

# PERFORMANCE MEASURES: YOUTH SYSTEM OF CARE

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WELLNESS • RECOVERY • RESILIENCE

# AGENDA

- I. Review elements of Quality Improvement Program & Work Plan
- II. Review Performance Measures and Operational Definitions
- III. Questions and Discussion

# Informing Theory: Deming's Value Chain Reaction

Improve the value of products and services from the  
viewpoint of the customer



Increase demand for the organization's products and  
services



Improve financial performance



Stay in business



Provide Jobs and More Jobs

# SCCDBHS's Value Chain Reaction

Improve the value of experience and services from the viewpoint of the customer



Increase relevance, preference and availability of the system's services



Engage and enable a skilled and motivated workforce



Provide an excellent return on the public investment



Improve financial performance



Improve the health of the community

# System Activity

Plan to Improve (QI Work Plan)

Design & Redesign Processes and Services

Need / Demand Analysis

Measurement & Feedback

**VISION & MISSION**

## Outcomes:

### Sources:

### Core System Processes:

Community

Schools

Juv. Justice, Corrections

IMDs & Acute Hosp

Primary Care

Other Programs & Agencies

**PREVENTION: Education in the Community**

**WELCOME:**  
Provide accessible, appropriate and welcoming points of entry

**ENGAGE:**  
Build clients' hope and belief

**ASSESS:**  
Discover clients' strengths, assets, goals and other whole health needs

**UNDERSTAND WHOLE PERSON:**  
Put clients' strengths, assets and goals into usable form

**TREAT & TEAM UP ON CARE:**  
Provide tx in collaboration with others to support clients' goal attainment and advance their recovery

**PLAN & COORDINATE:**  
Create or update clients' tx plan with usable strengths, assets, goals and other whole health needs and share it

**TRANSITION:**  
Support clients' discharge to new programs and from public mental health services

Improved Care

improved Population Health

Reduced Costs per Capita

Reduced Disparities

### System Supports:

Contractual Relationships

Development & Supervision

Documentation & Reimbursement

Auditing & Compliance

External/Community Resources

# MEASUREMENT FOR IMPROVEMENT

- Timely access to appropriate services
- Client Wellness and Recovery Progress
- Prevention and Early Detection

# MEASURES AND OPERATIONAL DEFINITIONS

- **OBJECTIVES**

1. Time to access initial services is no more than xx days (and xx days for Level 1 and post-discharge clients)
2. xx% of clients with dual disorders (mental health and substance disorders) receive services that are integrated and that are provided at the appropriate level of care
3. xx% of individuals are engaged in the recovery process within xx days (as measured by no-show rates, MORS scores, achievement of at least one short-term goal, etc.)
4. The rate per 1000 of individuals using emergency or hospital services is no more than xx
5. No more than xx% of clients receiving inpatient hospital services are readmitted within xx days.
6. The average cost per case is no more than \$xx
7. The penetration rate for service to the community is at least xx% across all segments (age, sex, geography, ethnicity and race)
8. xx% of clients achieve at least one short-term goal every month.
9. At least xx clients successfully discharge from the system each month (as measured by CANS, MORS, etc.)
10. All clients experience meaningful activities in their communities every day
11. At least xx% of all clients report that they are satisfied with their housing situation
12. At least xx% of clients participate in paid or unpaid employment
13. Involvement in criminal justice system is no more than xx%
14. Re-incarceration rate is no more than xx%

# PROCESS FOR IDENTIFYING BENCHMARKS

- PQIC Discussion
- Clustered indicators
- Identified lead and work group members for each cluster
- Task: Identify national and state background information and data related to best practice and benchmarks



# INDICATORS FOR MEASUREMENT

- **Timely access to appropriate services**

1. Time to access initial services is no more than xx days (and xxx days for Level 1 and post-discharge clients)

2. xx% of clients with dual disorders (mental health and substance disorders) receive services that are integrated and that are provided at the appropriate level of care

3. xx% of individuals are engaged in the recovery process within xx days (as measured by no-show rates, MORS/CANS scores, achievement of at least one short term goal, etc.)

# INDICATORS FOR MEASUREMENT

- **Acute service and hospitalization rates**

4. The rate per 1000 individuals using emergency or hospital services is no more than xxx.

5. No more than xxx% of clients receiving inpatient hospital services are readmitted within xxx days.

6. The average cost per case is no more than \$xx

7. The penetration rate for service to the community is at least xx% across all segments (age, sex, geography, ethnicity, and race) **\*Will be addressed by MHD**

# INDICATORS FOR MEASUREMENT

- **Client wellness and recovery progress/goal achievement**
  8. xx% of clients achieve at least one short term goal every month
  9. At least xx clients successfully discharge from the system each month (as measured by CANS/MORS, etc.)
  10. All clients experience meaningful activities in their communities everyday
  11. At least xx% of all clients report they are satisfied with their housing situation
  12. At least xx% of clients participated in paid or unpaid employment
  15. Peer support/peer involvement

# INDICATORS FOR MEASUREMENT

- **Criminal Justice Involvement**

13. Involvement in the criminal justice system is no more than xx%

14. Re-incarceration rate is no more than xx %

# SUDS OUTPATIENT PROPOSED MEASURES

- Same day admission rate
- Number of admissions during the month
- Number of services per client during the month
- Number of discharges during the month
- Percent of completions of treatment compared to the total number of discharges for the month
- Percent of active clients who received services during the month
- Percent of open clients who did not receive services
- Percent of clients with four or more services within thirty days
- Number of days between admission & second service
- Percent who dropped out of treatment within 15 days of admission

# SUDS RESIDENTIAL PROPOSED MEASURES

- Duration of wait – number of days from referral to entry into treatment
- Number of admissions during month
- Number of open clients during the month
- Number of discharges during the month
- Percent of clients who left within 8 days of admission
- Percent of discharged clients who completed treatment
- Vacancy rate- number of slots not filled
- Percent of discharged clients who transferred to outpatient treatment

**Specialty Behavioral Health  
Youth and Family System of Care  
- Utilization Management/Access  
- Training - Quality - Contracts**

SUDS ITS MHS

SUDS ITS MHS

**Prevention Services**

**Residential and Intensive Services**

School Linked Services

**Outpatient Services**

Child Welfare

FIRST 5

Integrated Treatment Clinics

Katie A  
Intensive Outpatient  
Receiving Center

Prevention (DADS)

Alexian  
KidScope  
Las Plumas  
Sunnyvale

Intensive Services

Too Good For Drugs  
Parent Workshops  
Info and Referral (newspaper/website)  
Coalition  
Strengthening Families  
Prevention Grants  
Friday Night Live

YFSOC Contracts

Specialty MH  
Integrated Services  
Specialty SUD

Wraparound  
Full Service Partnership  
Residential Services (MHD/DADS)  
Therapeutic Behavioral Services

Prevention and Early Intervention (PEI)

School-Based Outpatient Services (DADS/MHD)

Juvenile Justice

REACH  
Triple P  
Reach Out and Read  
PEI School Based  
PEI P2  
Nurse Family Partnership

Transition Age Youth

Juvenile Hall  
Ranch Programs  
Juvenile Competency Restoration

Behavioral Health Training & Implementation

Emergency Crisis and Acute Services

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# QUESTIONS AND COMMENTS