



Annual Performance Improvement Report 2021

JAMHI Health & Wellness
Quality Improvement Team

The JAMHI Health & Wellness Performance Improvement

- JAMHI's written performance 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 for the quality of care provided through the use of public funds and private donations

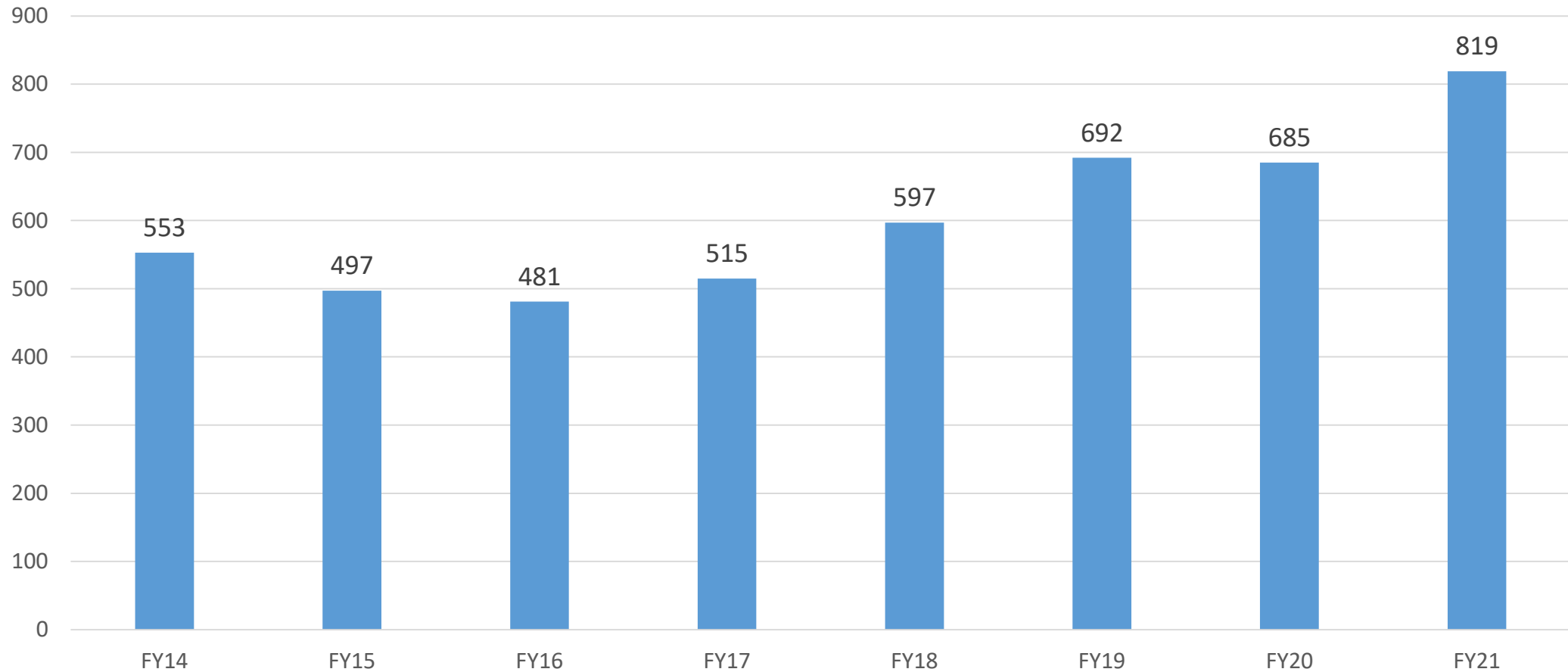
Domains and Quality of Measures

- JAMHI measures quality indicators for service delivery across four domains:
 - Effectiveness
 - Efficiency
 - Access
 - Stakeholder input
- Also measures quality indicators for business functions
- 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, we use the JAMHI screening tool (JST) to collect a portion of these indicators and while it generally links the care people receive to the outcomes they report, specific reliability and validity measures are not available and that may influence the quality of the information.

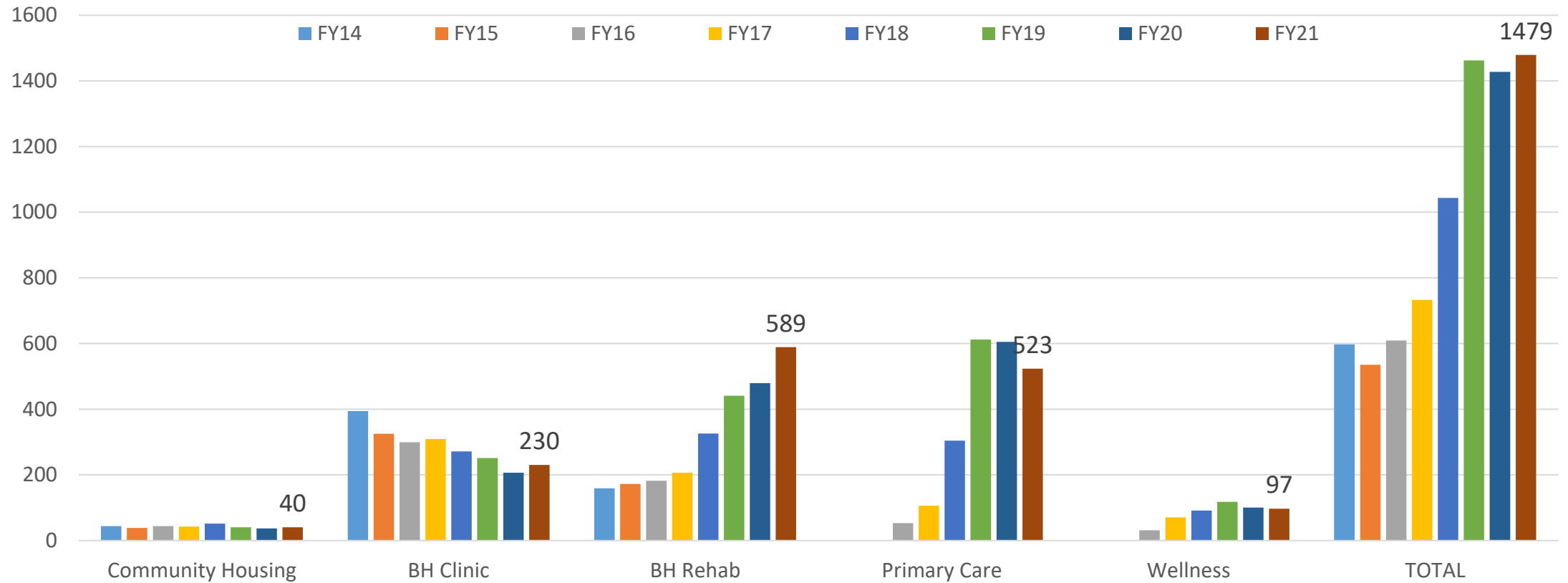
FY21 Highlights

- Continued COVID-19 pandemic response throughout the year
- First full year performing as a Certified Community Behavioral Health Clinic (CCBHC)
- Expanded to providing services across the lifespan including for the first time: children, adolescents and families
- First year providing Assertive Community Treatment (ACT) Services for adults with severe mental illness
- First year performing as a Federally Qualified Health Center (FQHC) Look-Alike
- Preparing to initiation Alaska 1115 waiver services in response to statewide behavioral health system redesign

Total Number of People Served in JAMHI Behavioral Health Services



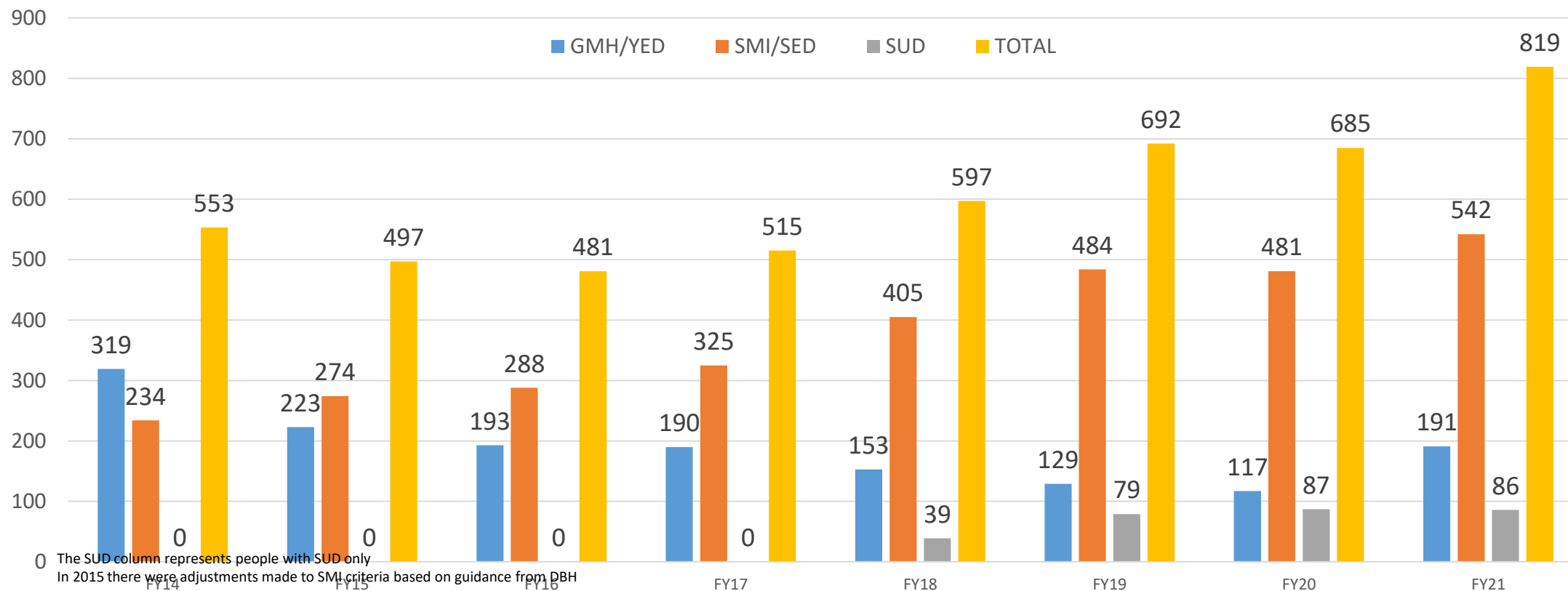
Number of People Served by Service Line



- 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/Youth Emotional Disturbance (GMH/YED)
 Severe Mental Illness/Severe Emotional Disturbance (SMI/SED)
 Substance Use Disorder (SUD)

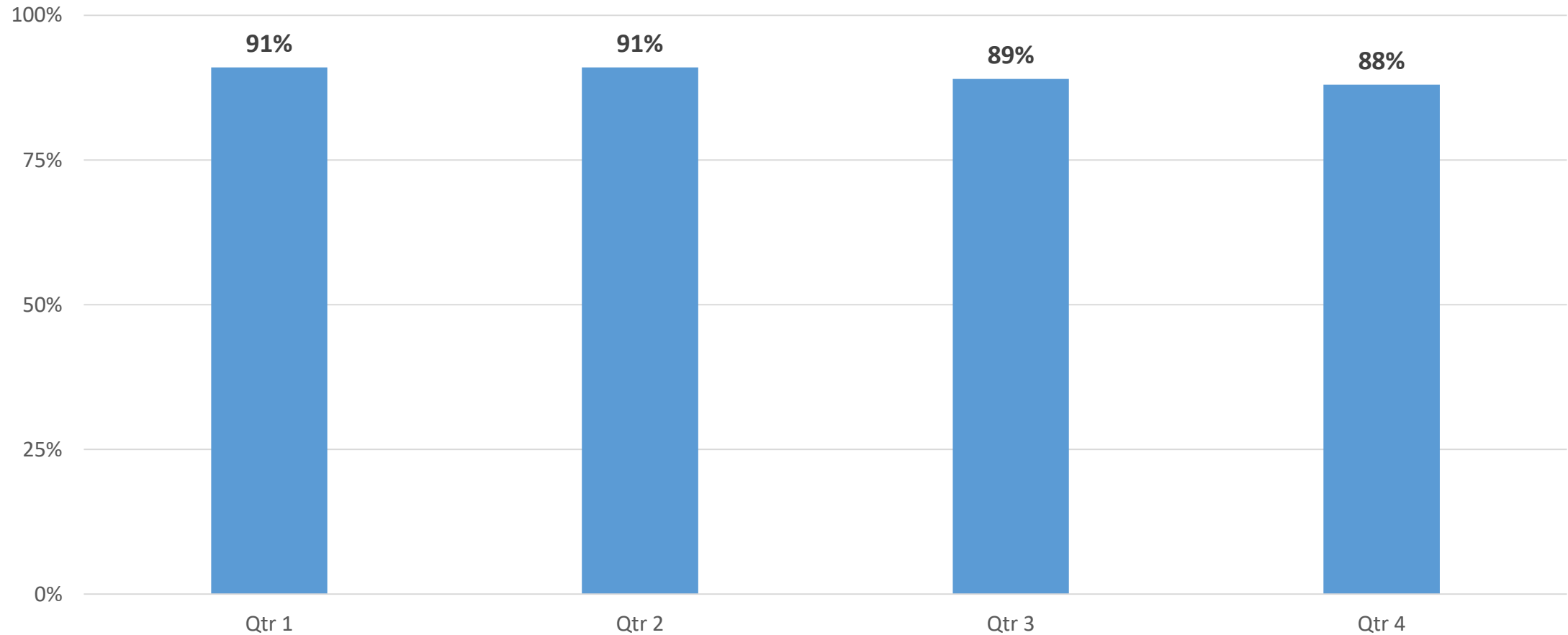


Service Effectiveness Delivery Indicators

This section of performance indicators describe the results achieved with the people we served

