

MICHIGAN MISSION-BASED PERFORMANCE INDICATOR SYSTEM

CMHSP

Performance Indicator Trending Report

FY'20 – FY'22

updated June 2022



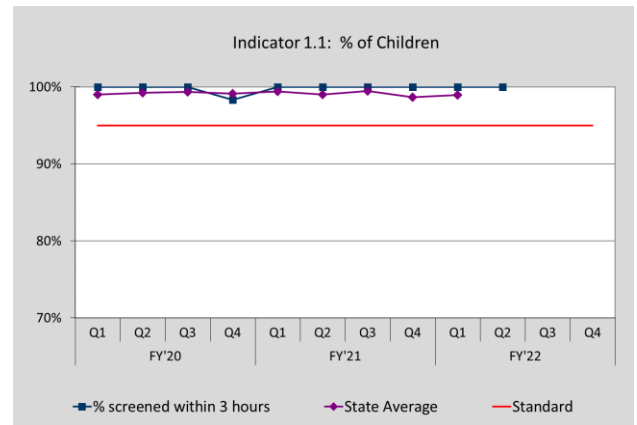
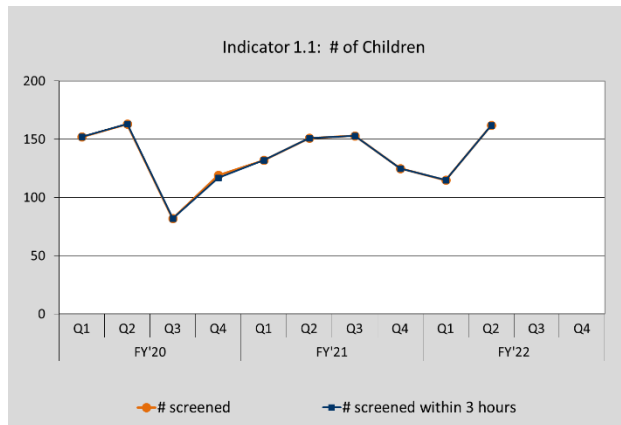
SAGINAW COUNTY
COMMUNITY MENTAL
HEALTH AUTHORITY

Indicator 1: ACCESS-TIMELINESS/INPATIENT SCREENING: The percentage of persons during the quarter receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within 3 hours. Standard = 95%

Rationale for Use: People who are experiencing symptoms serious enough to warrant evaluation for inpatient care are potentially at risk of danger to themselves or others. Thus, time is of the essence. This indicator assesses whether CMHSPs and PIHPs are meeting the Department's standard that 95% of the inpatient screenings have a final disposition within 3 hours. This indicator is a standard measure of access to care.

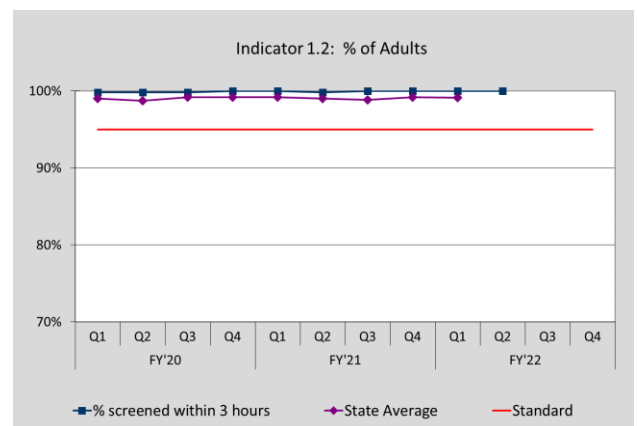
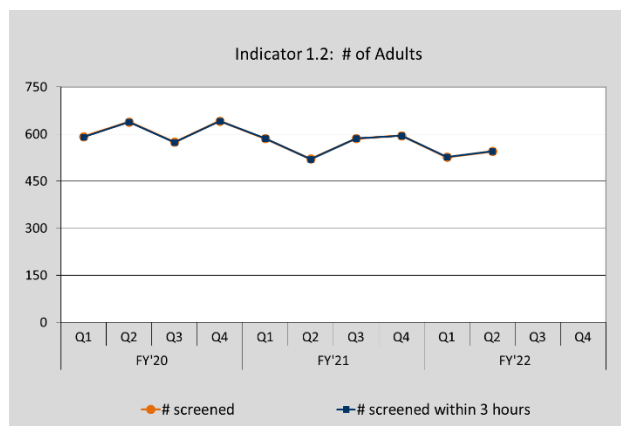
Indicator 1.1: Children

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# screened	152	163	82	119	516	132	151	153	125	561	115	162			
# screened within 3 hours	152	163	82	117	514	132	151	153	125	561	115	162			
# not screened within 3 hours	0	0	0	2	2	0	0	0	0	0	0	0			
% screened within 3 hours	100.00%	100.00%	100.00%	98.32%	99.61%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%			
State Average	99.02%	99.24%	99.34%	99.13%		99.43%	98.99%	99.46%	98.68%		98.94%				
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%



Indicator 1.2: Adults

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# screened	592	639	575	642	2,448	586	521	586	595	2,288	527	545			
# screened within 3 hours	591	638	574	642	2,445	586	520	586	595	2,287	527	545			
# not screened within 3 hours	1	1	1	0	3	0	1	0	0	1	0	0			
% screened within 3 hours	99.83%	99.84%	99.83%	100.00%	99.88%	100.00%	99.81%	100.00%	100.00%	99.96%	100.00%	100.00%			
State Average	99.00%	98.73%	99.16%	99.18%		99.18%	99.01%	98.85%	99.17%		99.14%				
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%



