

Annual Performance Improvement Report 2020

JAMHI Health & Wellness Quality Improvement Team



The JAMHI Health & Wellness Performance Improvement

- JAMHI's written Quality Improvement Plan describes how we systematically measure, monitor and improve the performance of our organization over time
- Performance indicators and target goals are established for each fiscal year and approved by the JAMHI Board of Directors annually
- Implemented by the Quality Improvement Team with quarterly monitoring reports that inform decision-making and resource allocation
- Demonstrates our accountability to the community for the quality of care provided through the use of public funds and private donations



Domains and Quality of Measures

- JAMHI measures quality in four domains:
 - Effectiveness
 - Efficiency
 - Access
 - Stakeholder input
- The reliability, validity, accuracy and completeness of the data generally improves every year. Footnotes in the report indicate when special caution in interpretation is encouraged.
- For example, while the Client Status Review (CSR) which is used to collect a portion of these indicators generally links the care people receive to the outcomes they report, specific CSR reliability and validity measures for persons served with severe mental illness or cognitive disabilities are not available and that may influence the quality of the information.

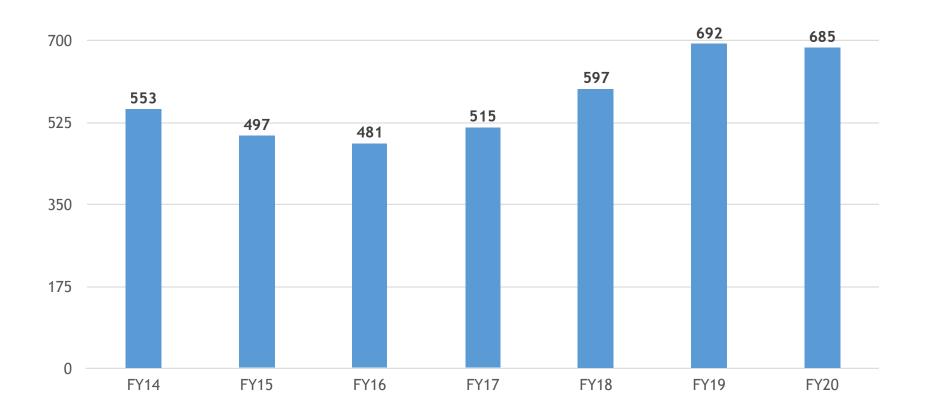


Uniqueness of FY20

- COVID-19 Pandemic Response Begins March.
 - Shift operating model in primary care and behavioral health care to telehealth
 - Set up remote access for employees and clients without telehealth access
 - Develop response protocols for community housing including client quarantine plan
 - Obtain PPE and other supplies
 - Address increased needs of persons served while quickly learning to provide JAMHI services and access to other community services differently. Food Bank (i.e. lost socialization and learning opportunities)
- Expanded Community Housing and Support Services (CHSS)
 - The Pond 9 new community housing units online April 1, 2020 with CHSS
 - Douglas Terrace remodeled to include 5 apartments with CHSS
- Nursing capacity challenges; relied on locum contracts
- Received the Certified Community Behavioral Health (CCBHC) and Assertive Community Treatment (ACT) grants to expand services
- Prepared to become Federally Qualified Health Center Look-Alike