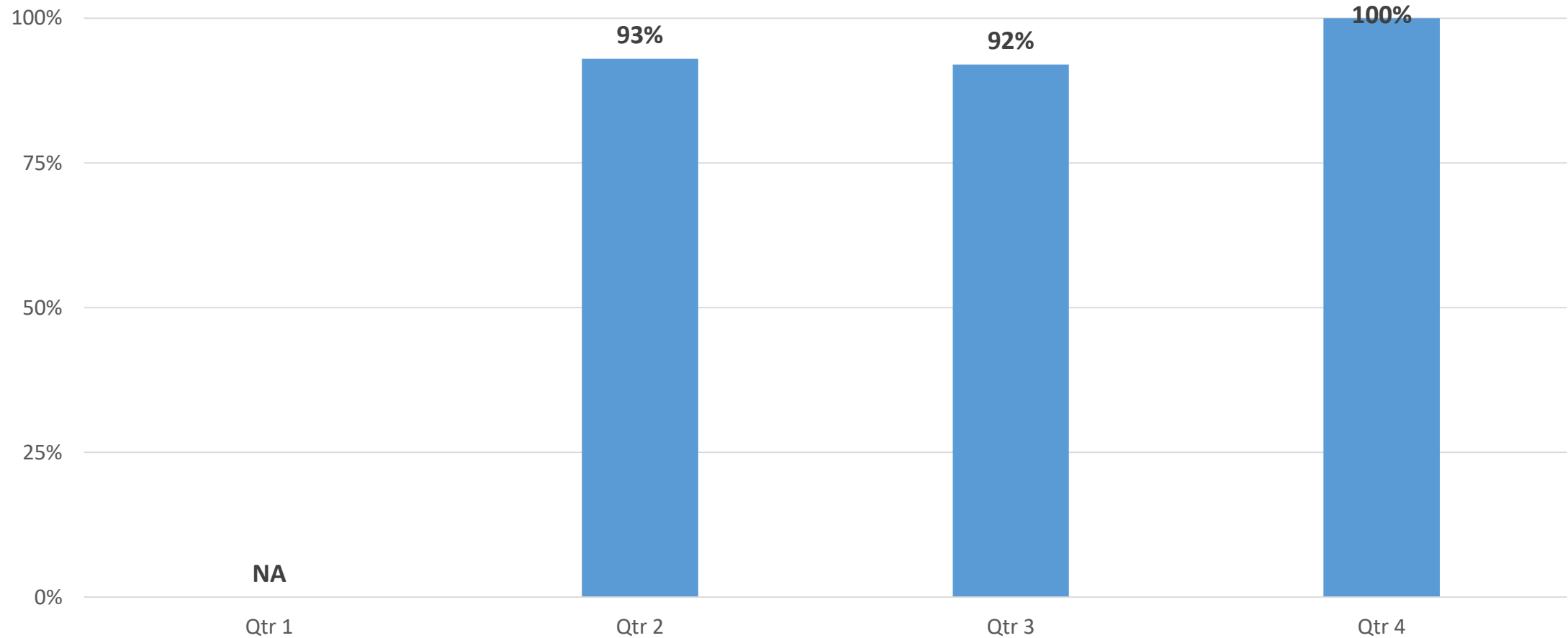
The percent of persons served receiving psychiatric emergency services who are diverted from inpatient psychiatric hospitalization

Target Goal: 65%



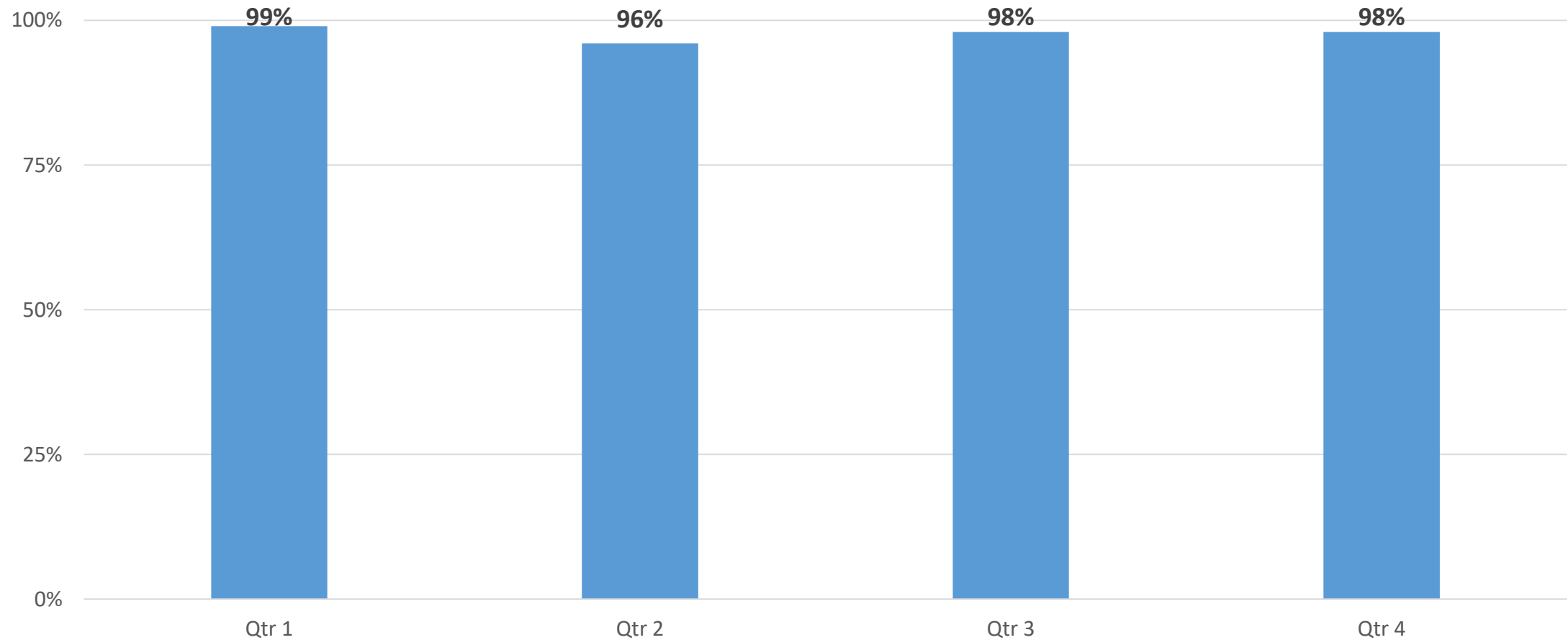
The percent of people in community housing who are not readmitted to an inpatient psychiatric hospital over the previous 90 days

Target Goal: 80%



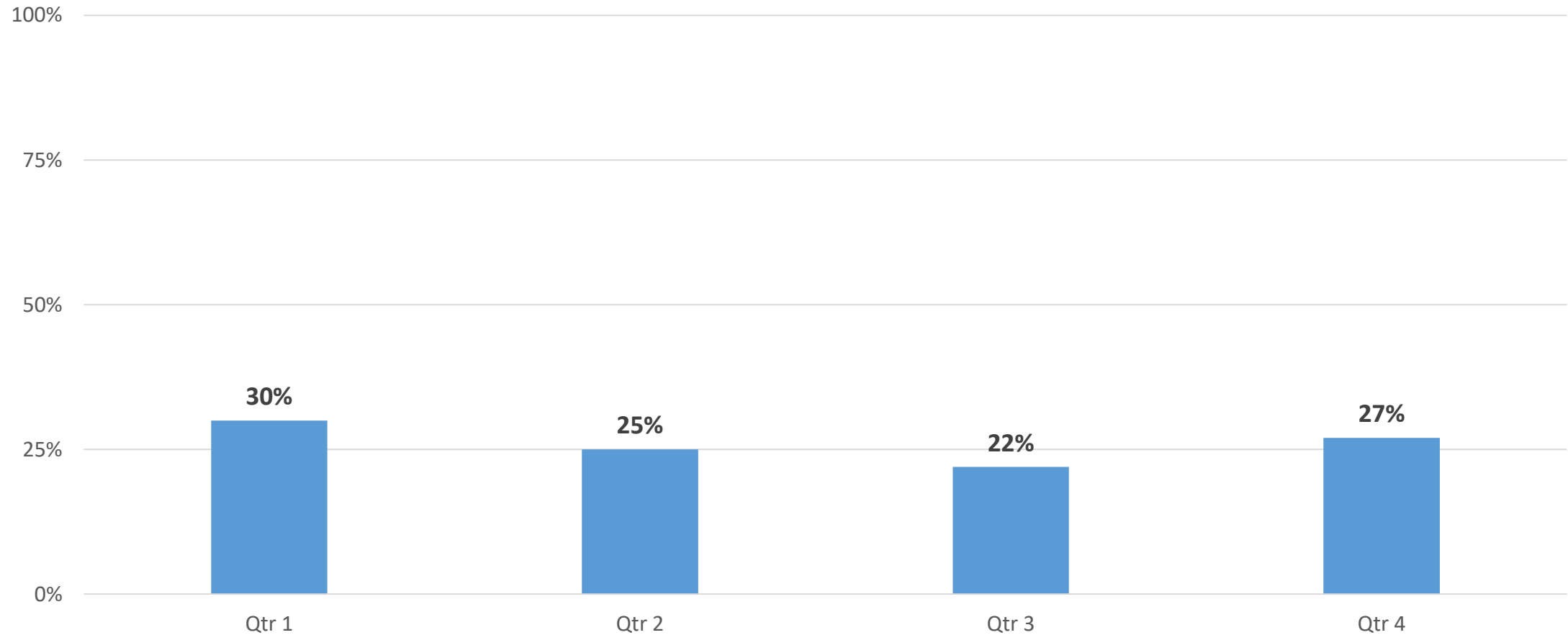
The percent of all people served who report thoughts of suicide or hurting themselves 15 days or less of the last 30