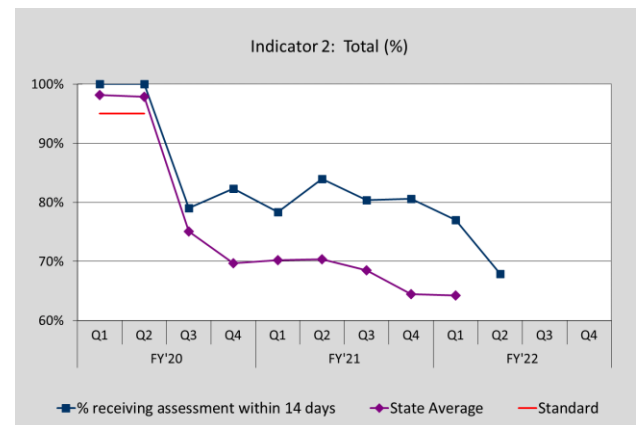
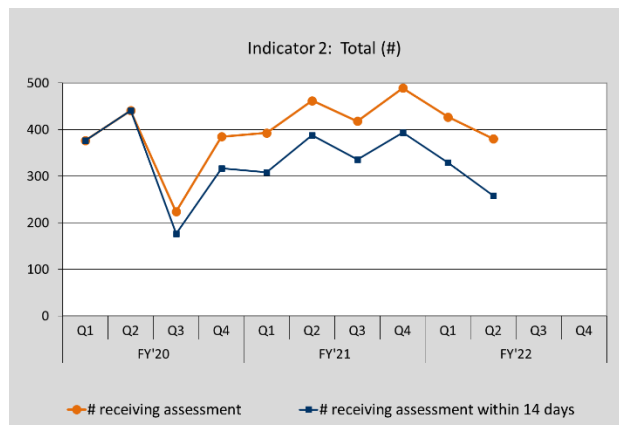
Indicator 2A* (new): ACCESS-TIMELINESS/FIRST REQUEST

The percentage of new persons during the quarter receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service. *Effective FY20Q3, MDHHS has removed all exception reasons. Standard = No standard for first year of implementation.

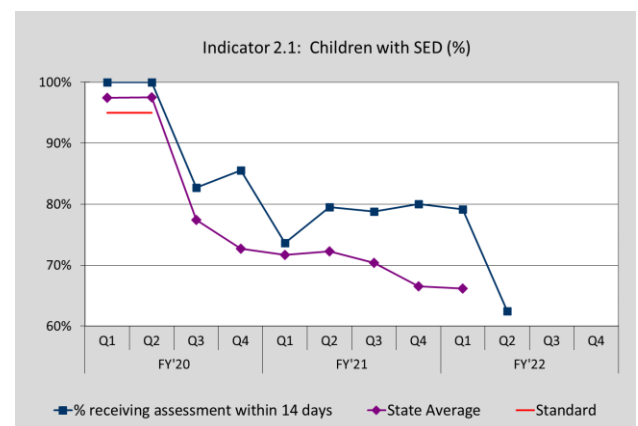
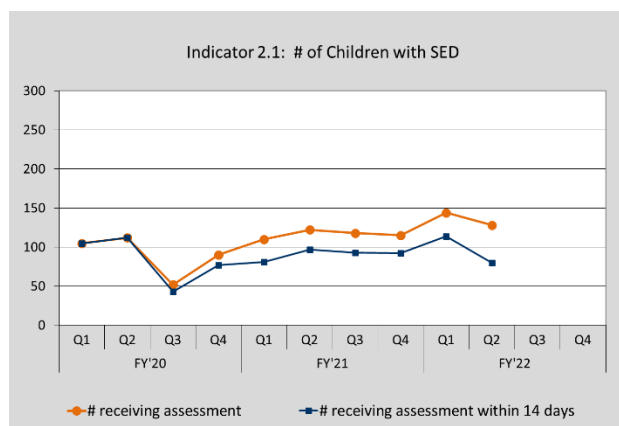
Rationale for Use: Quick, convenient entry into the public mental health system is a critical aspect of accessibility of services. Delays in clinical and psychological assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

Indicator 2: Total

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	377	441	224	385	1,427	393	462	418	489	1,762	427	380			
# receiving assessment within 14 days	377	441	177	317	1,312	308	388	336	394	1,426	329	258			
# not receiving assessment within 14 days	0	0	47	68	115	85	74	82	95	336	98	144			
% receiving assessment within 14 days	100.00%	100.00%	79.02%	82.34%	91.94%	78.37%	83.98%	80.38%	80.57%	80.93%	77.05%	67.89%			
State Average	98.13%	97.85%	75.10%	69.68%		70.22%	70.39%	68.53%	64.45%		64.21%				
Standard	95%	95%													