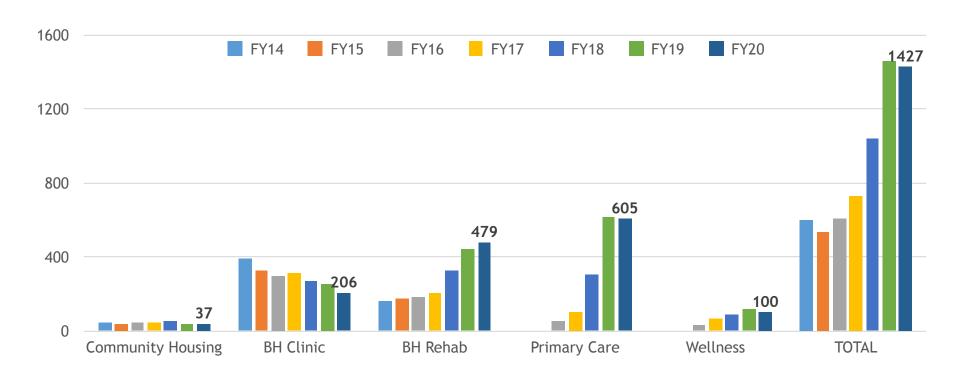


Total Number of People Served in JAMHI Behavioral Health Services





Number of People Served by Service Line

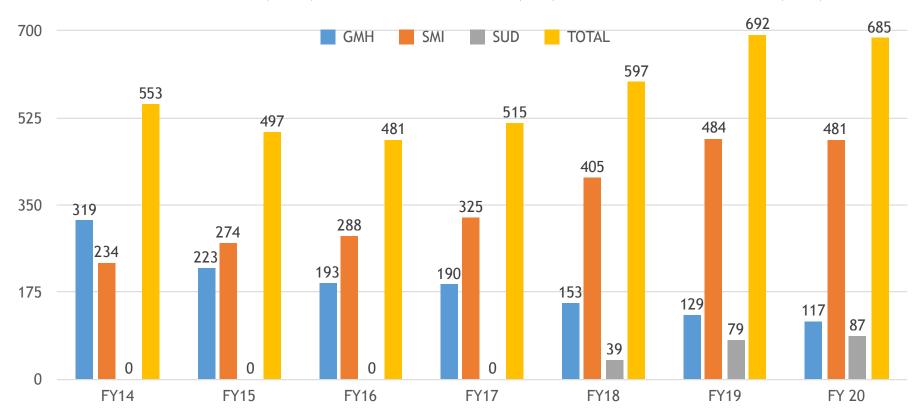


• BH rehab and clinic are not duplicated; others may include duplicated counts as people can be enrolled in multiple service lines



Number of People Served by Population

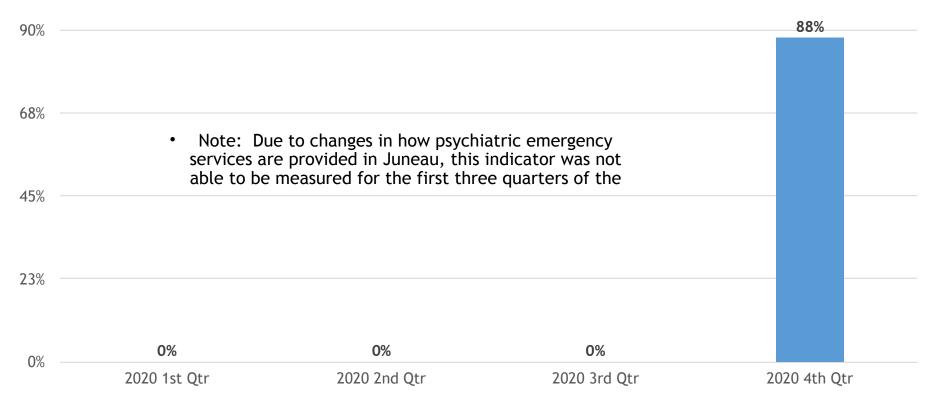
General Mental Health (GMH) Severe Mental Illness (SMI) Substance Use Disorder (SUD)



- •The SUD column represents people with SUD only
- •In 2015 there were adjustments made to SMI criteria based on guidance from DBH

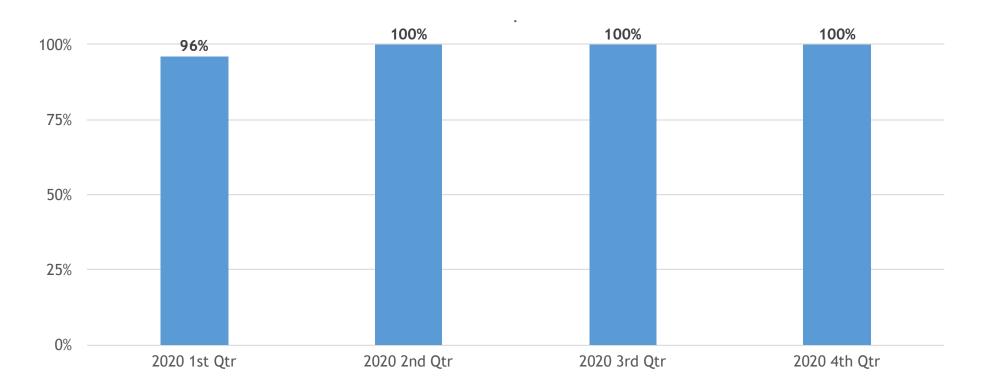


The percent of persons served receiving psychiatric emergency services who were diverted from inpatient psychiatric hospitalization



