

# Community Mental Health Services of Muskegon County

## Performance Dashboard for Muskegon CMH Programs FY08/09

|                                       |                                  |
|---------------------------------------|----------------------------------|
| <span style="color: green;">■</span>  | Meets or exceeds target for goal |
| <span style="color: red;">■</span>    | Does not meet target for goal    |
| <span style="color: yellow;">■</span> | Close to target for goal         |

| Program  | Measure  | Target          | Oct-Dec08 | Jan-Mar09 | Apr-Jun09 | July-Sept09 |
|--|--|-----------------|-----------|-----------|-----------|-------------|
| <b>A. ACCESS</b>                               |  |                 |           |           |           |             |
| ACT  | Seen W/One Day   | 95%             | 100.0%    | 87.5%     | 100.0%    | 93.3%       |
| Brinks   | Referred /Admitted Same Day  | 95%             | 100.0%    | 100.0%    | 100.0%    |             |
| Clubhouse                                      | Scheduled For Orientation Within 2 Weeks Of Initial Contact          | 92%             | 100.0%    | 100.0%    | 100.0%    | 100.0%      |
| ES   | Co-Occuring Disorders Addressed In Screenings                        | 100%            | 100.0%    | 97.7%     | 96.4%     | 97.4%       |
| Indian Bay                                     | Open Beds Filled Wthin 15 Days                                       | 15 days or less | 0         | 0         | 37        |             |
| MIA Outpatient                                 | Mia Outpatient Referrals Seen By Peer Advocate Within 30 Days        | 25%             | NA        | NA        | NA        | NA          |
| MIC Outpatient                                 | # Of Children Seen In Schools Will Increase                          | 55              | 73        | 92        | 86        | 66          |
| SEP  | Contact with Employer within 30 days of Start of Service             | 85%             | 66.7%     | 0.0%      | 42.9%     | 16.7%       |
| Sup Coord.                                     | Contact Rate Meets Or Exceeds Ips Freq                               | 95%             | 88.1%     | 81.4%     | 94.0%     | 79.5%       |
| <b>B. Measure of Effectiveness</b>             |  |                 |           |           |           |             |
| ACT  | % Act Consumers With No Inpat. Hospitalizations During Qsr           | 85%             | 81.6%     | 87.6%     | 83.7%     | 79.0%       |
| ACT  | # Inpatient Diversions   | 24              | 11        | 23        | 10        | 27          |
| ACT  | % Participate In Vocational Activities                               | 60%             | 65.5%     | 54.5%     | 57.6%     | 54.8%       |
| ACT  | % With New Involvement W/Criminal Justice System                     | 5% or Less      | 17.8%     | 12.9%     | 14.6%     | 2.4%        |
| ACT  | % Who Report Adequate Support System                                 | 45%             | 43.7%     | 49.4%     | 50.0%     | 34.5%       |
| ACT  | %Rep. Recog. Of Prodromals   | 40%             | 34.5%     | 35.1%     | 39.1%     | 36.9%       |
| ACT  | % Reported SA Abstinence   | 70%             | 81.6%     | 81.8%     | 70.7%     | 72.6%       |
| ACT  | % ACT Consumers Living In Independent Settings                       | 70%             | 82.8%     | 80.5%     | 76.1%     | 69.0%       |
| Brinks   | % Improved Functioning At Discharge                                  | 95%             | 96.7%     | 98.6%     | 97.1%     | 100.0%      |
| Brinks   | % of Homeless Admitted Who Are Living Independently at Discharge     | 60%             | 52.9%     | 31.6%     | 31.3%     | NA          |
| Brinks   | % With Better Understanding of Illness at Discharge                  | 60%             | 47.8%     | 76.9%     | 66.7%     | 66.7%       |
| Brinks   | % in Denial of SA at Admit With Improvement Noted at Discharge       | 60%             | 13.3%     | 0.0%      | 14.3%     | 0.0%        |
| Indian Bay                                     | % Who Accomplish a Weekly Obj. Toward Their Activity Goal            | 90%             | 90.0%     | 100.0%    | 100.0%    |             |
| Indian Bay                                     | % Who Participate in Exercise / Wellness Activities                  | 70%             | 90.0%     | 100.0%    | 100.0%    |             |
| Clubhouse                                      | % Who Report Progress Toward Clubhouse Goal                          | 80%             | 88.1%     | 75.9%     | 81.0%     | 86.4%       |
| Clubhouse                                      | % of Progress Reviews With Member Input / Signature.                 | 80%             | 72.4%     | 82.5%     | 77.7%     | 84.9%       |
| ES   | % Diverted From Inpatient Services                                   | 65%             | 54.6%     | 60.8%     | 62.4%     | 62.6%       |
| ES   | % Requesting Inp Service Within 1 Wk Of Diversion                    | 10% or Less     | 4.5%      | 4.7%      | 4.1%      | 6.6%        |