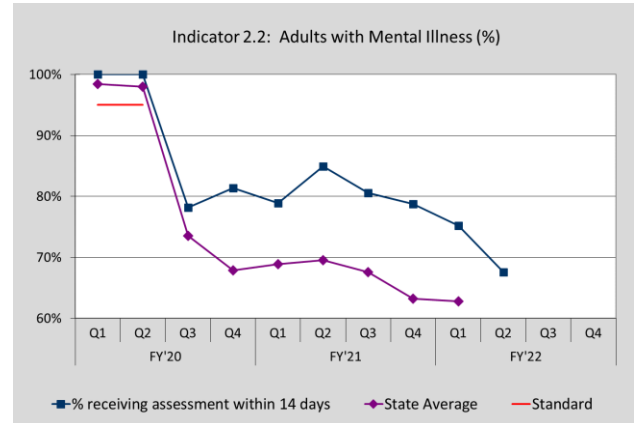
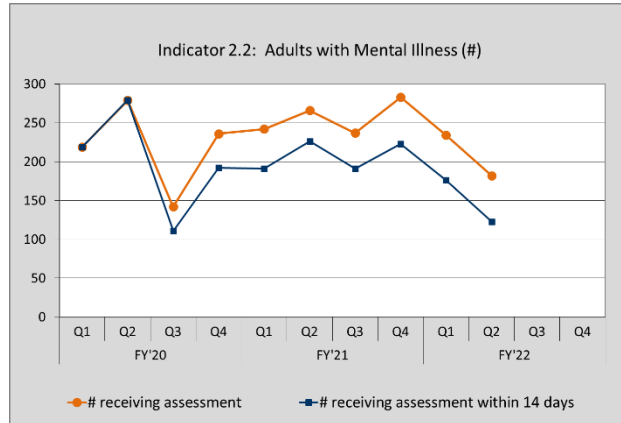
**Indicator 2.1: Children with Serious Emotional Disturbances (SED)**

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	105	112	52	90	359	110	122	118	115	465	144	128			
# receiving assessment within 14 days	105	112	43	77	337	81	97	93	92	363	114	80			
# not receiving assessment within 14 days	0	0	9	13	22	29	25	25	23	102	30	48			
% receiving assessment within 14 days	100.00%	100.00%	82.69%	85.56%	93.87%	73.64%	79.51%	78.81%	80.00%	78.06%	79.17%	62.50%			
State Average	97.48%	97.53%	77.40%	72.70%		71.72%	72.24%	70.36%	66.50%		66.19%				
Standard	95%	95%													

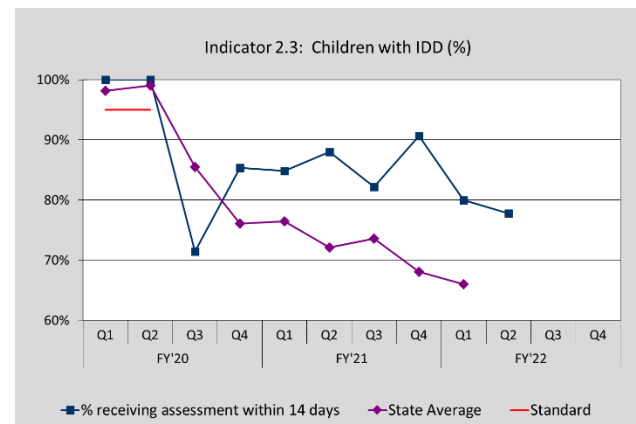
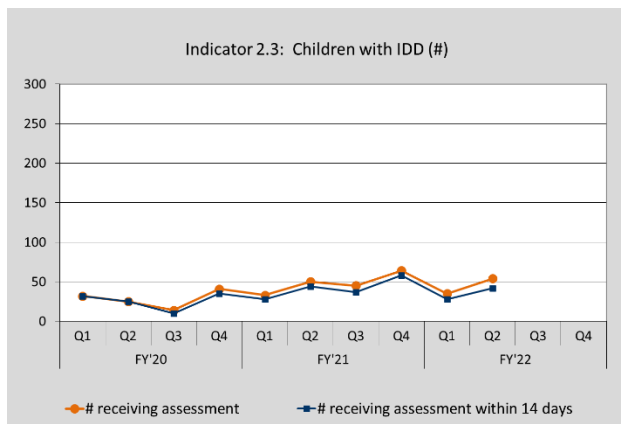


Indicator 2.2: Adults with Mental Illness (MI)

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	219	279	142	236	876	242	266	237	283	1,028	234	182			
# receiving assessment within 14 days	219	279	111	192	801	191	226	191	223	831	176	123			
# not receiving assessment within 14 days	0	0	31	44	75	51	40	46	60	197	58	59			
% receiving assessment within 14 days	100.00%	100.00%	78.17%	81.36%	91.44%	78.93%	84.96%	80.59%	78.80%	80.84%	75.21%	67.58%			
State Average	98.47%	97.97%	73.55%	67.90%		68.88%	69.51%	67.59%	63.21%		62.81%				
Standard	95%	95%													