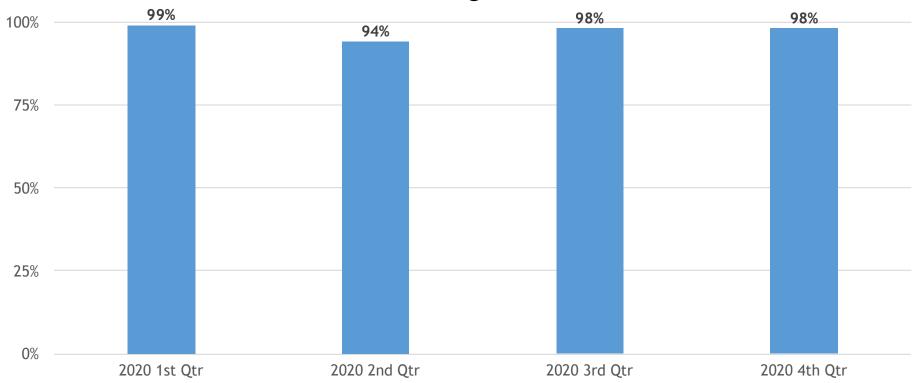


Effectiveness: The percent of people served in community housing who are not readmitted to an inpatient psychiatric hospital over the previous 3 months



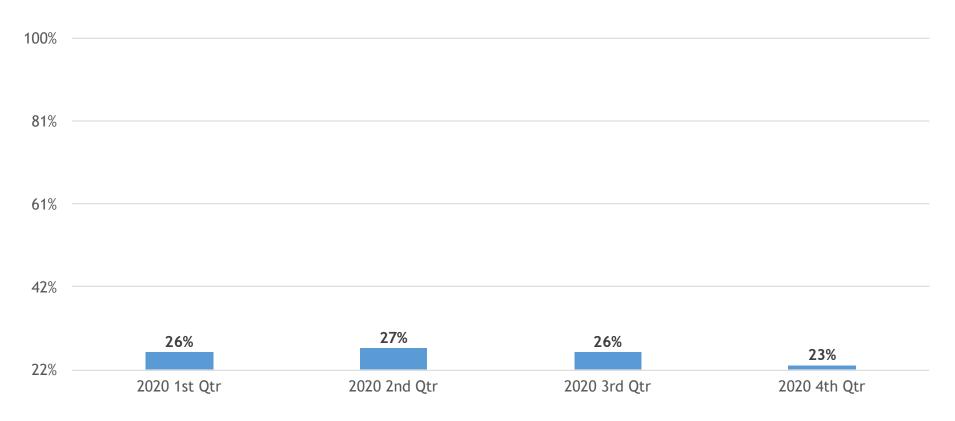


Effectiveness: The percent of all people served by JAMHI who report thoughts of suicide or hurting themselves 15 days or less of the last 30 days



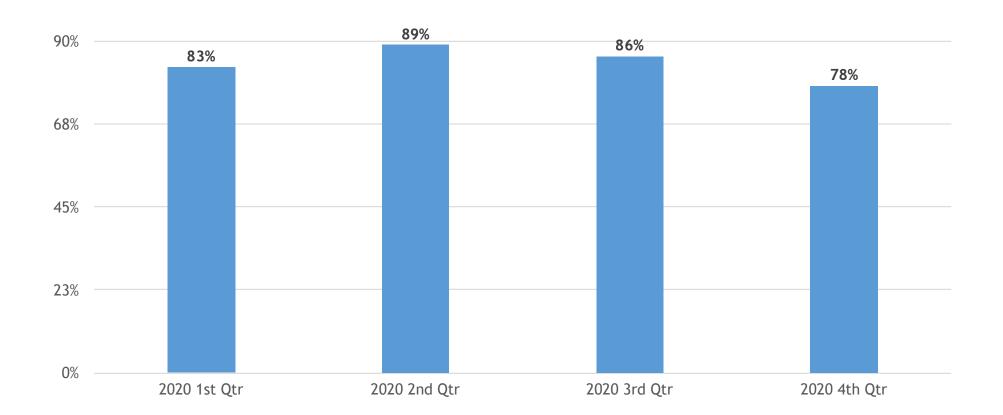


Effectiveness: The percent of people receiving case management services who report being employed part or full-time