| MIA Outpatient                                 | OQ 45 Intake Scores will improve at least 7 points within 90 days    | 7               | 6.5       | 6.2       | 4.8       | 10.2        |
| MIC Outpatient                                 | % Cafas Scores Indicating Improvement                                | 50%             | 54.2%     | 59.1%     | 69.8%     | 66.2%       |
| MIC Outpatient                                 | % Open Cases With a CAFAS Completed Within Last 90 Days              | 95%             | New       | New       | 64.9%     | 84.4%       |
| Sup Coord.                                     | # of Individuals Referred to an Evidence Based Practice              | 10 or More      | 18        | 34        | 33        | 12          |
| Sup Coord.                                     | # of Individuals in self-determination or self directed services     | TBD             | 18        | 34        | 33        | 12          |
| DD Sup Coord.                                  | #Transitions to a Less Restrictive Living Arrangement (DD Only)      | 5               | 5         | 1         | 2         | 5           |
| MIA Sup Coord.                                 | # of Documented Peer Delivered Services Units (MI Only)              | TBD             | 276       | 278       | 400       | 262         |
| SEP  | % of People Receiving SEP who are Employed                           | 20%             | 10.0%     | 6.4%      | 6.7%      | 4.4%        |
| Skill Building                                 | <i>Each Person will Participate in at least one Community Outing</i> | 93%             | 84.9%     | 82.0%     | 98.6%     | 97.7%       |
| <b>C. Measure of Efficiency</b>                |  |                 |           |           |           |             |
| ACT  | % Of Act Contacts In Community                                       | 75%             | 67%       | 65%       | 95%       | 97%         |
| Brinks   | Occupancy Rate (Quarterly Average)                                   | 75%             | 74%       | 79%       | 64%       |             |
| Indian Bay                                     | % Of Consumers Reviewed To Move To Lesser Care Per Qsr               | 95%             | 100.0%    | 100.0%    | 100.0%    |             |
| Clubhouse                                      | Goal Recom.Forms forwarded to primary worker w/one week of PCP       | 95%             | 100.0%    | 100.0%    | 100.0%    | 100.0%      |
| ES   | Average Los - Children   | 5               | 7.93      | 7.22      | 6.30      | 7.00        |
| ES   | Average Los - Adults   | 6.5             | 6.06      | 5.18      | 5.61      | 5.44        |
| MIA Outpatient                                 | % Of F/F Contact Time  | 58%             | 61.0%     | 62.3%     | 64.0%     | 63.3%       |
| MIC Outpatient                                 | % Hbs Clients W/ 2Hr F/F Each Week                                   | 100%            | 38.1%     | 28.4%     | 27.3%     | 47.9%       |
| SEP  | Average Number of Employer Contacts Per Quarter                      | TBD             | 35        | 21        | 44        | 51          |
| Skill Building                                 | % of Staff Not Incurring Injuries during the Quarter                 | TBD             | 99.4%     | 99.5%     | 97.4%     | 96.4%       |
| Sup Coord.                                     | % Of F/F Contact Time  | 30%             | 26.7%     | 26.7%     | 27.8%     | 26.3%       |
| <b>D. Measure of Satisfaction</b>              |  |                 |           |           |           |             |
| Brinks   | Avg Satisfaction Rating Score - Brinks                               | 4               | 4.52      | 4.52      | 4.26      | 4.56        |
| Clubhouse                                      | % Of Surveys With Score Of 4 Or Above                                | 95%             | 92%       | 91%       | 94.95%    | 96%         |
| ES   | % Of Diverted Cases Who Do Not Request 2nd Opinion                   | 95%             | 92.4%     | 92.2%     | 92.2%     | 94.3%       |
| Outpatient                                     | Avg Satisfaction Rating Score - Mi Children                          | 4               | 4.47      | 4.58      | 4.58      | 4.65        |
| Outpatient                                     | Avg Satisfaction Rating Score - Mi Adults                            | 4               | 4.11      | 4.44      | 4.55      | 4.53        |
| Indian Bay                                     | Avg Satisfaction Rating Score -Indian Bay                            | 4               | NA        | 4.67      | NA        |             |
| Sup Coord.                                     | % of SC Consumer With Satisfaction Assessed Quarterly                | 100%            | 62.9%     | 72.3%     | 79.7%     | 70.8%       |
| SEP  | Avg Satisfaction Rating Score  | 4               | New       | New       | 4.67      | NA          |
| <b>Satisfaction Surveys Completed Annually</b> |  |                 | FY06/07   | FY 07/08  | FY 08/09  | FY09/10     |
| ACT  | Avg Satisfaction Rating Score  | 2 or less       | 1.61      | 1.63      | 1.61      |             |