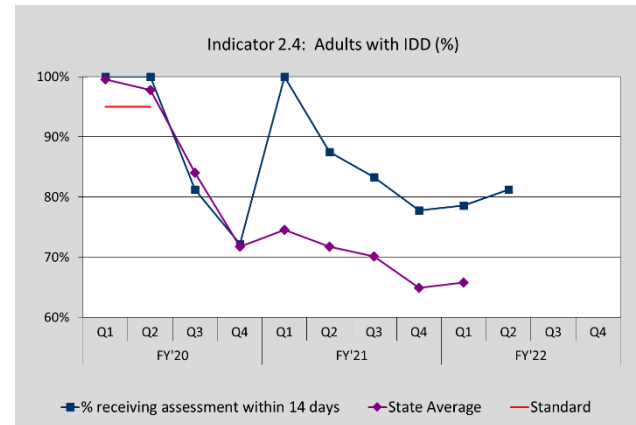
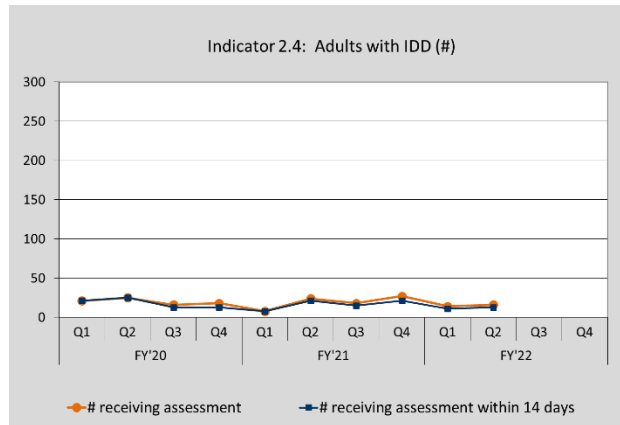

Indicator 2.3: Children with Intellectual and Developmental Disabilities (IDD)

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	32	25	14	41	112	33	50	45	64	192	35	54			
# receiving assessment within 14 days	32	25	10	35	102	28	44	37	58	167	28	42			
# not receiving assessment within 14 days	0	0	4	6	10	5	6	8	6	25	7	12			
% receiving assessment within 14 days	100.00%	100.00%	71.43%	85.37%	91.07%	84.85%	88.00%	82.22%	90.63%	86.98%	80.00%	77.78%			
State Average	98.18%	99.01%	85.50%	76.12%		76.47%	72.10%	73.62%	68.05%		66.03%				
Standard	95%	95%													



Indicator 2.4: Adults with Intellectual and Developmental Disabilities (IDD)

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# receiving assessment	21	25	16	18	80	8	24	18	27	77	14	16			
# receiving assessment within 14 days	21	25	13	13	72	8	21	15	21	65	11	13			
# not receiving assessment within 14 days	0	0	3	5	8	0	3	3	6	12	3	3			
% receiving assessment within 14 days	100.00%	100.00%	81.25%	72.22%	90.00%	100.00%	87.50%	83.33%	77.78%	84.42%	78.57%	81.25%			
State Average	99.55%	97.82%	84.03%	71.75%		74.55%	71.72%	70.11%	64.88%		65.77%				
Standard	95%	95%													



Indicator 3* (new): ACCESS-TIMELINESS/FIRST SERVICE

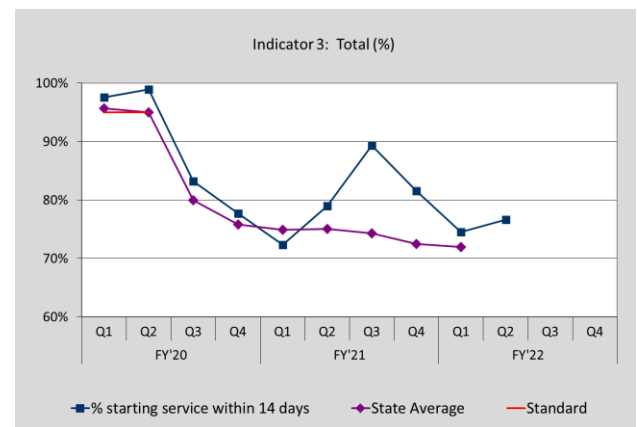
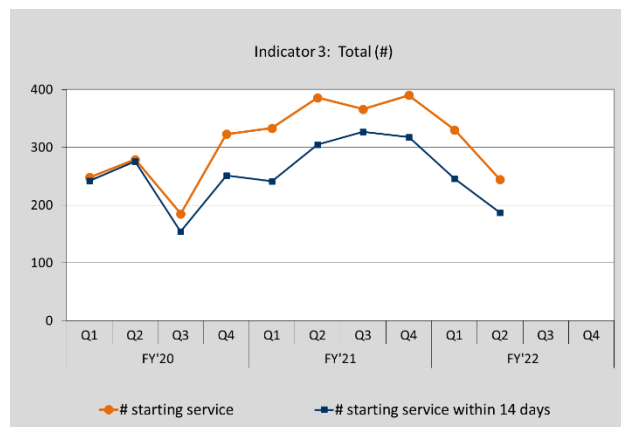
Percentage of new persons during the quarter starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional. *Effective FY20Q3, MDHHS has removed all exception reasons.

Standard = No standard for first year of implementation.