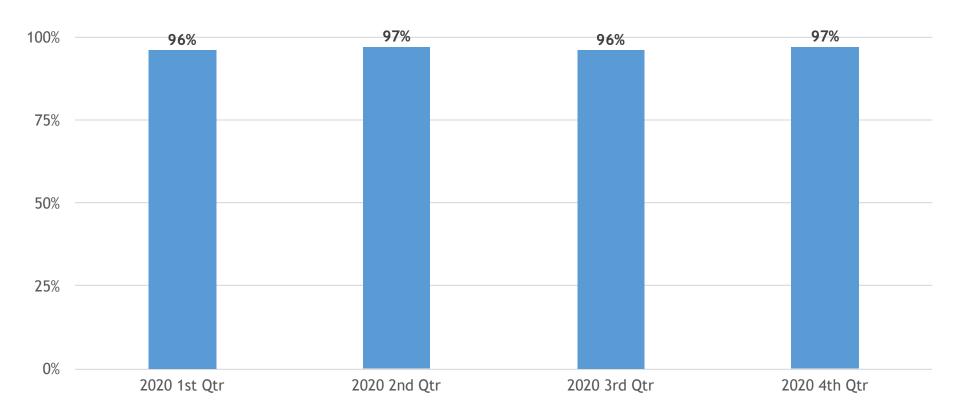
Effectiveness: The percent of people receiving outpatient therapy services who report being engaged in productive activities 21 or more hours per week on average over the past 30 days Performance Target: 60%





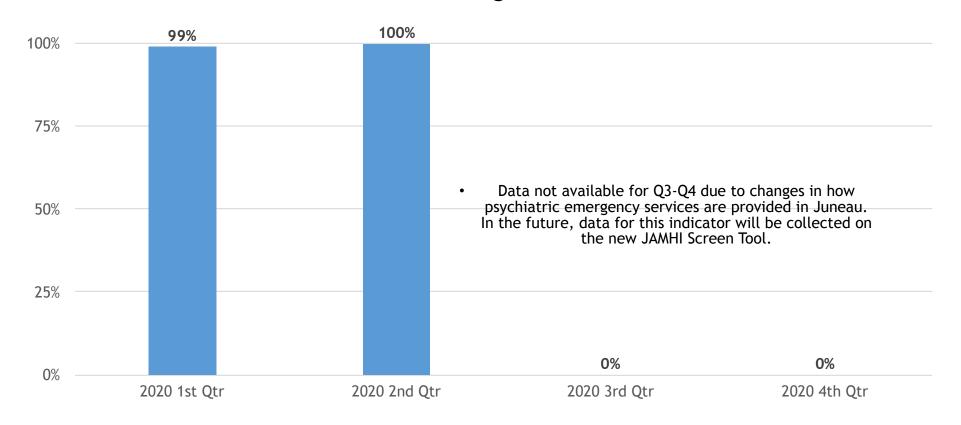


Effectiveness: The percent of people receiving case management services who report no arrests over the past 30 days



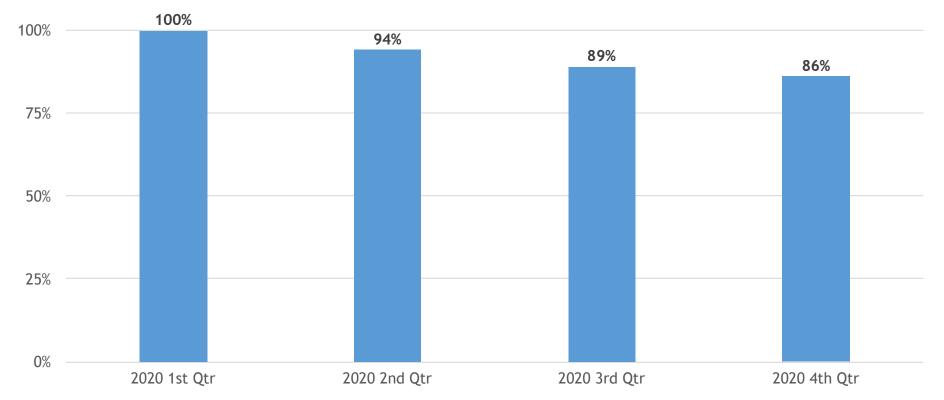


Effectiveness: The percent of people receiving case management services who are not admitted to an inpatient psychiatric hospital Performance Target: 90%



