**MMBPIS Report to WMCMH Board**

**4th Quarter FY 2024 (July-September 2024)**

**January 6, 2025**

On a quarterly basis, all Community Mental Health Service Providers (CMHSPs) compile data and report to Michigan Department of Health and Human Services (MDHHS) on a number of performance indicators, compliance indicators, and monitoring measures. Below is a summary of WMCMH performance on 6 of these indicators.

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| Chart 2.1 shows that for 4th Quarter, 43% of individuals who requested services and were referred for an assessment were assessed within 14 days of request. Chart 2.2 shows the reasons consumers were not assessed within 14 days. MDHHS has set a low target of 56.39% and a high target of 62.08%. In 4th Quarter, performance continues to be below the low target. Most common reasons for noncompliance included consumer choice, cancellation, no shows, and a relatively high number of incidents in which staff did not record the reasons why appointments were scheduled outside 14 days (these are coded as staff errors or systems issues). Previous plans of correction have included training staff to standards and procedures to meet standard, however these efforts have not been successful as Q4 is now the fifth consecutive quarter below standard. In January, the Access team implemented substantial changes to our intake model in hopes to dramatically improve timeliness. |
| Chart 3.1 shows that for 4th Quarter, 72% of individuals who were referred to ongoing care started ongoing care within 14 days of assessment. Chart 3.2 shows the percentage of consumers who didn’t start care within 14 days, by reason. MDHHS has set a low target of 72.85% and a high target of 84.66%. In 4th Quarter, there were 11 client no show, cancellations, or rescheduled appointments that resulted in delayed start of care. Previous plans of correction have included training staff to standards and procedures to meet standard, however these efforts have not been completely successful as Q4 is now the fifth consecutive quarter below standard, but we are just shy of meeting the low target. The Quality, Access, and Support Teams will continue to work together to develop new strategies to impact performance. |
| **Service Entry Assessments – Second Opinions – 4th Quarter FY 2024:**   |  |  |  | | --- | --- | --- | | Total Number of Service Entry Assessments: | Number of Service Entry Assessments resulting in no further care at WMCMHS: | Number of Service Entry Assessments where Second Opinion was requested: | | 101 | 5 | 0 |   This table shows how the State measures ease for consumers to get needed services. There were no second opinions requested during 4th Quarter. |
| This graph shows the percentage of times WMCMH clinicians came to a decision regarding hospitalization within 3 hours of request. For consumers requesting emergency hospitalization, the State mandates that 95% of these decisions must be made within 3 hours of the request for hospitalization.  For the 4th Quarter, WMCMH exceeded the State standard for Adults and Children.  This graph shows the percentage of consumers who leave an inpatient facility and are seen by WMCMHS for continued care within 7 days.  For the 1st Quarter, WMCMHS met the State standard for both Adults and Children. |
| This graph shows the percentage of WMCMH consumers who were discharged from an inpatient facility and were seen by WMCMH staff within 7 days of discharge.  For the 4th Quarter, WMCMH was below the State standard for Adults and Children. There were only 3 out of compliance cases, but all were staff scheduling errors. Corrective actions will be implemented to improve performance. |

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| This graph shows the percentage of consumers who leave an inpatient facility and are then readmitted for inpatient services within 30 days. The State standard is less than 15%.  For the 4th Quarter, WMCMH was below (within) the state standard for Adults and Children. |

**SUMMARY/CONCLUSION:**

# Outstanding Performance:

* Adult population: percentage of inpatient screenings done within 3 hours or less
* Child population: percentage of inpatient screenings done within 3 hours or less

Acceptable Performance:

* Percentage of Adult discharges readmitted to inpatient within 30 days
* Percentage of Children’s discharges readmitted to inpatient within 30 days
* Service Entry Assessments – Second Opinions

Below Acceptable Performance:

* Percent of Adults and Children assessed within 14 days
* Percent of Adults and Children starting ongoing care within 14 days
* Percentage of Children seen within 7 days of inpatient discharge
* Percentage of Adults seen within 7 days of inpatient discharge

If you have any questions, please call Michele Condit at 231-843-5464.