***Stanislaus County Behavorial Health Recovery Services Managed Care Services QM MEDI-CAL KEY INDICATORS FY 12/13***

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| ***Goal QTR 1 QTR 2 QTR 3 QTR 4 FISCAL YTD*** |
| ***Access*** |
| 1 | Adult beneficiaries have a scheduled assessment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi | 90 % | 199 99 %***n=*** 201 | 136 96 %***n=*** 142 | 205 96 %***n=*** 214 | 216 99 %***n=*** 218 | 756 98%***n=*** 775 |
| 2 | Adult beneficiaries have had a completed assessment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi | 90 % | 121 71 %***n=*** 170 | 76 62 %***n=*** 123 | 130 72 %***n=*** 181 | 151 78 %***n=*** 194 | 478 72%***n=*** 668 |
| 3 | Adult - The average length of time from first request for service to first clinical assessment. Data Source: 800 Log and Anasazi | <=30 | 17 | 17 | 8 | 7 | 58%12 |
| 4 | Adult beneficiaries have had a first psychiatry appointment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi Med Support Svc code 20 | 90 % | 36 50 %***n=*** 72 | 23 59 %***n=*** 39 | 29 51 %***n=*** 57 | 48 70 %***n=*** 69 | 136 57%***n=*** 237 |
| 5 | Adult - average length of time from first request to first psychiatry appointment. Data Source: 800 Log and Anasazi Med Support Svc code 20 | <=30 | 50 | 44 | 29 | 25 | 157%37 |
| 6 | Child/adolescent beneficiaries have a scheduled assessment within 30 calendar days of initial contact call (\*See Note Below). Data Source: 800 Log and Anasazi | 90 % | 152 85 %***n=*** 179 | 144 84 %***n=*** 171 | 171 74 %***n=*** 231 | 101 66 %***n=*** 153 | 568 77%***n=*** 734 |
| 7 | Child/adolescent beneficiaries have had a completed assessment within 30 calendar days of initial contact call (\*See Note Below). Data Source: 800 Log and Anasazi | 90 % | 118 74 %***n=*** 159 | 105 68 %***n=*** 154 | 124 67 %***n=*** 185 | 68 55 %***n=*** 123 | 415 67%***n=*** 621 |
| 8 | Child/Adolescent - The average length of time from first request for service to first clinical assessment. Data Source: 800 Log and Anasazi | <=30 | 20 | 22 | 16 | 19 | 84%19 |
| 9 | Child/adolescent beneficiaries with a hospitalization who received a psychiatric appt within 30 days of hospital discharge. Data Source: Anasazi SU 5002 and Med Support Svc code 20 | 90 % | 21 55 %***n=*** 38 | 26 52 %***n=*** 50 | 37 74 %***n=*** 50 | 26 56 %***n=*** 46 | 110 60%***n=*** 184 |
| 10 | Child/adolescent average length time from hospital discharge to 1st psychiatry appointment. Data Source: Anasazi SU 5002 and Med Support Svc code 20 | <=30 | ***n=*** 30 | ***n=*** 27 | ***n=*** 13 | ***n=*** 9 | 95%***n=*** 20 |
| 11 | Older Adult beneficiaries have a scheduled assessment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi | 90 % | 2 67 %***n=*** 3 | 2 18 %***n=*** 11 | 2 18 %***n=*** 11 | 13 76 %***n=*** 17 | 19 45%***n=*** 42 |
| 12 | Older Adult beneficiaries have had a completed assessment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi | 90 % | 0 0 %***n=*** 1 | 0 0 %***n=*** 9 | 1 20 %***n=*** 5 | 5 42 %***n=*** 12 | 6 22%***n=*** 27 |
| 13 | Older Adult - The average length of time from first request for service to first clinical assessment. Data Source: 800 Log and Anasazi | <=30 |  | 36 | 41 | 15 | 103%31 |
| 14 | Older Adult beneficiaries have had a first psychiatry appointment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi Med Support Svc code 20 | 90 % | 0***n=*** | 0***n=*** | 0***n=*** | 1 50 %***n=*** 2 | 1 50%***n=*** 2 |
| 15 | Older Adult - average length of time from first request to first psychiatry appointment. Data Source: 800 Log and Anasazi Med Support Svc code 20 | <=30 |  | 59 |  | 30 | 100%44 |
| 16 | SOC overall average length of time from first request for service to first clinical assessment. Data Source: 800 Log and Anasazi | <=30 | 18 | 20 | 12 | 11 | 60%15 |
| 17 | SOC overall percent met goal length of time from first request for service to first clinical assessment (<=30 days). Data Source: 800 Log and Anasazi | 90 % | 239 73 %***n=*** 327 | 181 64 %***n=*** 283 | 255 69 %***n=*** 370 | 224 69 %***n=*** 325 | 899 69%***n=*** 1305 |
| 18 | SOC overall average length of time from first request to first psychiatry appointment. Data Source: 800 Log and Anasazi Med Support Services code 20 (Adult/OA) | <=30 | 50 | 45 | 29 | 25 | 159%37 |
| 19 | SOC overall beneficiaries have had a first psychiatry appointment within 30 calendar days of initial contact call. Data Source: 800 Log and Anasazi Med Support Services code 20 (Adult/OA) | 90 % | 36 50 %***n=*** 72 | 23 53 %***n=*** 43 | 29 51 %***n=*** 57 | 49 69 %***n=*** 71 | 137 56%***n=*** 243 |