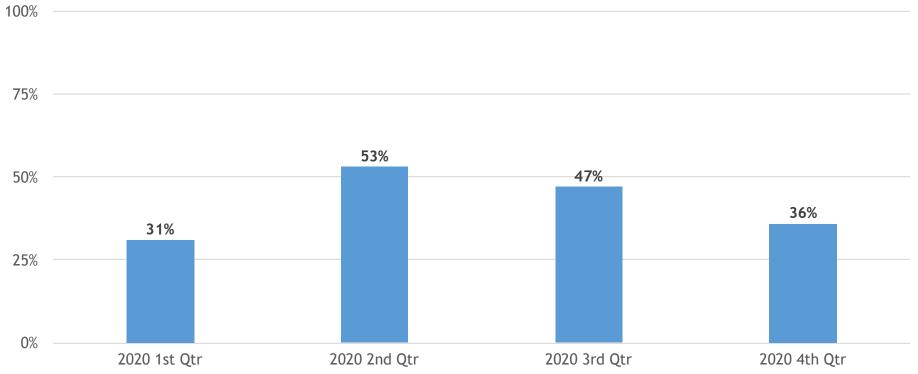


Effectiveness: The percent of people living in community housing who report having 15 or fewer days when physical or mental health kept them from doing usual activities



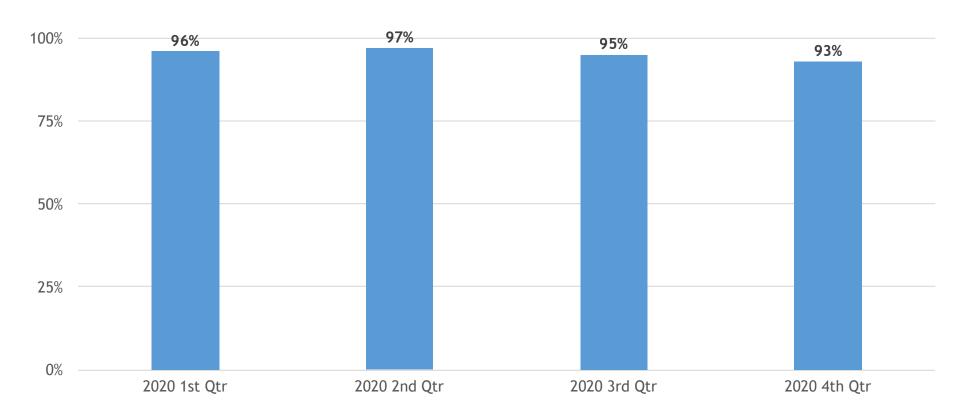


Effectiveness: The percent of people living in community housing who report engaging in productive activities 21 or more hours per week over the past 30 days



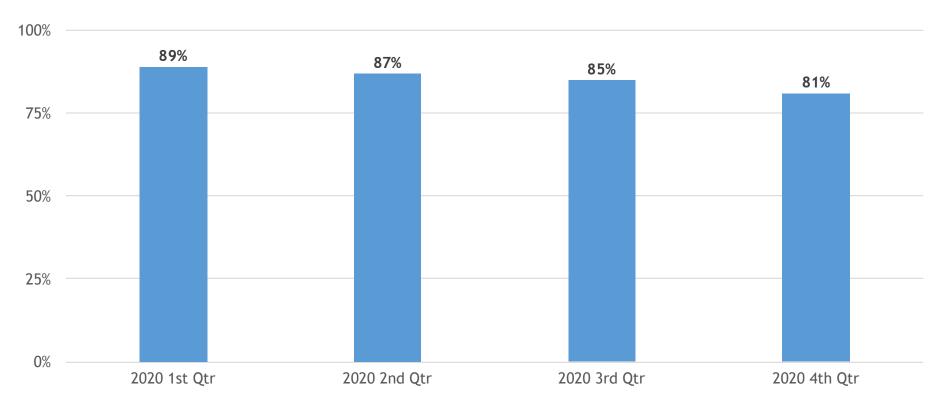


Access: The percent of people served who report having a primary care provider at time of treatment plan review Performance Target: 90%



