

**Genesee County CMH  
Performance indicators  
Year end report FY 2008**

CMH / PIHP performance measures

In Fiscal 2008, the PIHP and the CMHSP continued to achieve high levels of performance on most Michigan Department of Community Health (MDCH) performance measures. Tables 1 and 2 provide details of CMHSP and PIHP performance trends over the past several years. The CMHSP section contains information about all CMH consumers. The PIHP section provides information on Medicaid consumers, including those served by the Substance Abuse Coordinating Agency (SACA).

Performance on most indicators has been excellent through the year, continuing a pattern seen starting in FY 2007. The primary area in which the Genesee CMH network has had difficulty is children's inpatient recidivism. After substantial declines during FY 2007, the rate climbed again in FY 2008. Adult recidivism, while generally compliant with MDCH's 15% standard, has frequently been very close to 15%. The Quality Management department is initiating a formal Performance Improvement Project that will include inpatient recidivism as a major focus.

In addition to MMBPIS, three indicators are reported that were developed by GCCMH, all related to the utilization of crisis care. Measurement of crisis services is highly salient because crisis services denote times of high clinical risk, high cost of care, extreme personal discomfort for consumers, and possible failure of services to meet consumers' needs.

The first measurement, crisis recidivism, is analogous to inpatient recidivism. Many consumers in crisis receive services other than inpatient care. In Genesee's network, these services include partial hospitalization, crisis residential care, and crisis stabilization. Along with the hospital, we conceptualize these as the "crisis continuum." A consumer in crisis may use one or more of the services before leaving the crisis continuum. Once he/she has left, however, the crisis should be resolved or deescalated to the point where ongoing services can manage it. Crisis recidivism is defined, then, as the percentage of cases leaving all crisis care who return to any crisis service within 30 days. Tables 1 and 2 contain these data for the CMHSP (all MI/DD consumers) and the PIHP (MI/DD and SA Medicaid consumers).

Two additional measures of crisis services are inpatient utilization and other crisis service utilization. Where similar programs differ in the amount of crisis care their consumers are receiving, there is the potential to identify "best practices" that help to maintain stability. Crisis utilization is reported as the mean number of consumer-days of crisis care per consumer-month enrolled in the program.

Crisis utilization is reported only at the program level, because it is very sensitive to case mix. Where consumers with more severe difficulties are served, crisis utilization is likely to be much higher. Thus, aggregated findings across programs may reflect more about the distribution of cases served than about overall service quality.

Substance Abuse performance measures

The PIHP performance indicators include measures for consumers served in the SACA. Unfortunately, the data system currently in use in the SACA does not provide for accurate individual program measurement of performance. This will be remedied by the introduction of a new PIHP-wide data system in Fiscal 2010.

The remainder of this document consists of charts of program-specific findings for the indicators noted above. Quarterly and annual program-level findings have been made available to all providers and PIHP departments, and are being invited to meet individually with the Outcomes Manager to discuss their findings. The final chart depicts the CMHSP's and the PIHP's progress in improving performance since Fiscal 2005. Since 2005 the proportion of performance standards met has improved from around 30% to over 90%.