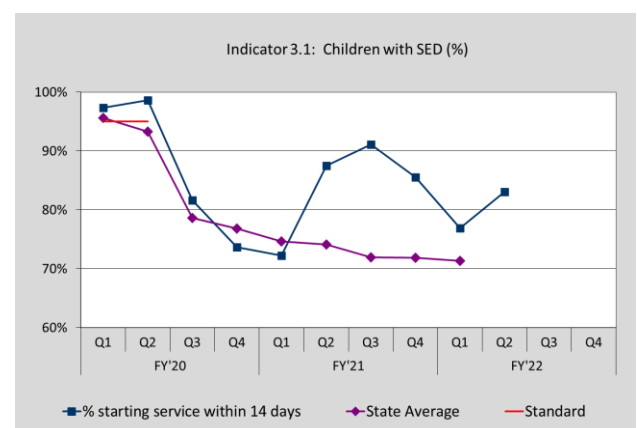
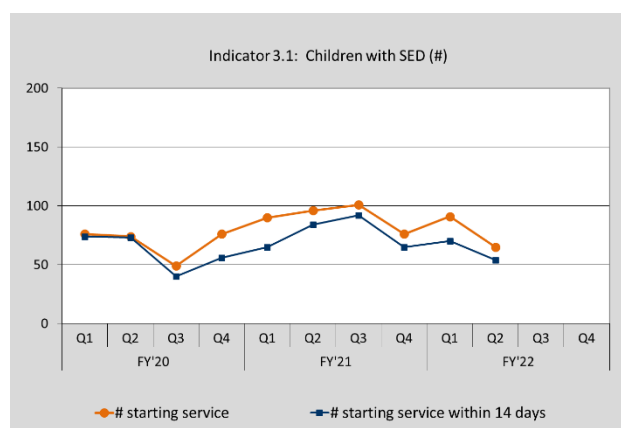
Rationale for Use: The amount of time between professional assessment and the delivery of needed treatments and supports addresses a different aspect of access to care than Indicator #2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

Indicator 3: Total

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	248	279	185	323	1,035	333	386	366	390	1,475	330	244			
# starting service within 14 days	242	276	154	251	923	241	305	327	318	1,191	246	187			
# not starting service within 14 days	6	3	31	72	112	92	81	36	72	281	84	57			
% starting service within 14 days	97.58%	98.92%	83.24%	77.71%	89.18%	72.37%	79.02%	89.34%	81.54%	80.75%	74.55%	76.64%			
State Average	95.64%	95.02%	79.97%	75.82%		74.94%	75.02%	74.34%	72.51%		71.97%				
Standard	95%	95%													

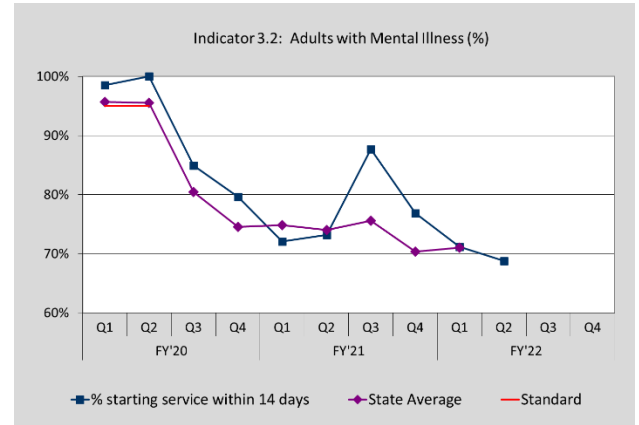
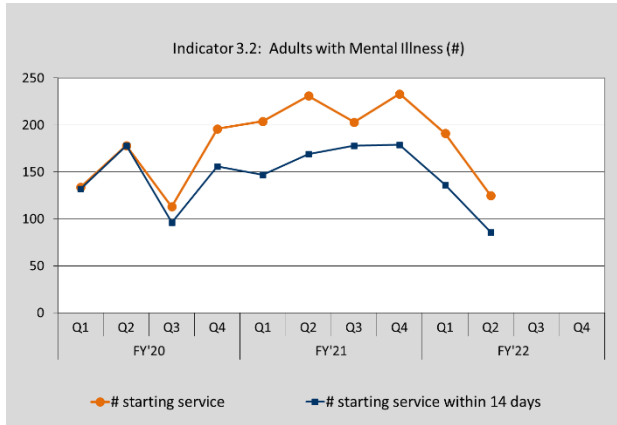
**Indicator 3.1: Children with Serious Emotional Disturbances (SED)**

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	76	74	49	76	275	90	96	101	76	363	91	65			
# starting service within 14 days	74	73	40	56	243	65	84	92	65	306	70	54			
# not starting service within 14 days	2	1	9	20	32	25	12	9	11	57	21	11			
% starting service within 14 days	97.37%	98.65%	81.63%	73.68%	88.36%	72.22%	87.50%	91.09%	85.53%	84.30%	76.92%	83.08%			
State Average	95.60%	93.29%	78.66%	76.81%		74.63%	74.11%	71.93%	71.89%		71.37%				
Standard	95%	95%													

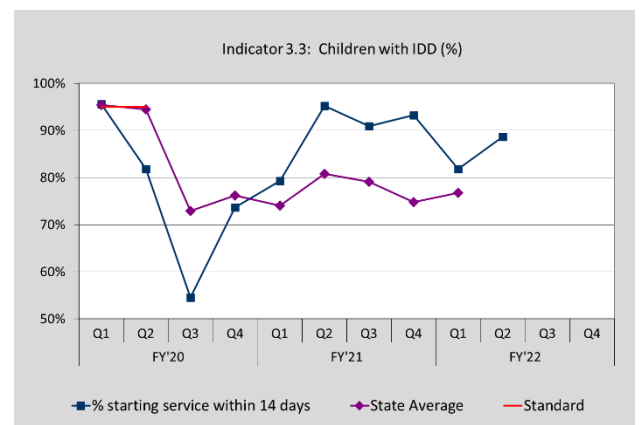
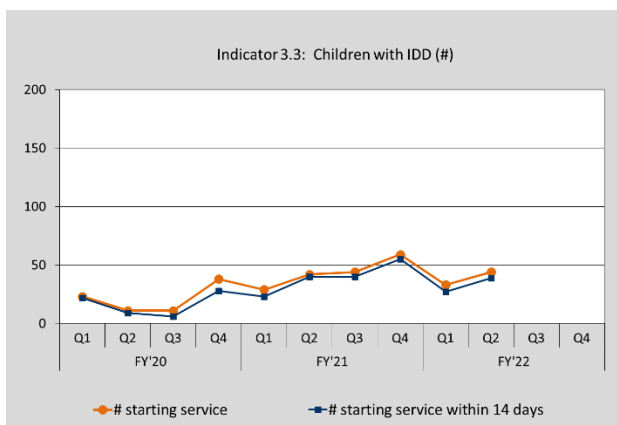