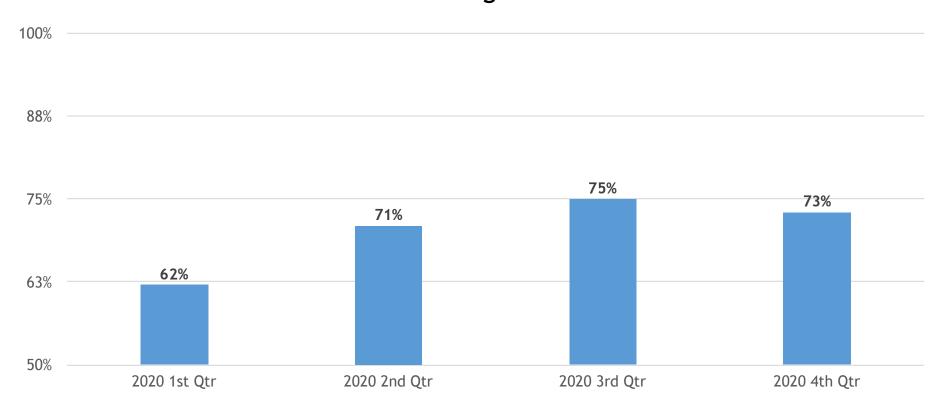


Access: The percent of people receiving outpatient therapy who report having seen their primary care provider in the past 12 months





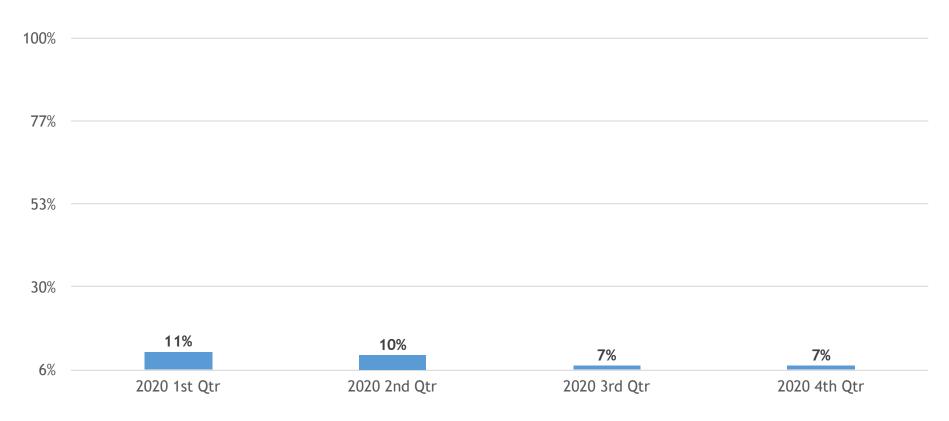
Access: The percent of people who are offered access to ongoing services within 7 business days of completed intake Performance Target: 80%





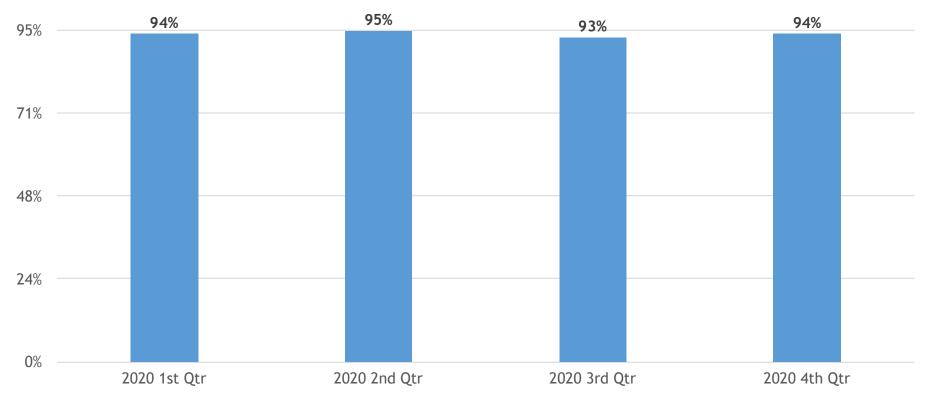
Access: The percent of people who have received a wellness service

