

Green Apple Counseling

1500 10th Ave S. Ste 200 Great Falls MT, 59405 Phone: 406-866-0350

POLICY: QUALITY ASSESSMENT OF SERVICES

PURPOSE: To provide Green Apple clients and staff the opportunity to improve overall services, add needed groups, or make changes for the betterment of the clients.

PROCEDURE:

- Conduct Client, Parent, or guardian survey annually, at will or upon completion of services
- Surveys should be completed by the Client if over the age of 18 years of age, Parent, or guardian if under the age of 18 years of age.
- Conducting client satisfaction surveys, annually, for all Green Apple's programs. The survey must address:
 - whether the client, parent or guardian is adequately involved in the development and review of the client's treatment plan
 - whether the client, parent or guardian was informed of client rights and the mental health center's grievance procedure
 - the client's, parent's, or guardian's satisfaction with all mental health center programs in which the client participated
 - Strengths of the program
 - Weaknesses of the program
 - Suggested improvements
- Surveys will be sent using an online survey program i.e., SurveyMonkey or through client portal/email
 - An Annual Report of Improvement will be generated and kept on file with Office Manager and Administrator
- Managing Board shall review, on an ongoing basis, incident reports, grievances, complaints, medication errors, and the use of seclusion and/or physical restraint with special attention given to identifying patterns and making necessary changes in how services are provided
- a quarterly review of effectiveness, financial status, staffing patterns, and staff caseload.
 - Completed by assigned staff or outside agency that is contracted for this specific task to ensure quality of care and assist in best outcomes.