Indicator 3.2: Adults with Mental Illness (MI)

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	134	178	113	196	621	204	231	203	233	871	191	125			
# starting service within 14 days	132	178	96	156	562	147	169	178	179	673	136	86			
# not starting service within 14 days	2	0	17	40	59	57	62	25	54	198	55	39			
% starting service within 14 days	98.51%	100.00%	84.96%	79.59%	90.50%	72.06%	73.16%	87.68%	76.82%	77.27%	71.20%	68.80%			
State Average	95.68%	95.50%	80.45%	74.54%		74.85%	73.98%	75.57%	70.35%		71.03%				
Standard	95%	95%													

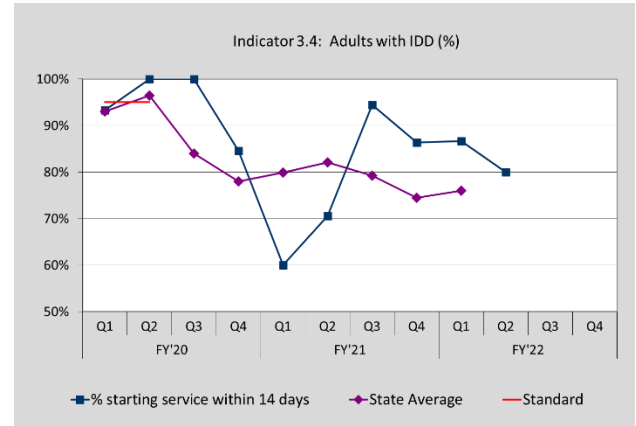
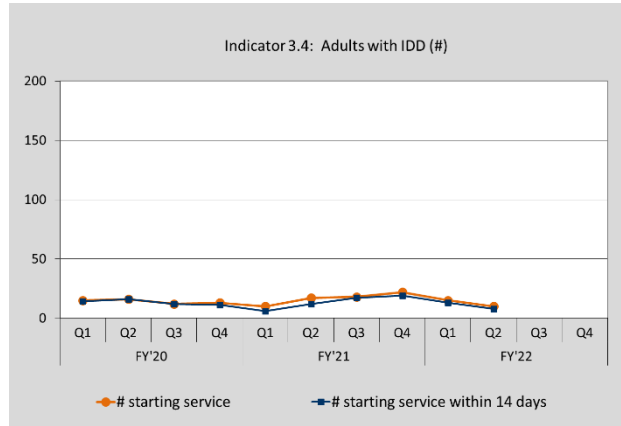
**Indicator 3.3: Children with Intellectual and Developmental Disabilities (IDD)**

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	23	11	11	38	83	29	42	44	59	174	33	44			
# starting service within 14 days	22	9	6	28	65	23	40	40	55	158	27	39			
# not starting service within 14 days	1	2	5	10	18	6	2	4	4	16	6	5			
% starting service within 14 days	95.65%	81.82%	54.55%	73.68%	78.31%	79.31%	95.24%	90.91%	93.22%	90.80%	81.82%	88.64%			
State Average	95.38%	94.52%	72.90%	76.16%		74.08%	80.82%	79.10%	74.79%		76.75%				
Standard	95%	95%													



Indicator 3.4: Adults with Intellectual and Developmental Disabilities (IDD)

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# starting service	15	16	12	13	56	10	17	18	22	67	15	10			
# starting service within 14 days	14	16	12	11	53	6	12	17	19	54	13	8			
# not starting service within 14 days	1	0	0	2	3	4	5	1	3	13	2	2			
% starting service within 14 days	93.33%	100.00%	100.00%	84.62%	94.64%	60.00%	70.59%	94.44%	86.36%	80.60%	86.67%	80.00%			
State Average	93.05%	96.46%	84.04%	78.00%		79.89%	82.08%	79.28%	74.48%		76.03%				
Standard	95%	95%													