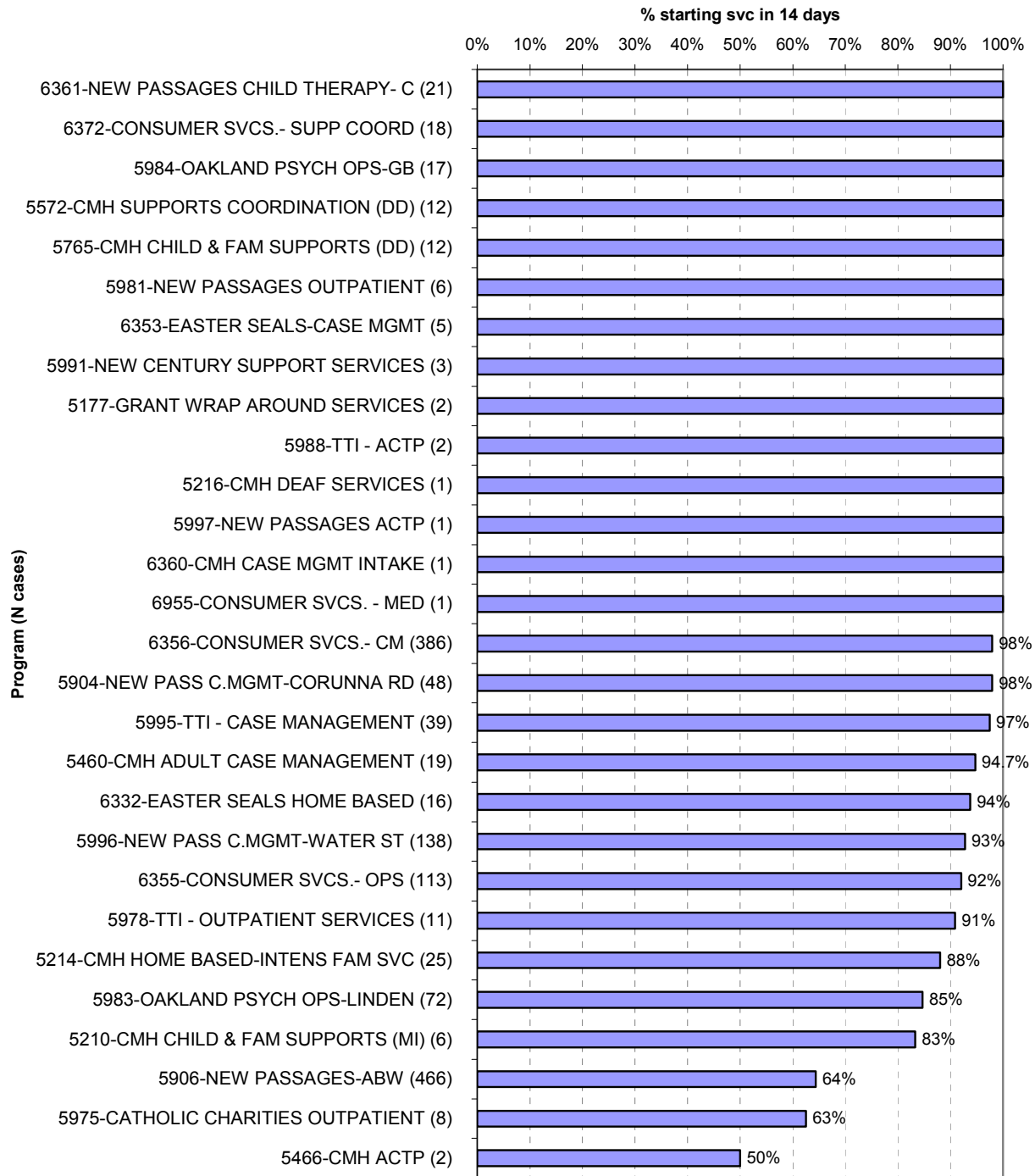
Table 1: CMHSP performance since Fiscal Year 2005

