing communication or co-signature.</th>
<th>Clinical Pertinence Review</th>
<th>90% or greater completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completes Pertinence reviews as assigned and in the designated time period</td>
<td>MH Leadership</td>
<td>90% or greater</td>
</tr>
</tbody>
</table>

### 6 PROFESSIONALISM

<table>
<thead>
<tr>
<th>Participates in Staff Meetings.</th>
<th>MH Leadership</th>
<th>Will attend 85% or &gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discloses adverse events on the same day of occurrence if event is known.</td>
<td>MH Leadership</td>
<td>&lt; or = 2/ quarter</td>
</tr>
</tbody>
</table>

### 7 DISCIPLINE SPECIFIC PATIENT CARE MEASURES PERFORMANCE MEASURES

| Medication Reconciliation as required | Clinical Pertinence Review | >90% |

**Special Privileges:**

- **ECT**
  - NA clinician is not privileged in
    - Clinician Provides cases | 5/year |
- **Bupernophine**
  - NA clinician is not privileged in
    - Clinician Provides cases | 5/year |
- **Other:**
  - NA clinician is not privileged in
    - Clinician Provides cases | 5/year |