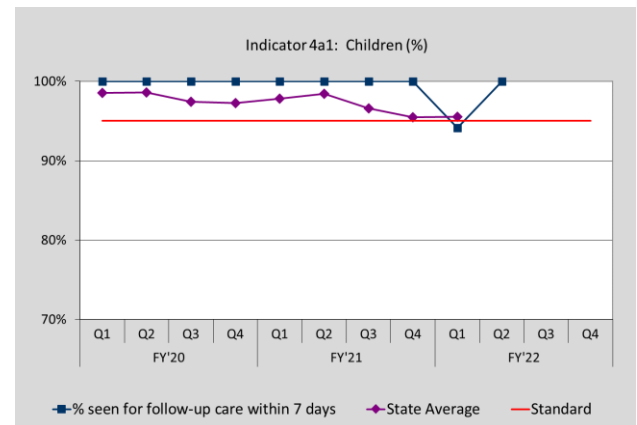
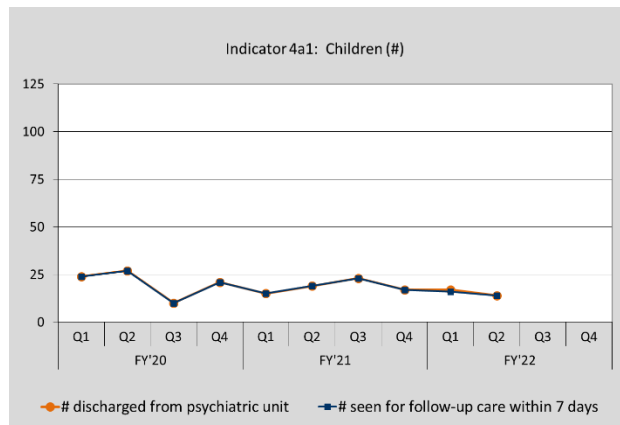
Indicator 4a: ACCESS-CONTINUITY OF CARE

The percentage of discharges from a psychiatric inpatient unit during the quarter that were seen for follow-up care within 7 days. Standard = 95%

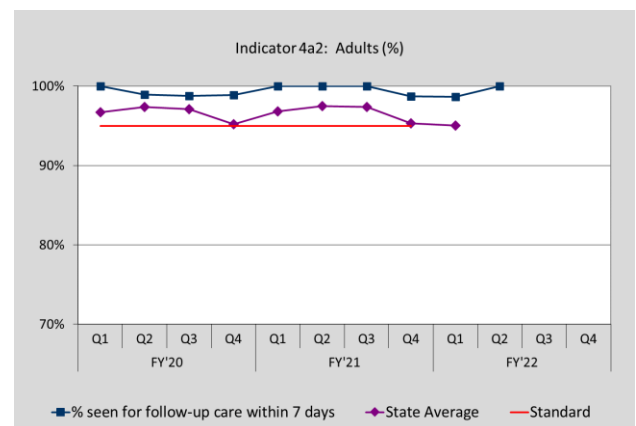
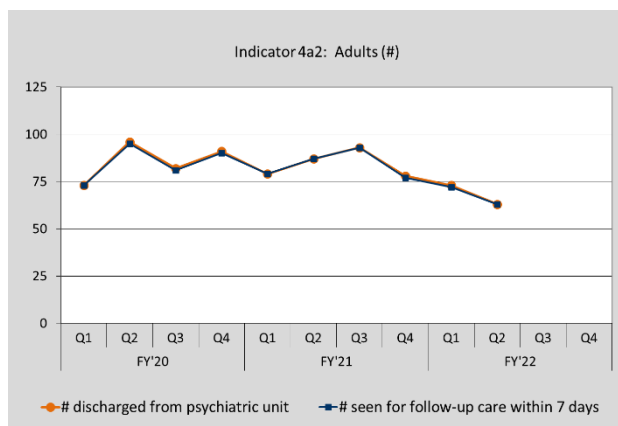
Rationale for Use: When responsibility for the care of an individual shifts from one organization to another, it is important that services remain relatively uninterrupted and continuous. Otherwise, the quality of care and consumer outcomes may suffer. This is an indicator required by the federal Substance Abuse and Mental Health Services Administration.

Indicator 4a1: Children

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# discharged from psychiatric unit	24	27	10	21	82	15	19	23	17	74	17	14			
# seen for follow-up care within 7 days	24	27	10	21	82	15	19	23	17	74	16	14			
# not seen for follow-up care within 7 days	0	0	0	0	0	0	0	0	0	0	1	0			
% seen for follow-up care within 7 days	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	94.12%	100.00%			
State Average	98.55%	98.58%	97.40%	97.23%		97.80%	98.42%	96.60%	95.49%		95.53%				
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%

**Indicator 4a2: Adults**

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# discharged from psychiatric unit	73	96	82	91	342	79	87	93	78	337	73	63			
# seen for follow-up care within 7 days	73	95	81	90	339	79	87	93	77	336	72	63			
# not seen for follow-up care within 7 days	0	1	1	1	3	0	0	0	1	1	1	0			
% seen for follow-up care within 7 days	100.00%	98.96%	98.78%	98.90%	99.12%	100.00%	100.00%	100.00%	98.72%	99.70%	98.63%	100.00%			
State Average	96.73%	97.39%	97.11%	95.19%		96.82%	97.48%	97.38%	95.33%		95.00%				
Standard	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%					