Target Goal: 90%



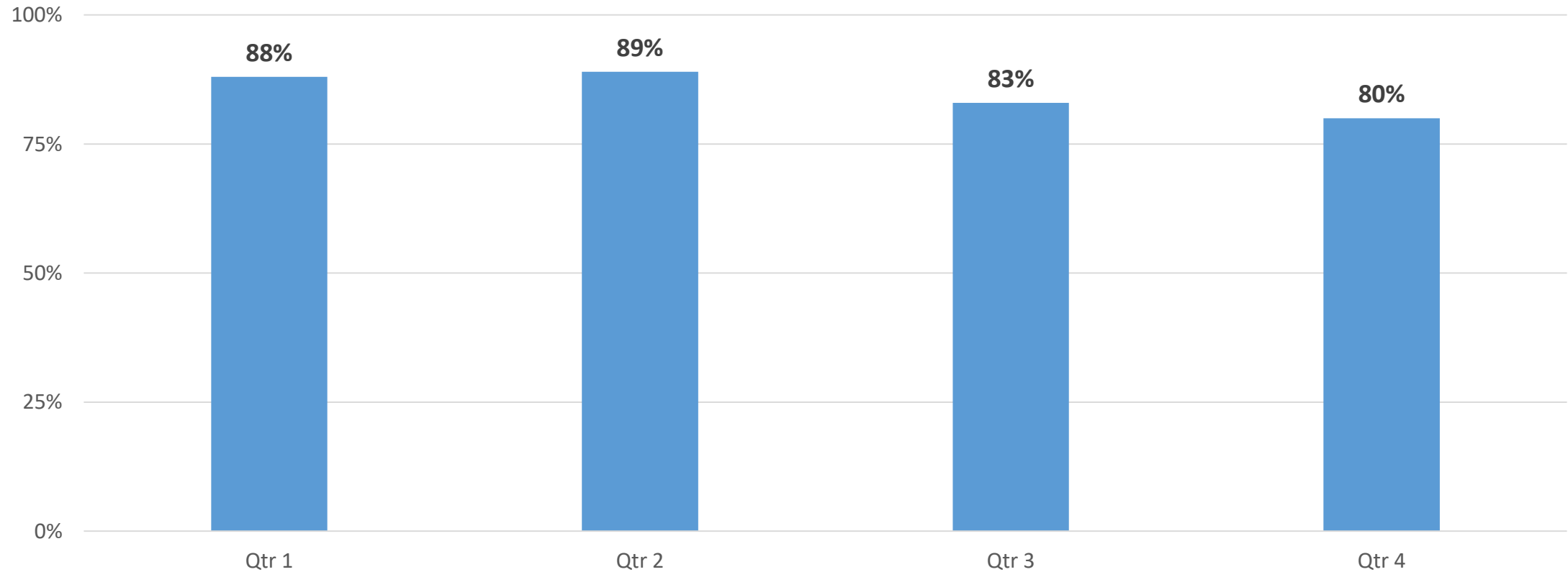
The percent of people receiving case management services who report being employed part or full-time

Target Goal: 25%



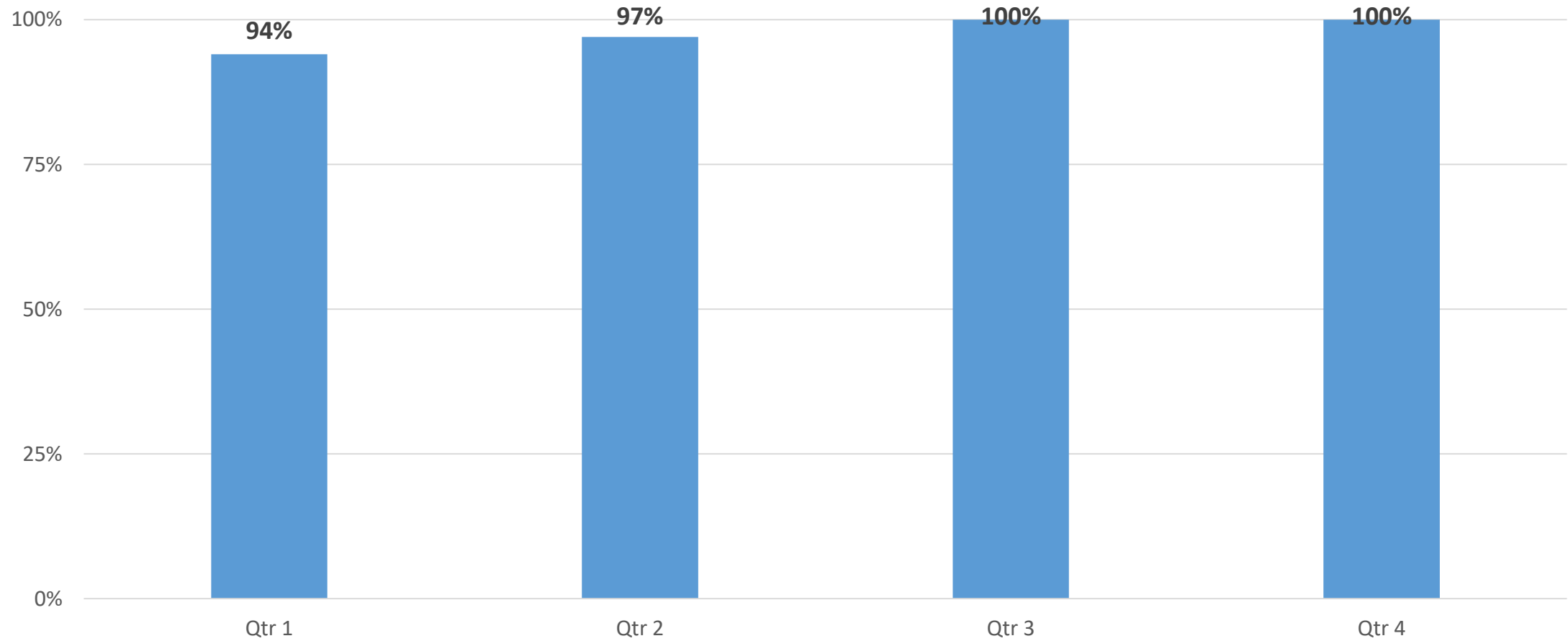
The percent of people receiving outpatient therapy services who had 10 days or less that poor physical and mental health kept them from doing their usual activities such as taking care of themselves, working or recreating

Performance Target: 60%



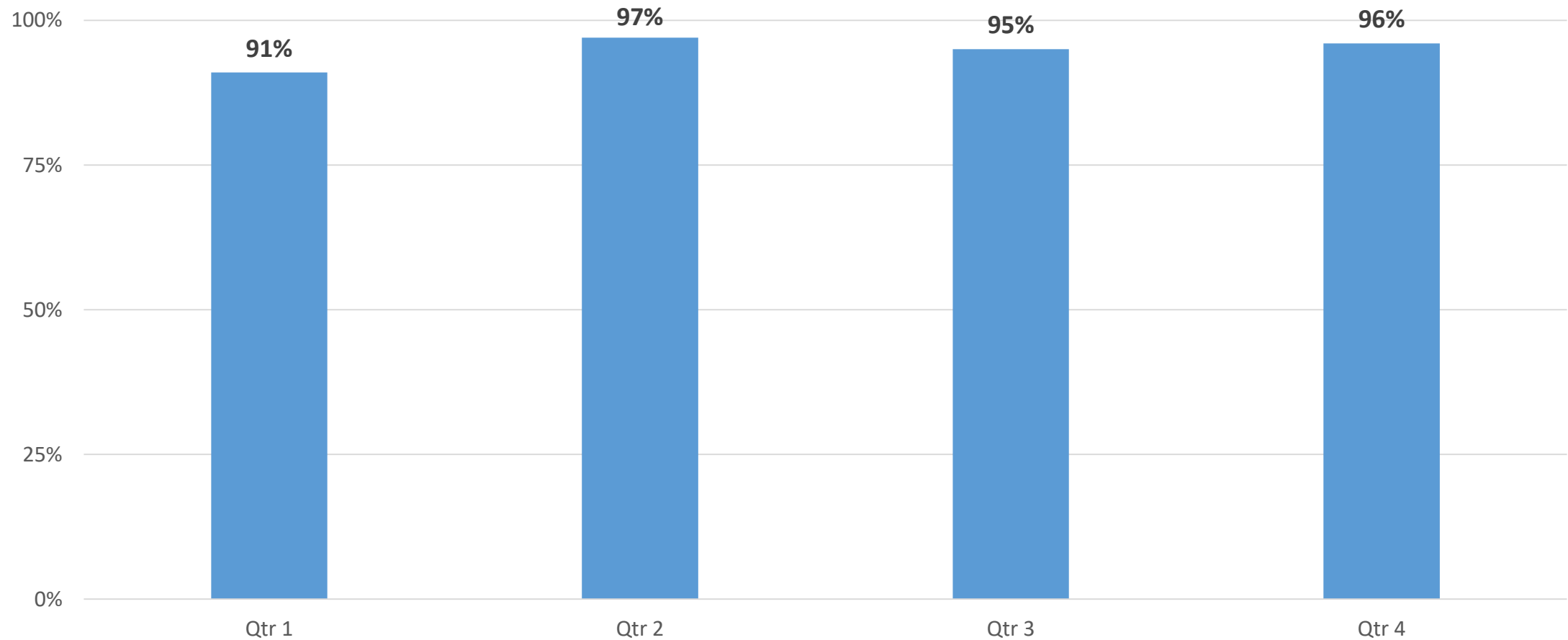
The percent of people receiving case management services who report no arrests over the past 30 days

Target Goal: 85%

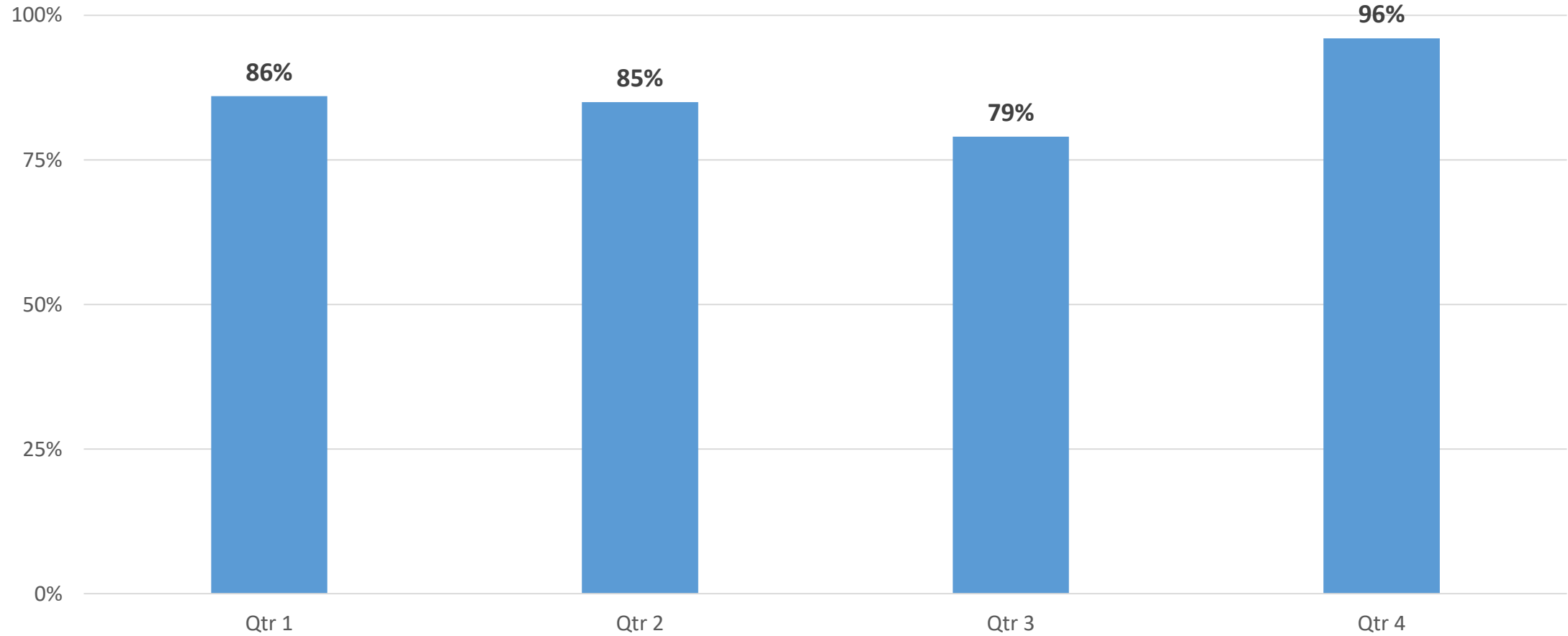


The percent of people receiving case management services who are not admitted to an inpatient psychiatric hospital over the previous 90 days