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| ***Goal QTR 1 QTR 2 QTR 3 QTR 4 FISCAL YTD*** |
| 20 | \*\*Adult beneficiaries are able to access services in a geographically convenient manner. Data Source: State/County 1Surveys - when available | 88 % | Annually ------------- | -------------> | 333 75 %***n=*** 444 | 333 75%***n=*** 444 |
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| 21 | \*\*Child/adolescent beneficiaries are able to access services in a geographically convenient manner. Data Source: 1State/County Surveys - when available | 88 % | Annually ------------- | -------------> | 615 90 %***n=*** 683 | 615 90%***n=*** 683 |
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| 22 | \*\*Older Adult beneficiaries are able to access services in a geographically convenient manner. Data Source: 1State/County Surveys - when available | 88 % | Annually ------------- | -------------> | 27 68 %***n=*** 40 | 27 68%***n=*** 40 |
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| 23 | Limited English-speaking callers to the access line were given information in their preferred language. Data Source: Test calling forms #IIIC | 75 % | 1 100 %***n=*** 1 | 0***n=*** | 1 100 %***n=*** 1 | 0***n=*** | 2 100%***n=*** 2 |
| 24 | Beneficiaries who call on the 24 hour Access Line were entered on a written log. Data Source: MAT Log | 75 % | 2 67 %***n=*** 3 | 1 50 %***n=*** 2 | 1 33 %***n=*** 3 | 0***n=*** | 4 50%***n=*** 8 |
| 25 | Grievances and appeals are processed according to guidelines established by State DMH. Data Source: EVEREST Complaint Tracking System | 100 % | 4 100 %***n=*** 4 | 3 100 %***n=*** 3 | 1 100 %***n=*** 1 | 4 100 %***n=*** 4 | 12 100%***n=*** 12 |
| 26 | Grievance and appeal forms are available, without request, at all sampled sites. Data Source: Medi-Cal Site certification visits | 100 % | 14 100 %***n=*** 14 | 6 86 %***n=*** 7 | 11 100 %***n=*** 11 | 9 75 %***n=*** 12 | 40 91%***n=*** 44 |
| 27 | Beneficiaries have participated in treatment planning during inpatient hospitalization as evidenced by signature on treatment plan. Data Source: DBHC Data Base | 80 % | 107 43 %***n=*** 249 | 72 41 %***n=*** 175 | 71 28 %***n=*** 254 | 139 52 %***n=*** 267 | 389 41%***n=*** 945 |
| 28 | Beneficiaries have participated in outpatient treatment planning as evidenced by signature on Client Care Plan (Adult, Child/Adolescent and Older Adult) . Data Source: Peer Review Audit worksheet | 95 % | 20 100 %***n=*** 20 | 20 91 %***n=*** 22 | 37 82 %***n=*** 45 | 42 82 %***n=*** 51 | 119 86%***n=*** 138 |
| 29 | Information regarding TBS is provided to beneficiaries under 21 years of age on inpatient unit(s). . Data Source: DBHC/ Out of County | 95 % | 74 94 %***n=*** 79 | 88 92 %***n=*** 96 | 82 99 %***n=*** 83 | 63 100 %***n=*** 63 | 307 96%***n=*** 321 |

\* County Satisfaction Surveys are Completed through out year by AOD programs and all others are completed annually.