Performance Target: None set; collecting baseline



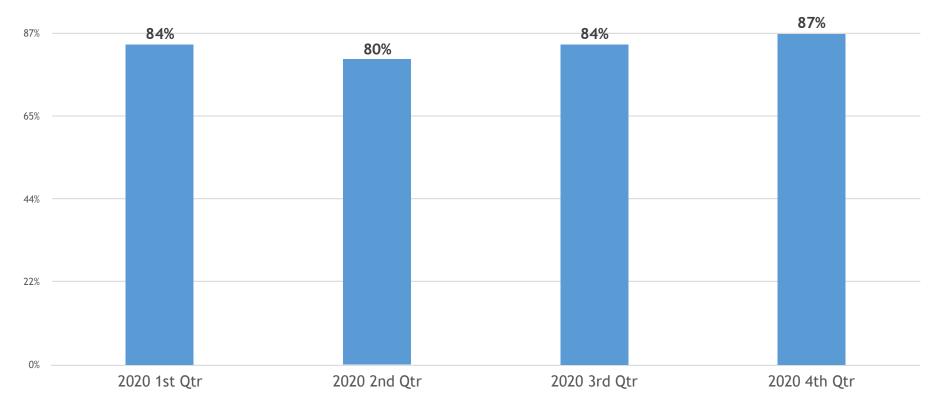


Input: The percent of people receiving outpatient therapy services who report being "satisfied" to "delighted" that they were able to get all the services they needed



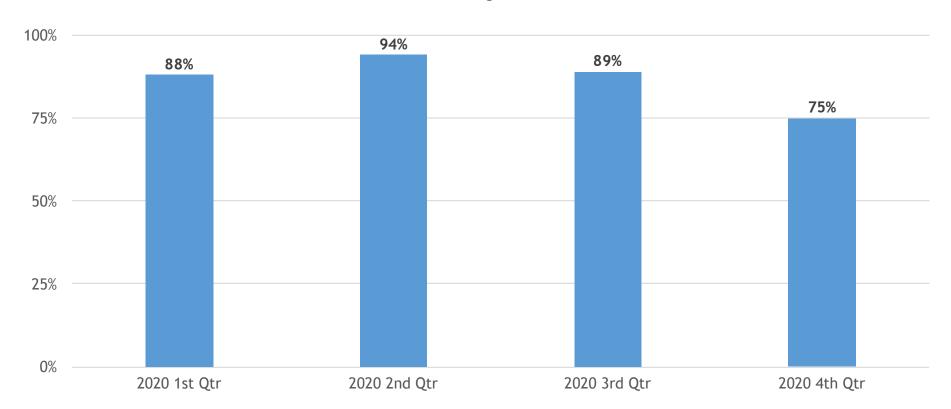


Input: The percent of people receiving case management services who report being "satisfied" to "delighted" that they were able to get all the services they needed



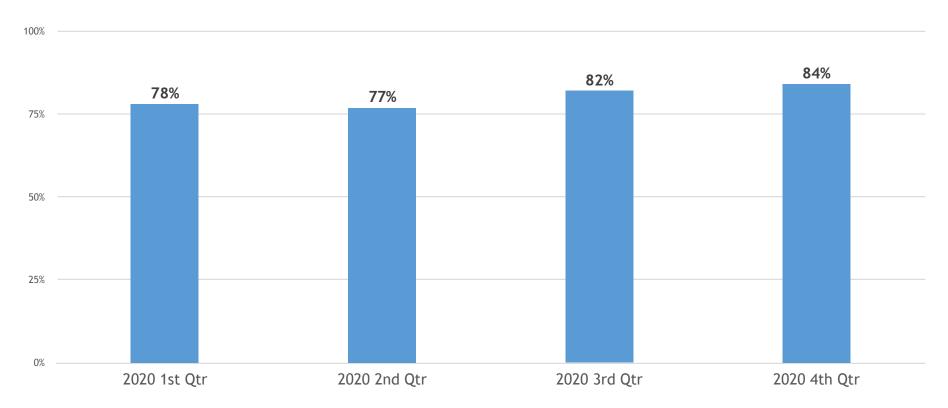


Input: The percent of people in community housing who report being "satisfied" to "delighted" that they were able to get all the services they needed