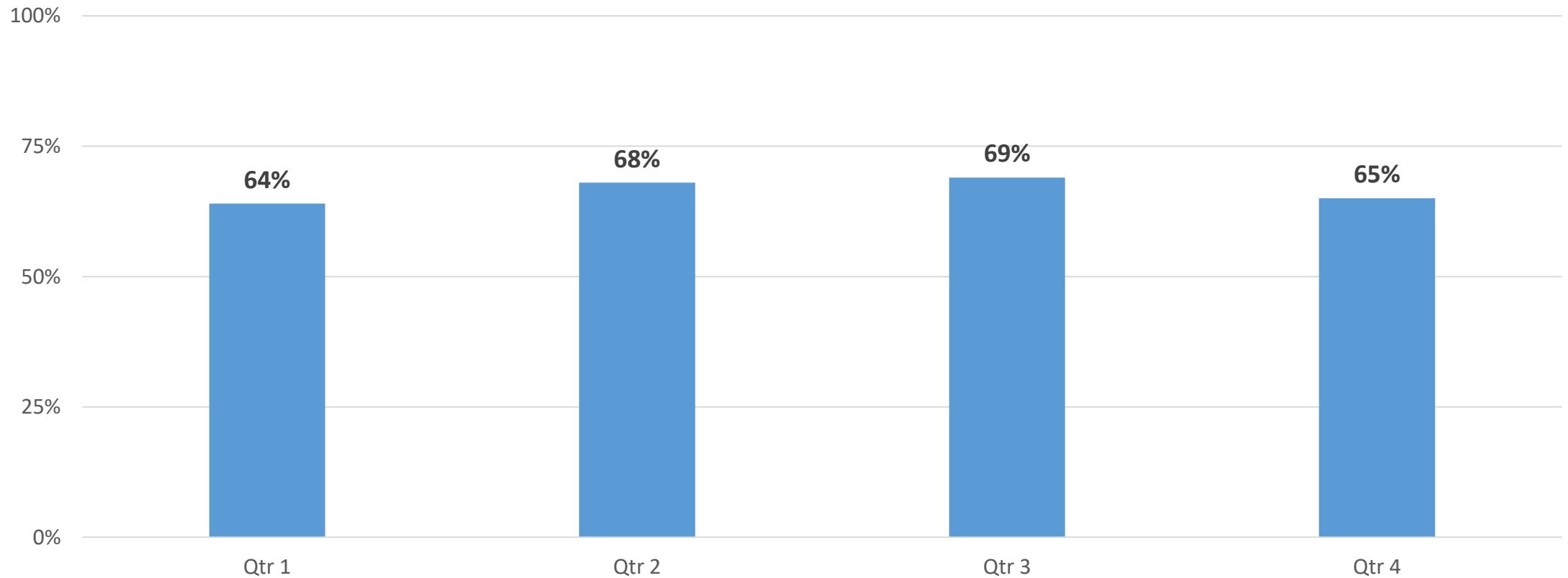
Target Goal: 90%



The percent of people living in community housing who had 10 days or less that poor physical and mental health kept them from doing their usual activities such as taking care of themselves, working or recreating
Target Goal: 50%



The percent of people receiving wellness services who had 10 days or less that poor physical and mental health kept them from doing their usual activities such as taking care of themselves, working or recreating
Target Goal: 75%

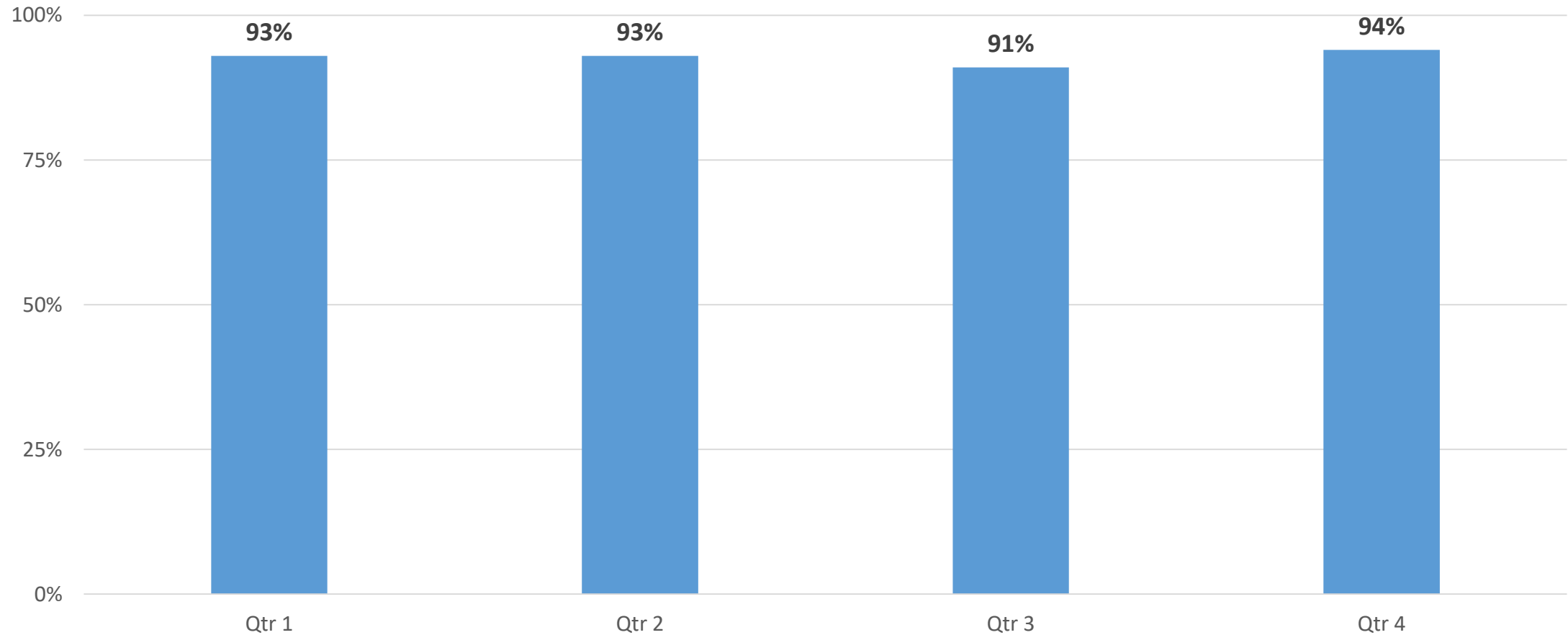


Access to Services Indicators

This section of performance indicators describe how the people we served accessed needed services

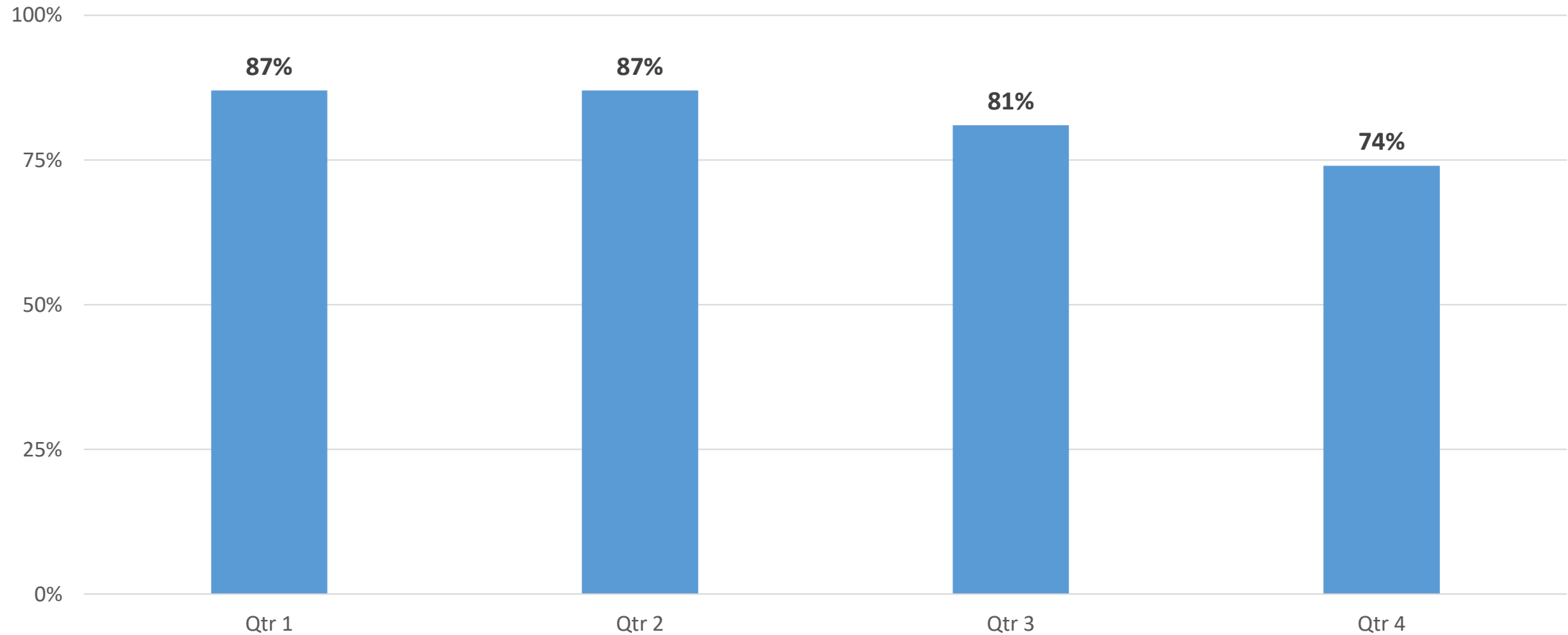
The percent of all people served who report having a primary care provider at time of treatment plan review

Target Goal: 90%



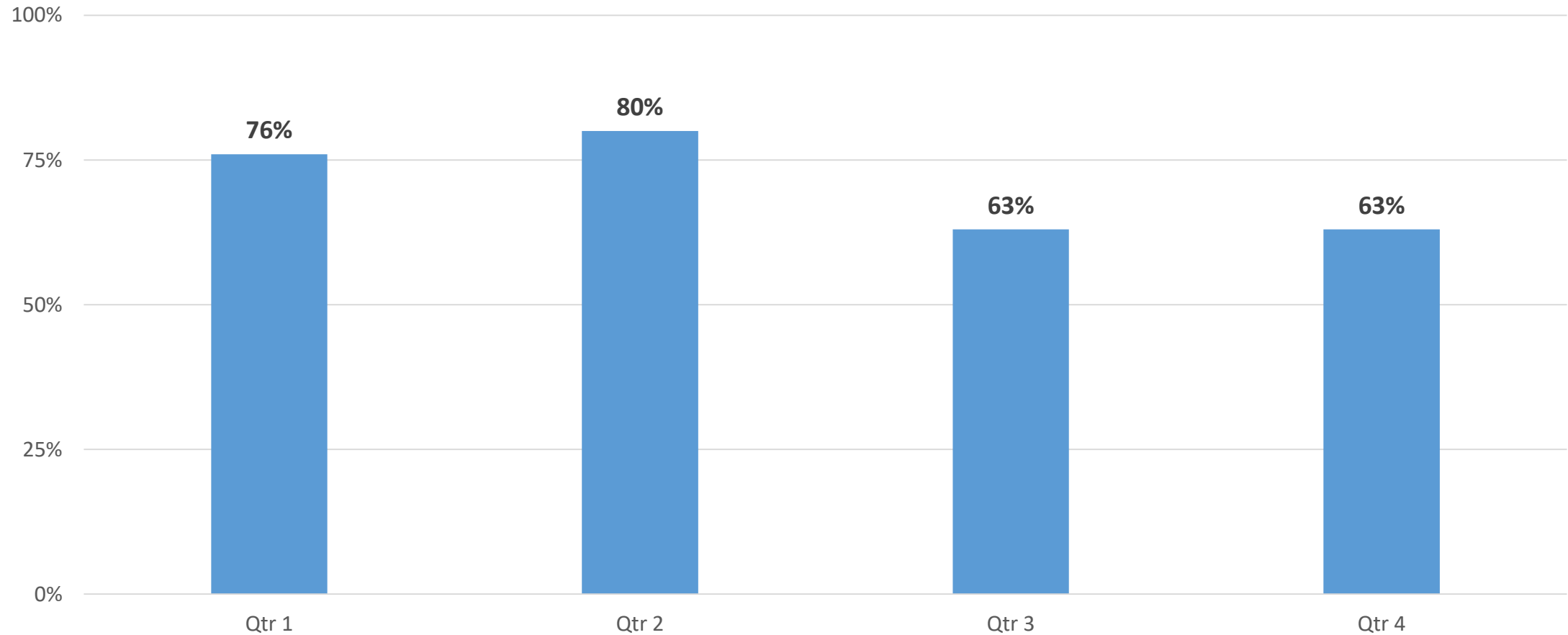
The percent of people receiving outpatient therapy who report having seen their primary care provider in the past 12 months