		FY 2005				FY 2006				FY 2007				FY 2008			
Indicator	Population	2005 Q1	2005 Q2	2005 Q3	2005 Q4	2006 Q1	2006 Q2	2006 Q3	2006 Q4	2007 Q1	2007 Q2	2007 Q3	2007 Q4	2008 Q1	2008 Q2	2008 Q3	2008 Q4
Indicator 1. % of crisis screenings with disposition within 3 hours	Children	93%	88%	83%	95%	99%	100%	99%	98%	98%	100%	99%	100%	97%	100%	99%	100%
	Adults	93%	93%	82%	91%	95%	99%	99%	98%	97%	99%	100%	99%	97%	99%	99%	100%
Indicator 2. % with initial assessment within 14 days of first request	MI children	93%	98%	100%	100%	97%	98%	98%	100%	98%	100%	100%	97%	97%	100%	100%	99%
	MI adults	95%	99%	99%	100%	100%	99%	98%	99%	99%	100%	100%	98%	97%	98%	98%	97%
	DD children	96%	100%	98%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	DD adults	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Overall	95%	99%	99%	100%	99%	99%	98%	99%	99%	100%	100%	98%	97%	98%	99%	97%
Indicator 3. % starting ongoing services within 14 days of initial assessment	MI children	78%	74%	72%	70%	74%	79%	98%	100%	100%	96%	100%	99%	99%	98%	98%	99%
	MI adults	79%	79%	80%	80%	89%	90%	90%	96%	99%	97%	99%	100%	84%	98%	95%	95%
	DD children	80%	71%	76%	63%	85%	90%	92%	90%	97%	100%	100%	100%	100%	100%	100%	100%
	DD adults	29%	69%	95%	71%	90%	95%	100%	95%	100%	100%	100%	100%	100%	100%	100%	100%
	Overall	78%	77%	79%	77%	85%	88%	92%	96%	99%	98%	100%	100%	89%	98%	96%	96%
Indicator 4a: % with inpatient discharge follow-up within 7 days	Children					76%	91%	96%	92%	97%	96%	97%	100%	96%	100%	96%	100%
	Adults					81%	88%	91%	90%	95%	97%	97%	95%	96%	96%	99%	100%
Indicator 12. Inpatient readmission rate	Children	11%	4%	16%	17%	18%	9%	19%	23%	21%	22%	14%	8%	3%	11%	16%	16%
	Adults	13%	11%	10%	9.2%	10.3%	16.6%	12.8%	17.9%	12.7%	8.8%	14%	13%	12%	11%	9%	10%
Overall: % of standards met		29%	36%	50%	43%	50%	56%	69%	63%	94%	94%	100%	100%	88%	100%	94%	94%

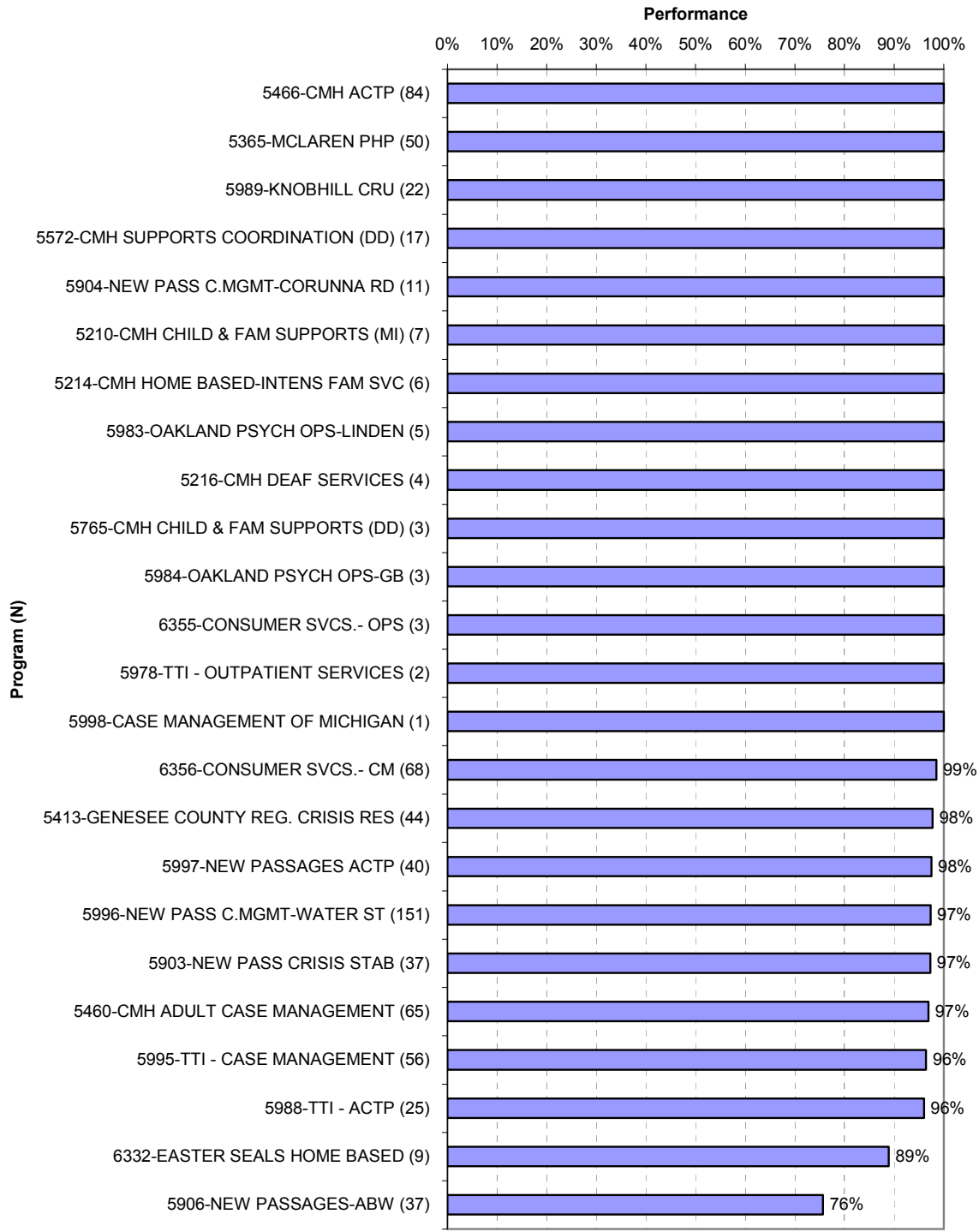
Table 2: PIHP performance since Fiscal Year 2005