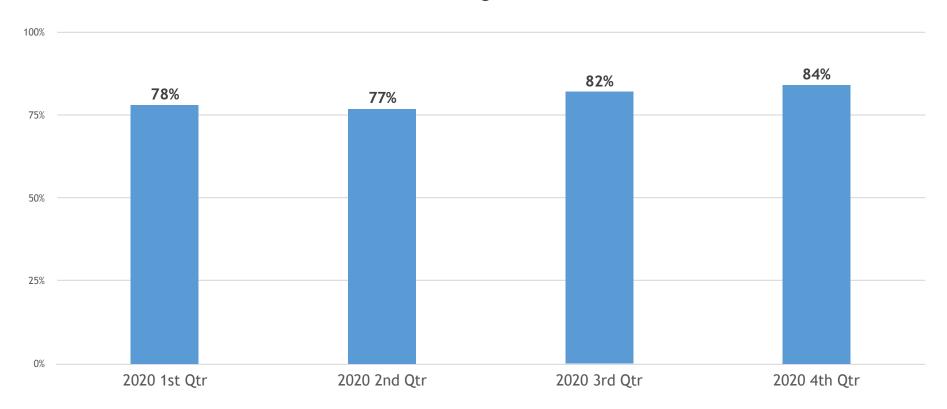


Efficiency: The percent of people receiving outpatient treatment services who attend their scheduled appointments or provide timely notice of cancellation



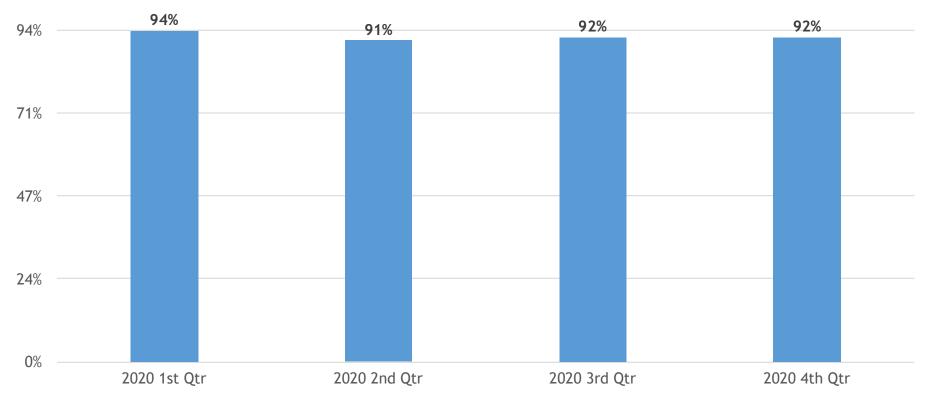


Efficiency: The percent of people receiving primary care services who attend their scheduled appointments or provide timely notice of cancellation



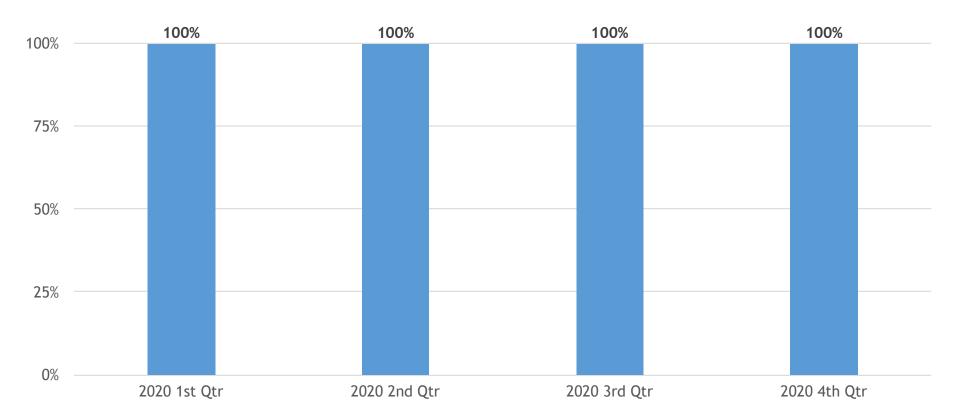


Efficiency: The percent of people receiving wellness services who attend their scheduled appointments or provide timely notice of cancellation





Efficiency: The percent of initial behavioral health assessments signed within 72 hours





Thank You for Your Role In Supporting People Receiving JAMHI Services!

Please contact Karen Forrest, Chief Performance Improvement and Compliance Officer, for additional information, at 907-463-3303