Target Goal: 85%



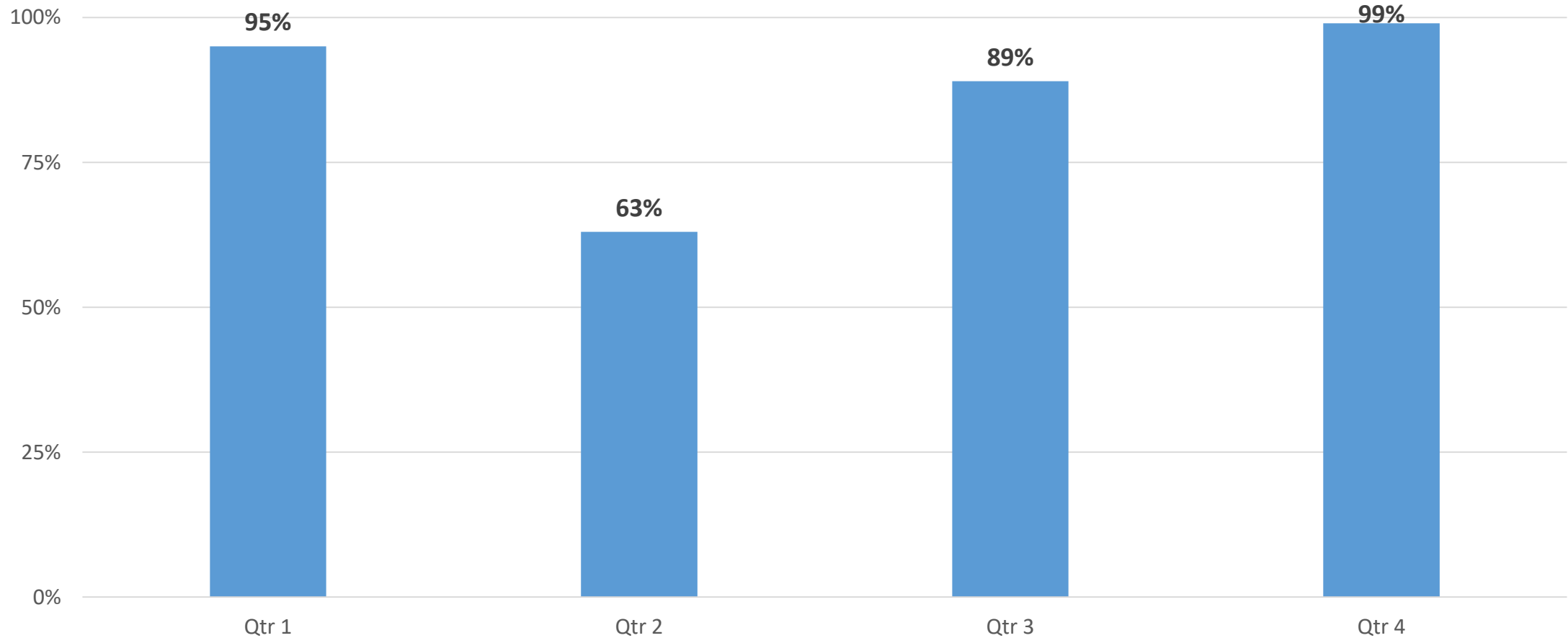
The percent of people who are offered access to ongoing services within 7 business days of completed intake

Target Goal: 80%



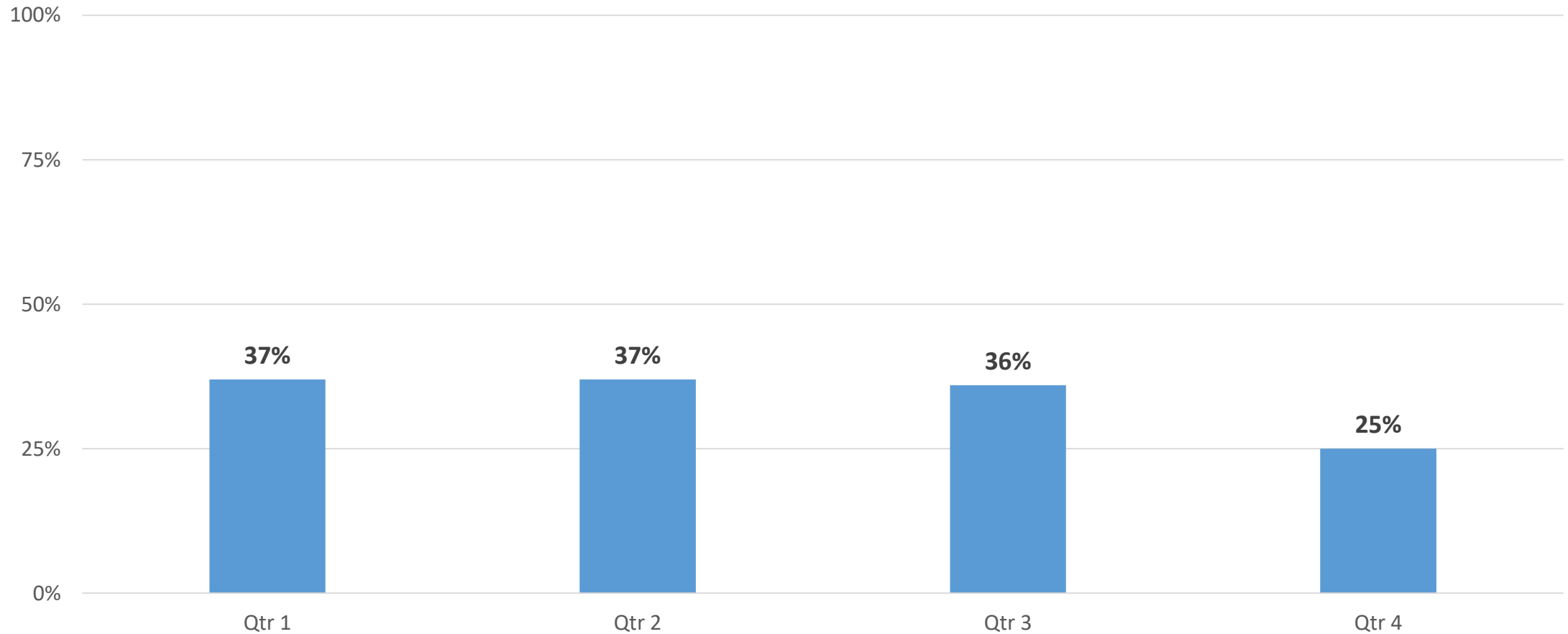
The percent of emergency service contacts responded to within 15 minutes of the emergency services clinician receiving notification by page/phone

Target Goal 80%



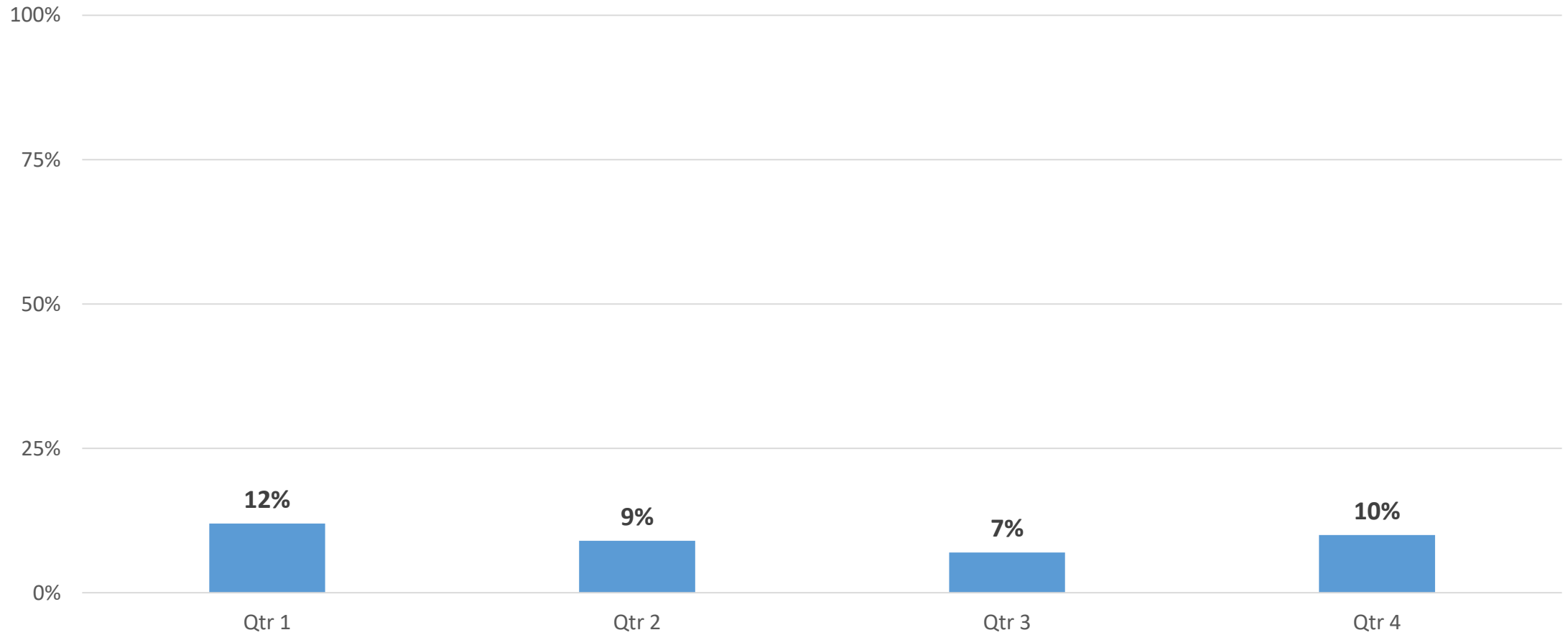
The percent of people who received JAMHI BH services who also received JAMHI primary care services in the past year

Target Goal: 50%



The percent of people who received a wellness service during the quarter

Target Goal: 12%

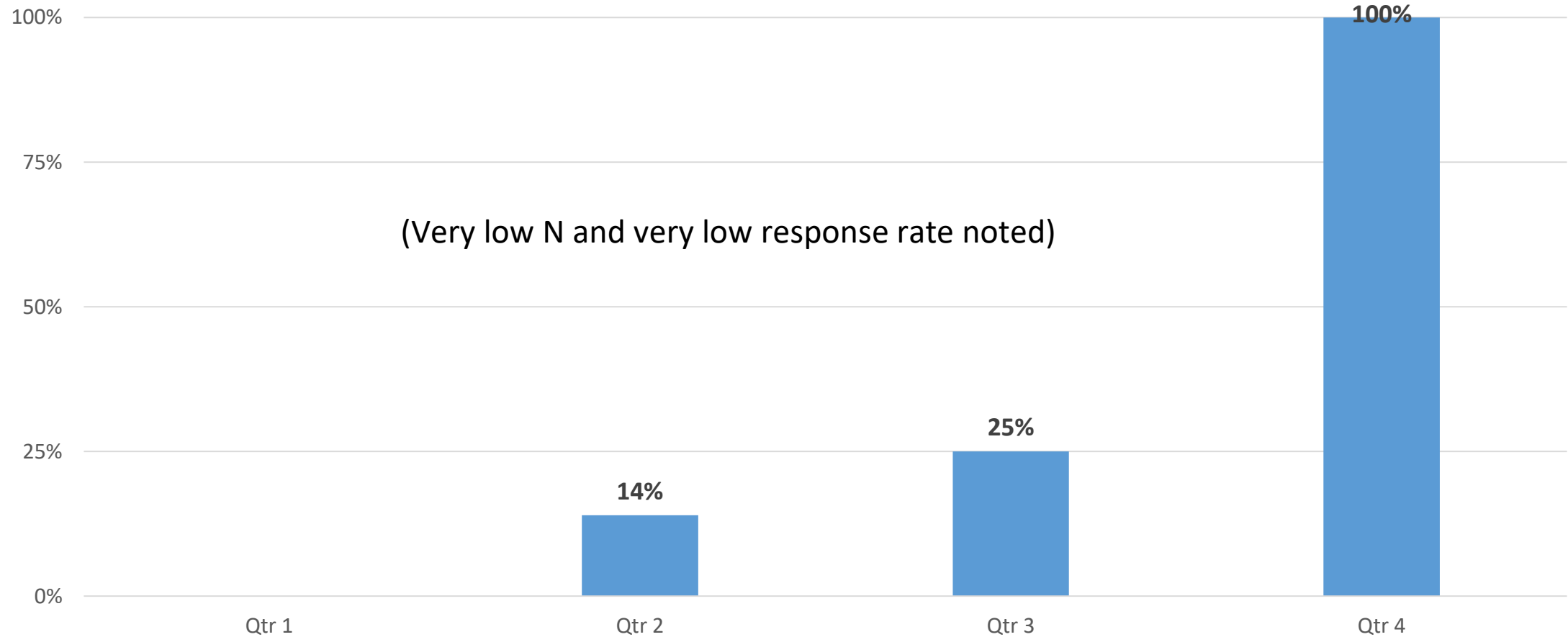


Service Delivery Stakeholder Input Indicators

This section of performance indicators describe the experience of receiving services other feedback from the persons served.