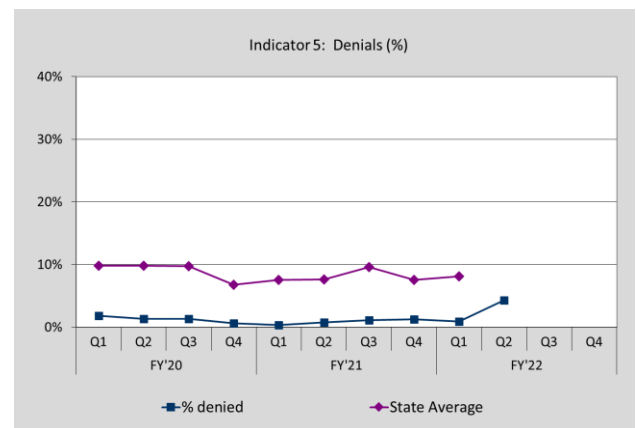
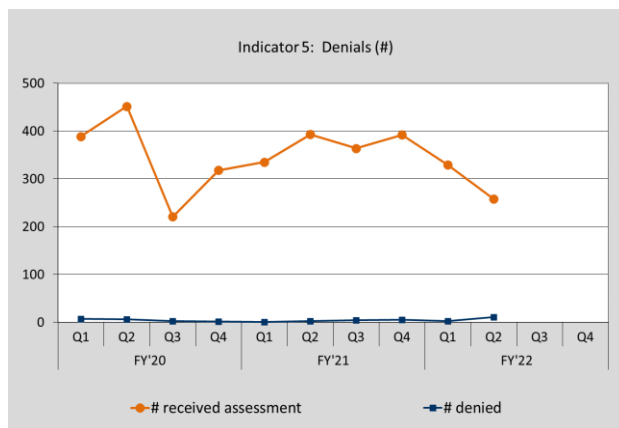
Indicator 5: ACCESS-DENIALS

Percentage of face-to-face assessments with professionals during the quarter that result in denials.

Rationale for Use: As managed care organizations, CMHSPs are responsible for exercising appropriate control of entry into the public mental health system. The professional assessment represents one of the first opportunities for a CMHSP to control access to its non-emergent services and supports.

Indicator 5

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# received assessment	389	452	221	318	1,380	335	393	364	392	1,484	329	258			
# denied	7	6	3	2	18	1	3	4	5	13	3	11			
% denied	1.80%	1.33%	1.36%	0.63%	1.30%	0.30%	0.76%	1.10%	1.28%	0.88%	0.91%	4.26%			
State Average	9.78%	9.79%	9.75%	6.78%		7.56%	7.61%	9.57%	7.53%		8.11%				



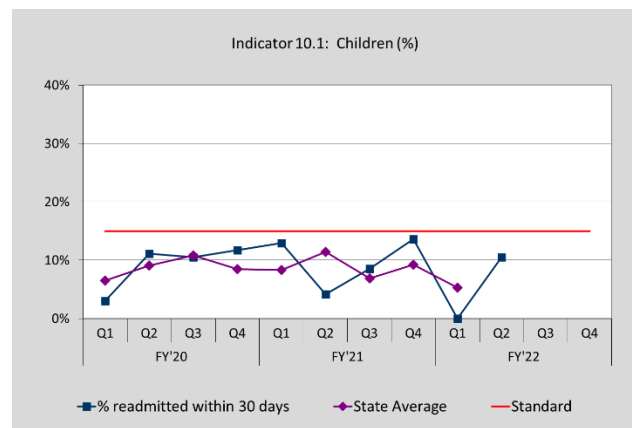
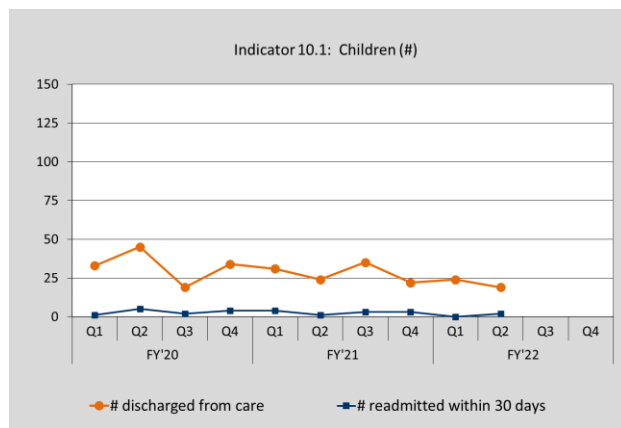
Indicator 10: OUTCOME: INPATIENT RECIDIVISM

The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge. Standard = 15% or less

Rationale for Use: For some people with mental illness, the occasional use of psychiatric inpatient care is essential. However, rapid readmission following discharge may suggest that people were prematurely discharged or that the post discharge follow-up was not timely or sufficient. This indicator assessed whether CMHSPs are meeting the Department's standard of no more than 15 percent of people discharged from inpatient units are being readmitted within 30 days.

Indicator 10.1: Children

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# discharged from care	33	45	19	34	131	31	24	35	22	112	24	19			
# readmitted within 30 days	1	5	2	4	12	4	1	3	3	11	0	2			
% readmitted within 30 days	3.03%	11.11%	10.53%	11.76%	9.16%	12.90%	4.17%	8.57%	13.64%	9.82%	0.00%	10.53%			
State Average	6.48%	9.08%	10.82%	8.47%		8.30%	11.40%	6.89%	9.21%		5.28%				
Standard	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%

**Indicator 10.2: Adults**

	FY'20					FY'21					FY'22				
	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL	Q1	Q2	Q3	Q4	TOTAL
# discharged from care	111	151	133	130	525	141	112	133	130	516	114	110			
# readmitted within 30 days	13	15	15	17	60	15	16	15	12	58	6	10			
% readmitted within 30 days	11.71%	9.93%	11.28%	13.08%	11.43%	10.64%	14.29%	11.28%	9.23%	11.24%	5.26%	9.09%			
State Average	9.99%	11.57%	13.02%	11.43%		13.34%	13.78%	10.84%	12.69%		8.83%				
Standard	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%