		FY 2005				FY 2006				FY 2007				FY 2008				
Indicator group	Population	2005 Q1	2005 Q2	2005 Q3	2005 Q4	2006 Q1	2006 Q2	2006 Q3	2006 Q4	2007 Q1	2007 Q2	2007 Q3	2007 Q4	2008 Q1	2008 Q2	2008 Q3	2008 Q4	
Indicator 1. % of crisis screenings with disposition within 3 hours	Children					98%	100%	99%	98%	98%	100%	100%	100%	98%	99%	99%	100%	
	Adults					96%	99%	99%	98%	97%	99%	99%	99%	97%	99%	99%	99%	
Indicator 2. % with initial assessment within 14 days of first request	MI children					96%	97%	100%	100%	98%	100%	100%	98%	96%	100%	100%	96%	
	MI adults					99%	98%	96%	97%	99%	100%	100%	99%	95.3%	100%	99%	98%	
	DD children					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	DD adults					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	SUD					100%	100%	97%	99%	100%	99%	99%	99%	99%	98%	99%	98%	
	Overall		95%	99%	99%	100%	99%	99%	97%	98%	99%	99%	100%	99%	97%	99%	99%	98%
Indicator 3. Timeliness to ongoing services	MI children					77%	80%	97%	100%	100%	97%	100%	100%	100%	97%	98%	100%	
	MI adults					87%	87%	91%	98%	98%	100%	100%	100%	96%	99%	98%	97%	
	DD children					90%	88%	100%	94%	94%	100%	100%	100%	100%	100%	100%	100%	
	DD adults					86%	95%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	SUD					92%	88%	97%	95%	95%	98%	96%	95%	96%	85%	95%	97%	
	Overall		78%	93%	94%	86%	88%	87%	96%	96%	97%	99%	98%	98%	97%	94.5%	97%	98%
Indicator 4a. Inpatient / detox discharge follow-up	Children					83%	90%	96%	78%	97%	96%	100%	100%	96%	100%	96%	100%	
	Adults		73%	91%	86%	73%	88%	87%	96%	86%	95%	97%	100%	97%	97%	100%	98%	100%
	SUD					92%	93%	100%	100%	100%	100%	100%	100%	100%	97%	97%	97%	
Indicator 12. Inpatient readmission rates	Children					19%	10%	20%	23%	24%	22%	14%	9%	3%	9%	14%	18%	
	Adults					11%	15%	7%	16%	12%	7%	14%	14%	12%	14%	10%	10%	
Overall	% standards met	33%	33%	33%	33%	47%	53%	89%	74%	89%	95%	100%	100%	100%	89%	100%	95%	