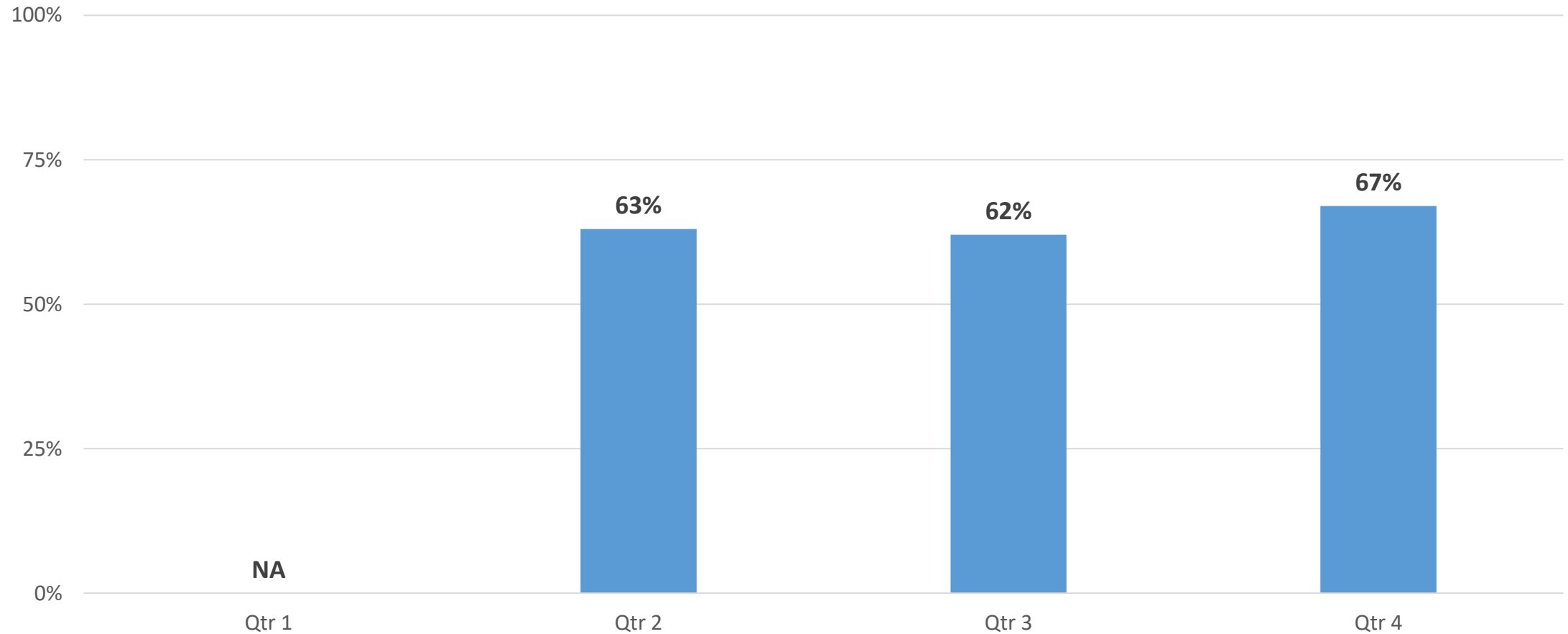
The percent of people who contacted an emergency services clinician who found it helpful

Target Goal: 80%



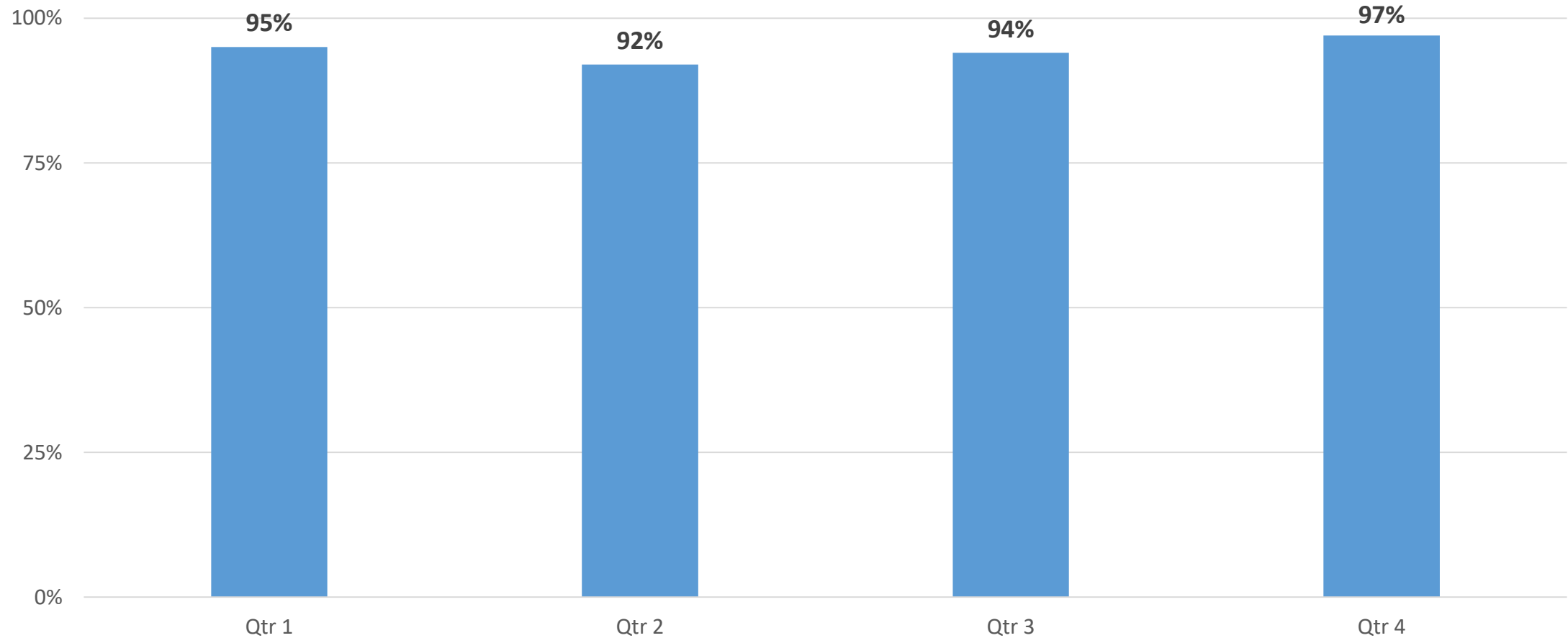
The percent of people receiving outpatient therapy services who feel they belong in their community

Target Goal: 80%



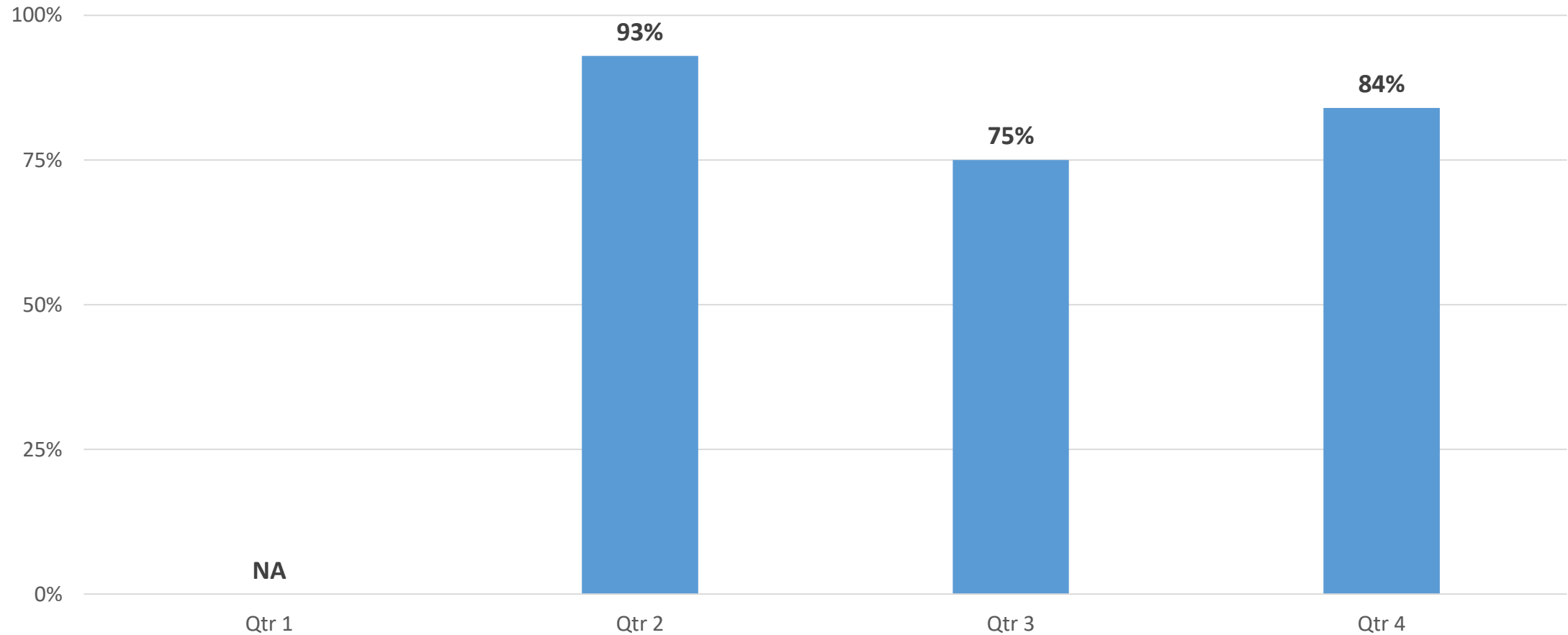
The percent of people receiving case management services who felt they were treated with respect

Target Goal: 80%



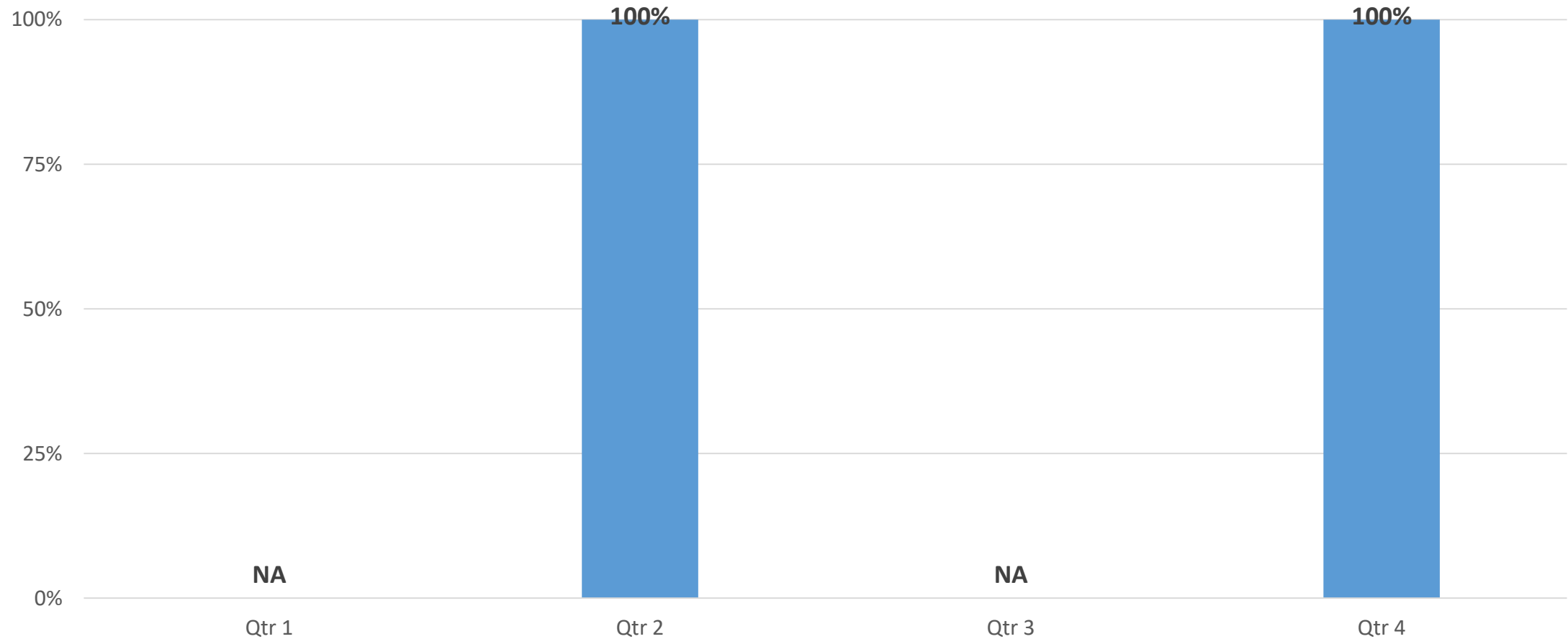
The percent of people in community housing who feel they belong in their community