**Figure 1: Ongoing services timeliness FY 2008:  
% of cases seen within 14 days of Access screening**  
(bars with no label are 100%)



**Figure 2: Inpatient follow-up FY 2008**  
**% of cases seen within 7 days of inpatient discharge**  
 (bars with no label are 100%)



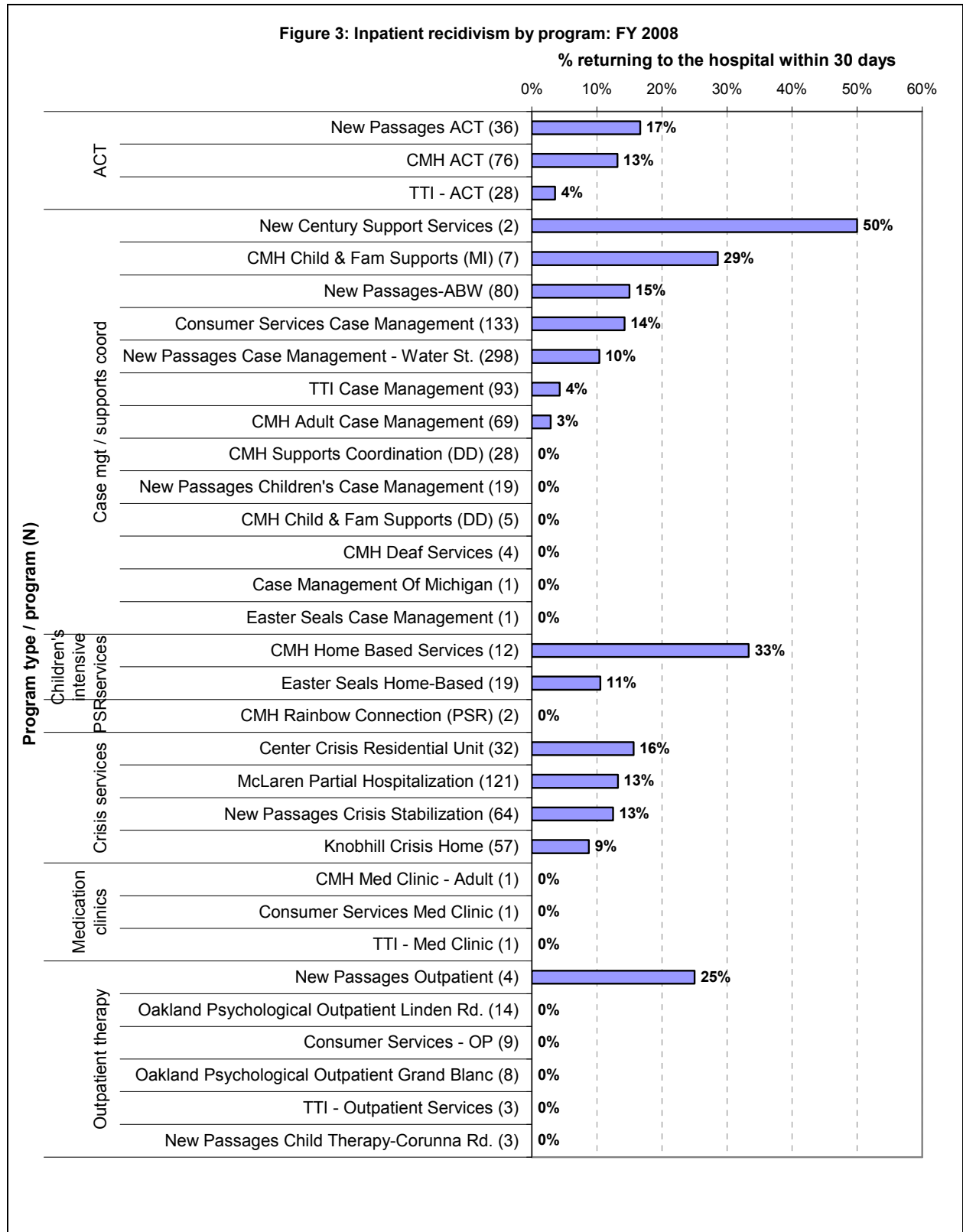
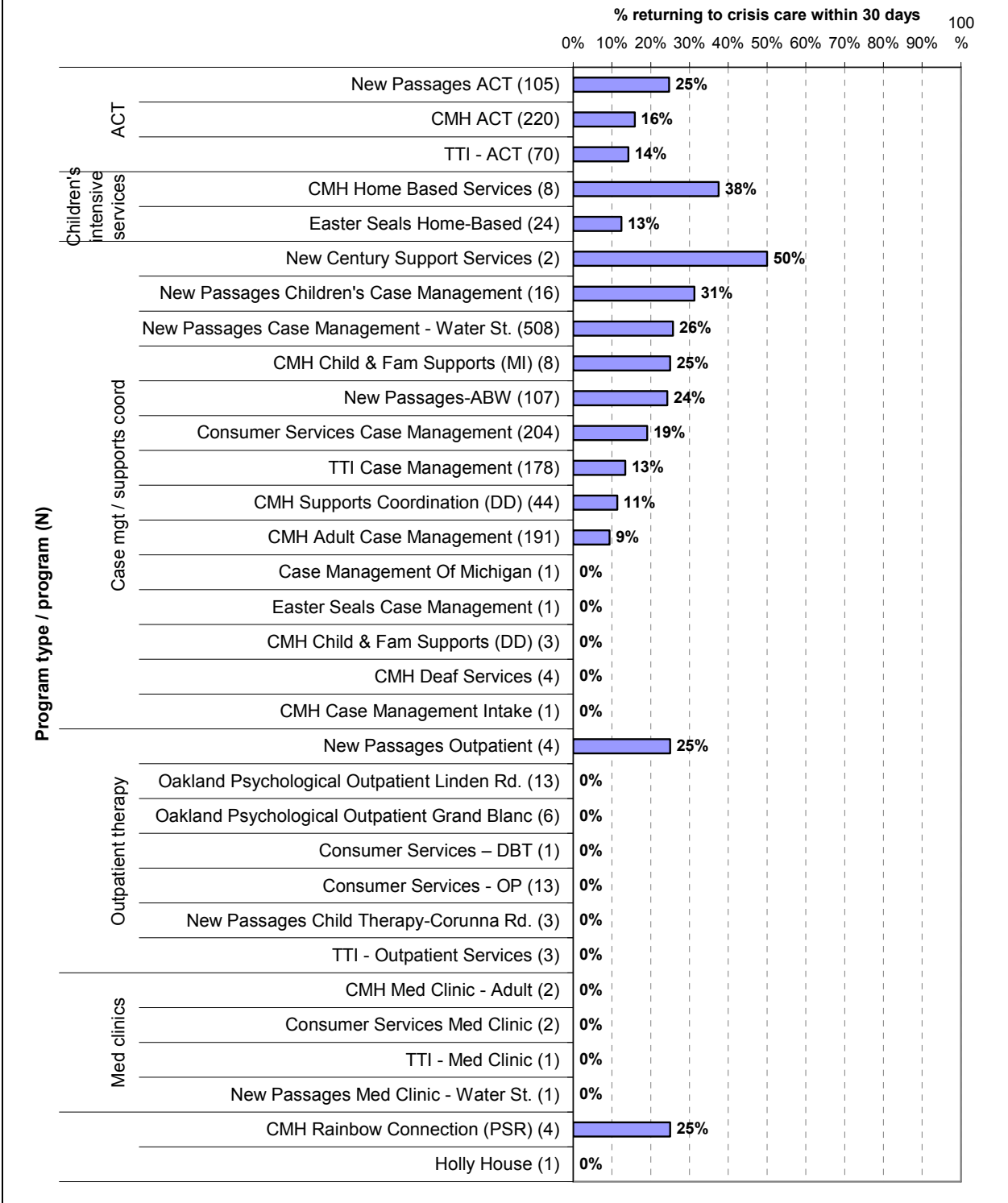
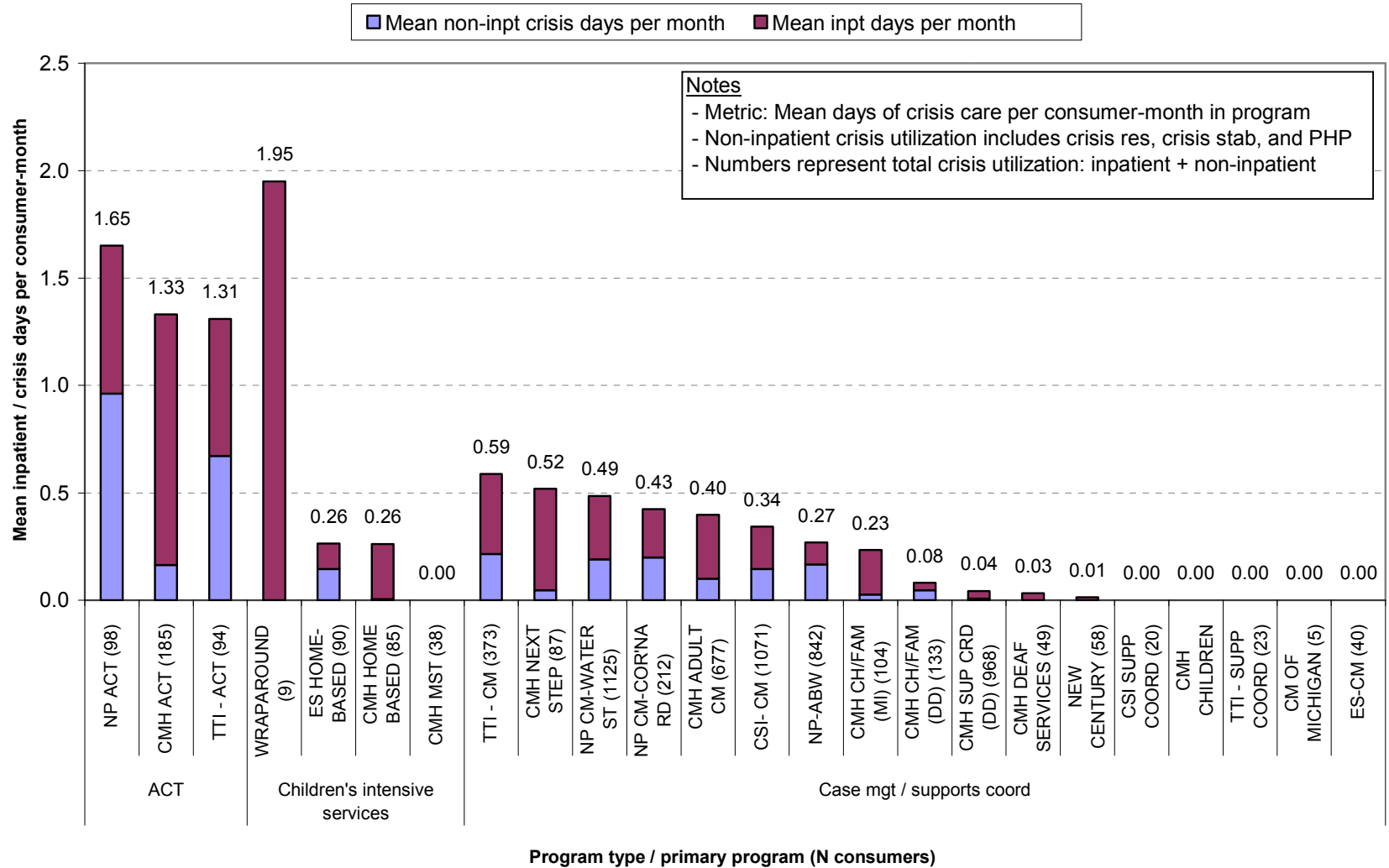