Target Goal: 80%



The percent of people receiving primary care services who report overall satisfaction with Midtown Clinic services and facility as "very good" or "excellent"

Target Goal: 100%

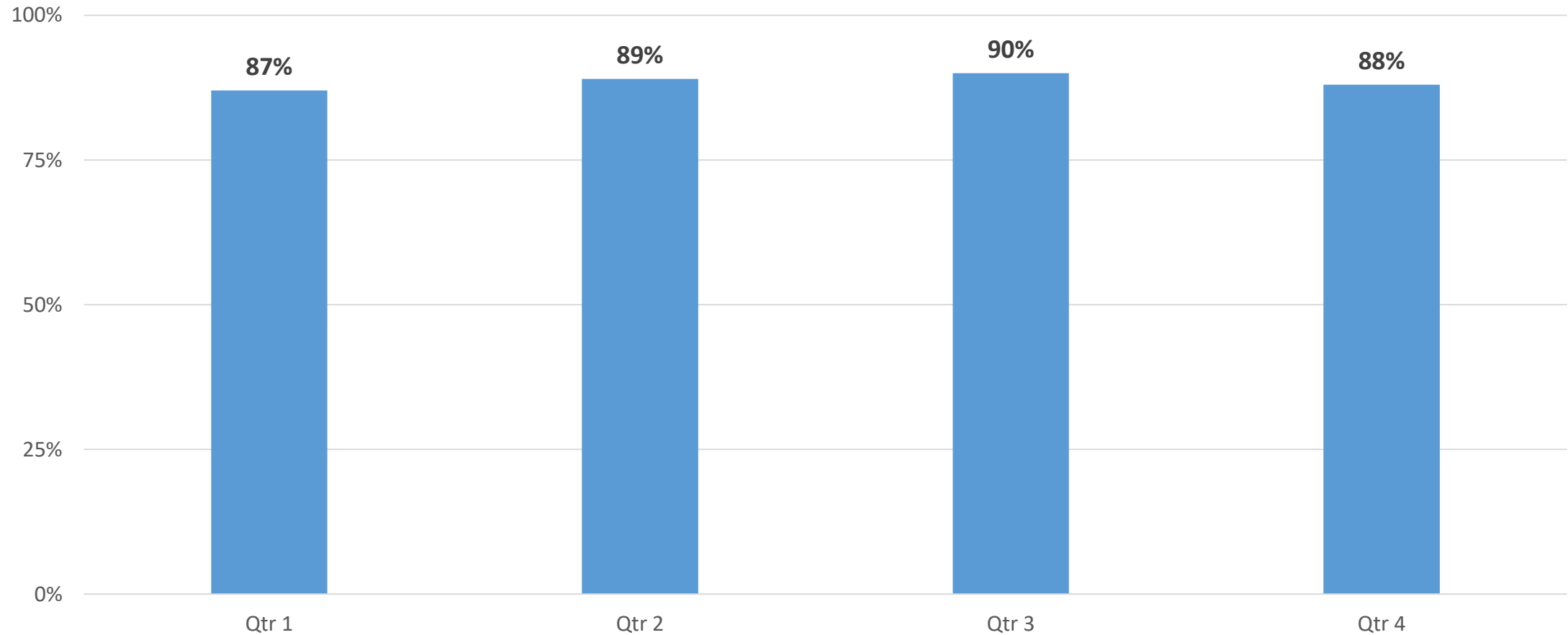


Efficiency of Service Delivery Indicators

This section of performance indicators describe the resources used to achieve results for the people we served.