Figure 4: Crisis recidivism by program: FY 2008



**Figure 5a: Inpatient and crisis utilization: FY 2008**  
**ACT, home-based, wraparound, and case management programs**



**Figure 5b: Inpatient and crisis utilization: FY 2008  
Outpatient and medication programs**

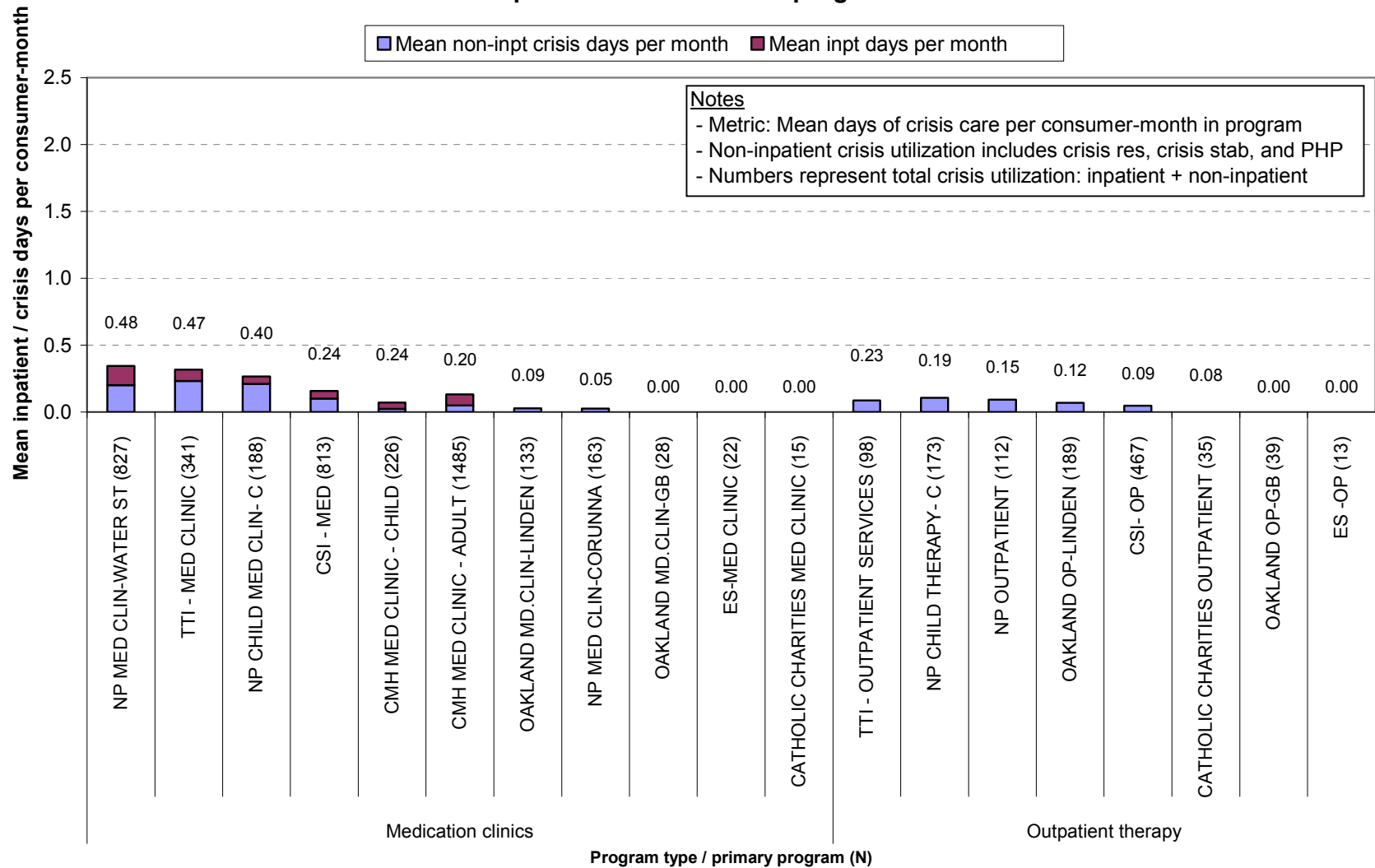


Figure 6: Trend - Proportion of indicators met by quarter