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

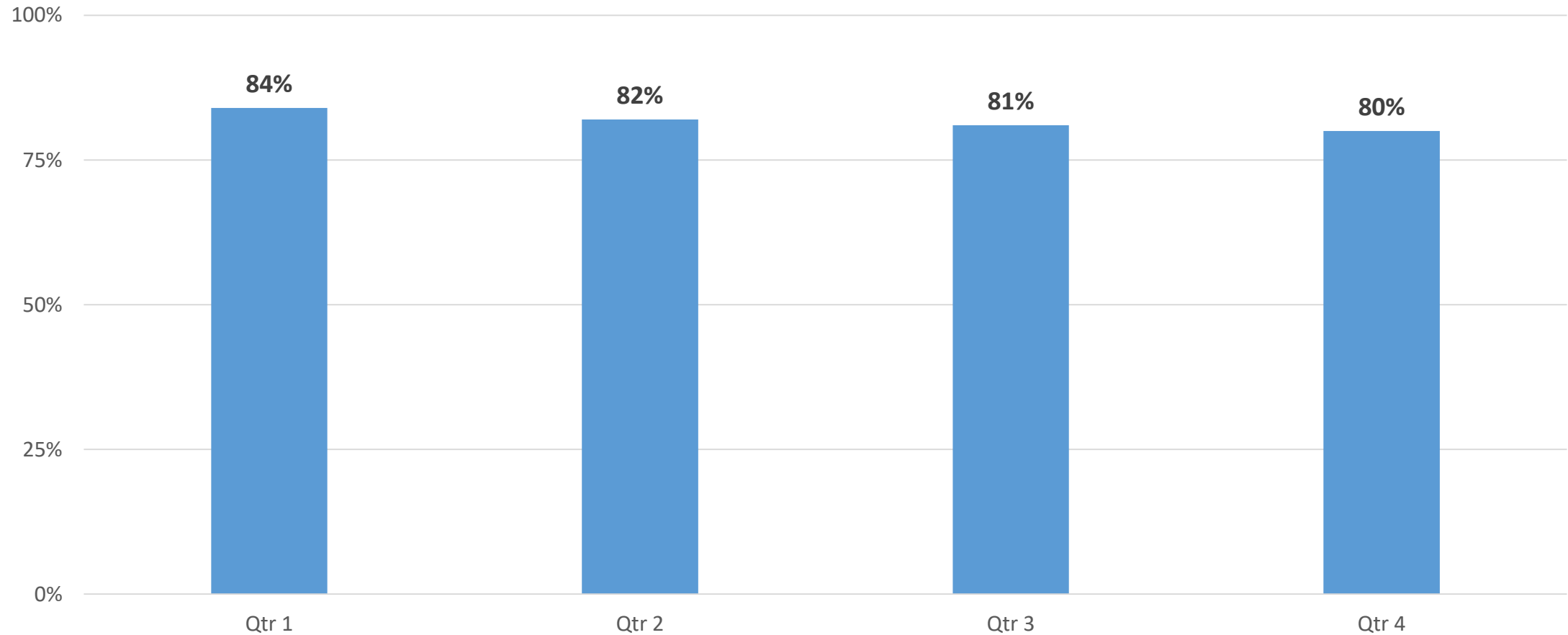
Target Goal: 90%



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



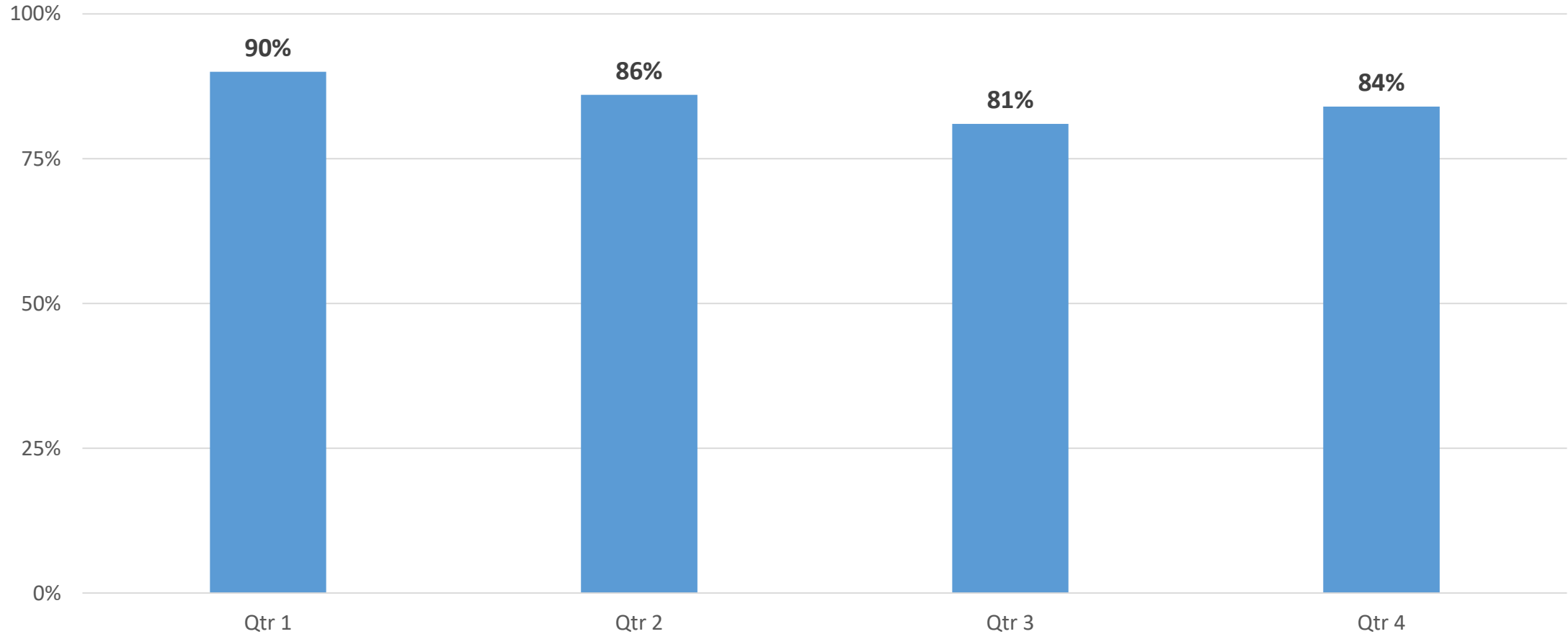
Target Goal: 90%



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

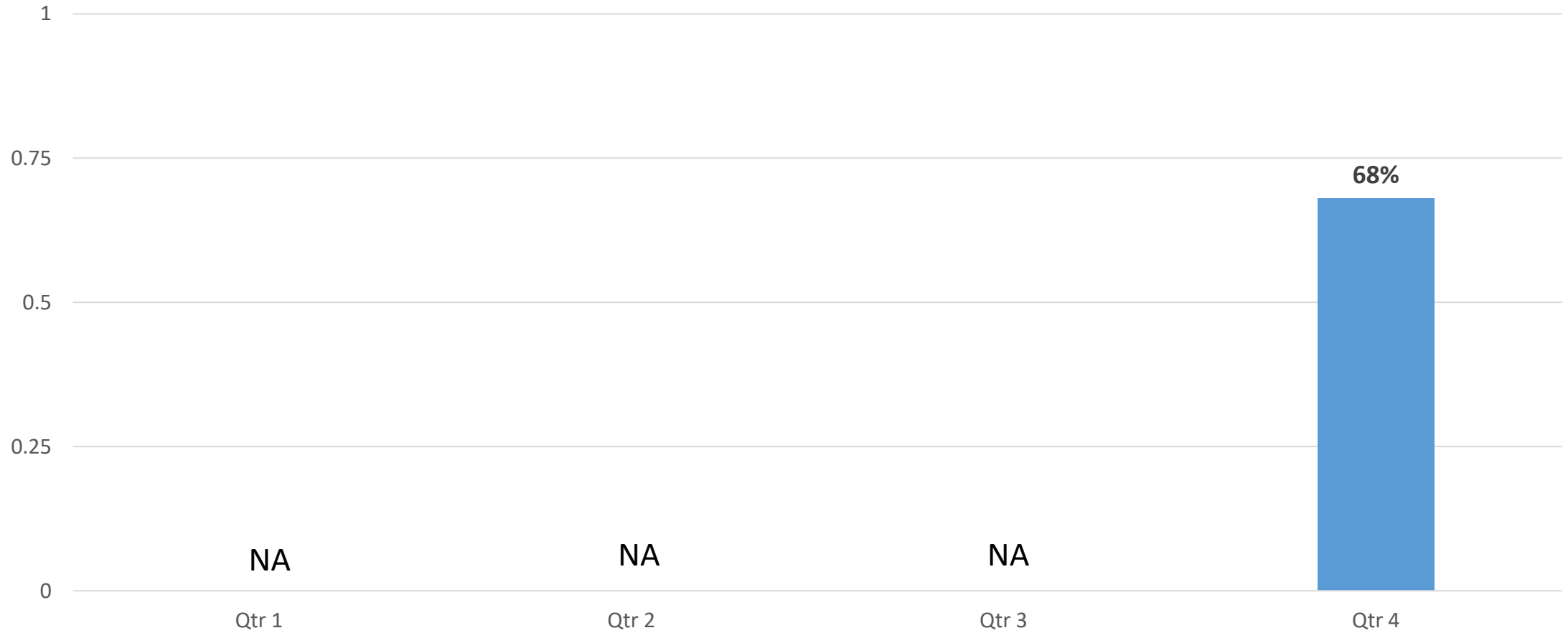


Target Goal: 90%



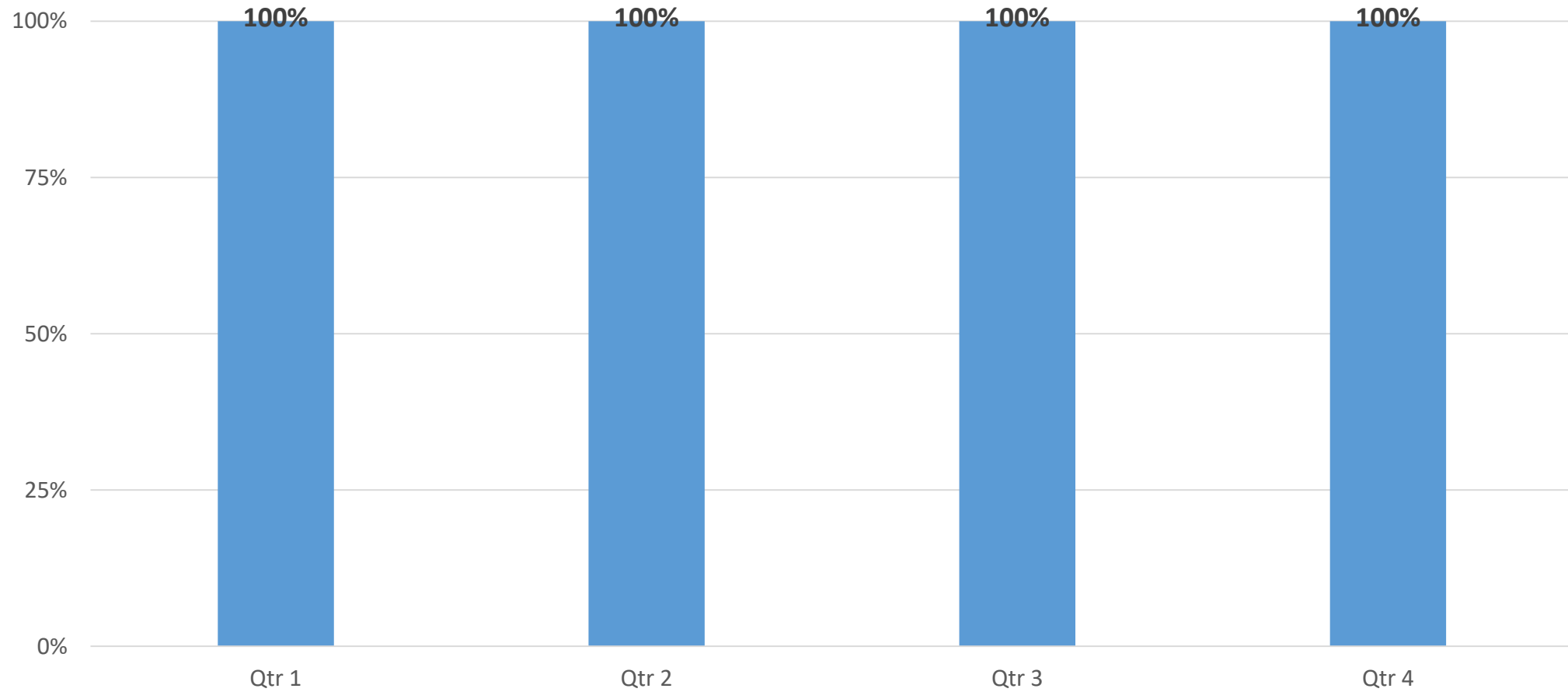
The percent of work hours providing billable case management services

Target Goal: 40%



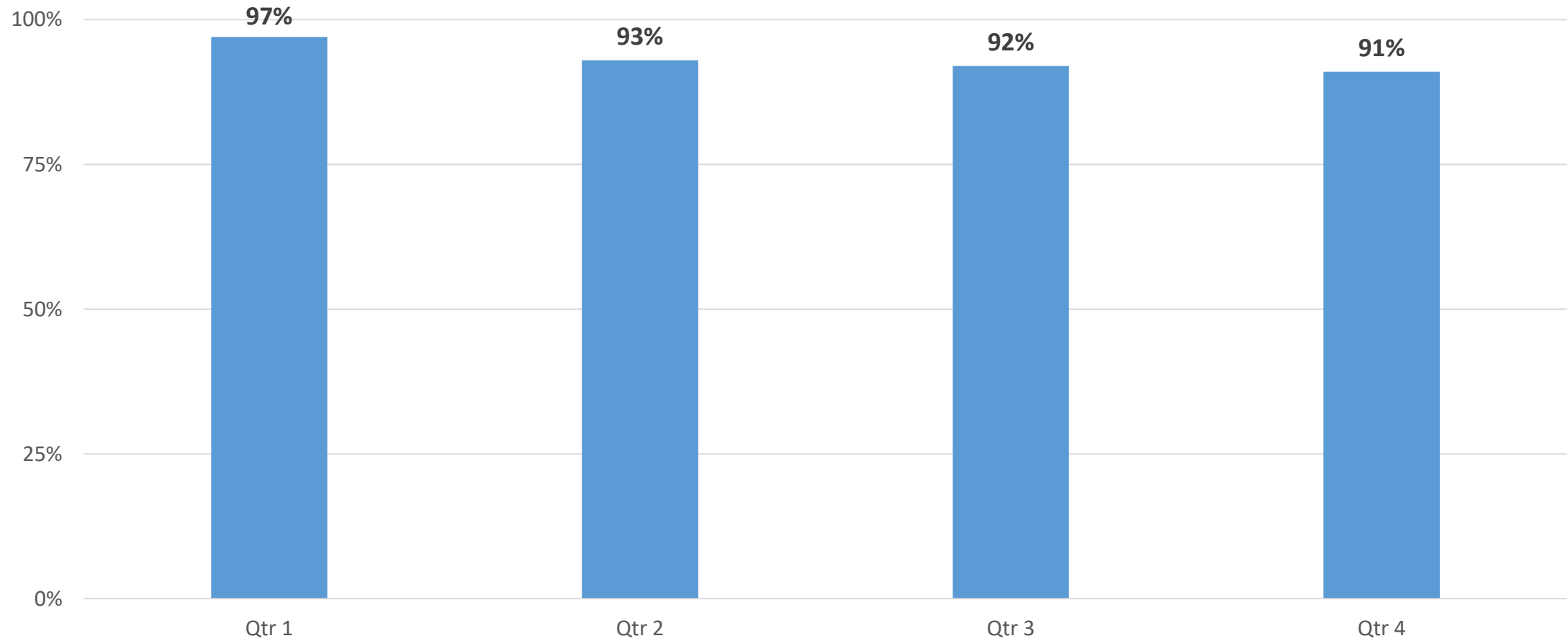
The percent of emergency service assessments signed within 72 hours

Target Goal: 100%



The percent of initial behavioral health assessments signed within 72 hours

Target Goal: 100%

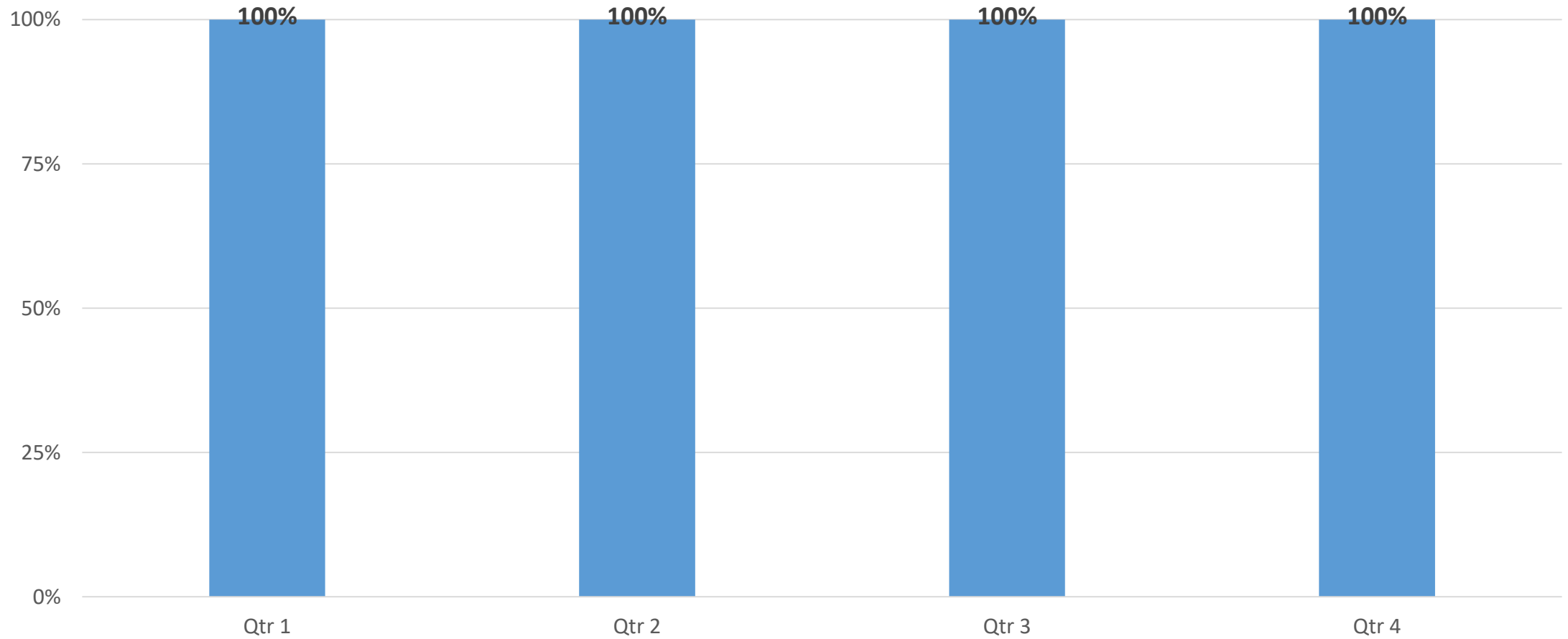


Business Function Indicators

This section of performance indicators describes performance on prioritized business functions that make direct service delivery possible.

Percent of Medicaid revenue budgeted that was actually received

Target Goal: 100%



Exceeded 100% all quarters

Ratio of debt to net worth

Target Goal: >2.5



Ratio of cash on hand to short-term liabilities

Target Goal: <40%



In sum

- FY21 was a challenge to navigate safely and an especially challenging time to maintain and even improve organizational performance; yet through teamwork and hard work we thrived amidst substantial change
- THANK YOU TO EVERYONE who ‘helped people live their own best lives’!
- The content of this report is used to inform the continuous improvement of the quality of our programs and services, to facilitate organizational decision making regarding service delivery and business functions and to guide revisions to JAMHI’s performance measurement and management plan.