#2, #7, #12 - Methodology changed Q1 FY12/13 from scheduled to completed

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| ***Continuity of Care*** |
| 30 | Program staff will have contact with client's PCP. Data Source: PCP Database and Anasazi MHS703 | 25 % | 57 %***n=***4954 2848 | 62 %***n=*** 4100 2548 | 59 %***n=*** 4485 2648 | 60 %***n=***4528 2703 | ***n=*** |
| 31 | Beneficiaries have given consent to share information with their PCP (Adult, Child/Adolescent, Older Adult). Data Source: Peer Review Audit worksheet | 90 % | 24 100 %***n=*** 24 | 7 33 %***n=*** 21 | 35 73 %***n=*** 48 | 40 74 %***n=*** 54 | 106 72%***n=*** 147 |
| 32 | English-speaking adult beneficiaries considered at "high risk" will follow through on outpatient referrals within fourteen (14) calendar days (Discharge from hospital). Data Source: Anasazi MHS987 | 80 % | 184 74 %***n=*** 248 | 144 74 %***n=*** 195 | 174 87 %***n=*** 200 | 162 73 %***n=*** 222 | 664 77%***n=*** 865 |
| 33 | English-speaking child/adolescent beneficiaries considered at "high risk" will follow through on outpatient referrals within fourteen (14) calendar days (Discharge from hospital ). Data Source: Anasazi MHS987 | 75 % | 27 73 %***n=*** 37 | 37 74 %***n=*** 50 | 43 83 %***n=*** 52 | 32 74 %***n=*** 43 | 139 76%***n=*** 182 |
| 34 | English-speaking older adult beneficiaries considered at "high risk" will follow through on outpatient referrals within fourteen(14) calendar days (Discharge from hospital). Data Source: Anasazi MHS987 | 80 % | 6 100 %***n=*** 6 | 3 43 %***n=*** 7 | 9 90 %***n=*** 10 | 10 83 %***n=*** 12 | 28 80%***n=*** 35 |
| 35 | Limited English-speaking adult beneficiaries considered at "high risk" will follow through on outpatient referrals within fourteen (14) calendar days (Discharge from hospital). Data Source: Anasazi MHS987 | 80 % | 11 69 %***n=*** 16 | 8 80 %***n=*** 10 | 8 100 %***n=*** 8 | 12 100 %***n=*** 12 | 39 85%***n=*** 46 |
| 36 | Limited English-speaking child/adolescent beneficiaries considered at "high risk" will follow through on outpatient referrals within fourteen (14) calendar days. (Discharge from hospital). Data Source: Anasazi MHS987 | 75 % | 1 100 %***n=*** 1 | 2 67 %***n=*** 3 | 3 100 %***n=*** 3 | 3 100 %***n=*** 3 | 9 90%***n=*** 10 |
| 37 | Limited English-speaking older adult beneficiaries considered at "high risk" will follow through on outpatient referrals within fourteen (14) calendar days (Discharge from hospital). Data Source: Anasazi MHS987 | 100 % | 0***n=*** | 1 100 %***n=*** 1 | 0***n=*** | 0***n=*** | 1 100%***n=*** 1 |

#30 (C-1) The percentage is 25% per quarter accumulative with the goal of 100% per FY. All BHRS open Medi-Cal Clients included except for Inpatient 5001 5002 5003 CERT 1401 1402

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| ***Goal QTR 1 QTR 2 QTR 3 QTR 4 FISCAL YTD*** |
| ***Beneficiary Satisfaction*** |
| 38 | \*\*Overall consumer satisfaction with providers, as measured by the Mental Health Statistics Improvement Program/MHSIP1, YSS, and YSSF will be favorable. Data Source: State/County Surveys - when available | 85 % | Annually ------------- | -------------> | 989 83 %***n=***1192 | 989 83%***n=*** 1192 |
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| 39 | \*\*Overall consumer satisfaction of monolingual, Spanish-speaking beneficiaries as measured by the MHSIP, YSS and 1YSSF will be favorable. Data Source: State/County Surveys - when available | 97 % | Annually ------------- | -------------> | 89 90 %***n=*** 99 | 89 90%***n=*** 99 |
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| 40 | Consumers will be satisfied with the provider initially assigned to them as evidenced by few requests for change of provider. Data Source: EVEREST Complaint Tracking System | <12 | 3 | 1 |  | 1 | 5 |
| 41 | \*\*Consumers would recommend services to a family member or friend as measured by favorable responses to the 1MHSIP. Data Source: State/County Surveys - when available | 93 % | Annually ------------- | -------------> | 434 90 %***n=*** 482 | 434 90%***n=*** 482 |
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| 42 | Complaints from family members are resolved satisfactorily.. Data Source: EVEREST Complaint Tracking System | 85 % | 1 100 %***n=*** 1 | 0***n=*** | 1 100 %***n=*** 1 | 0***n=*** | 2 100%***n=*** 2 |
| 43 | Complaints from consumers are resolved satisfactorily.. Data Source: EVEREST Complaint Tracking System | 85 % | 2 100 %***n=*** 2 | 2 100 %***n=*** 2 | 0***n=*** | 2 100 %***n=*** 2 | 6 100%***n=*** 6 |
| 44 | Callers to the 24-hour access line were satisfied with the help and information they received. Data Source: Test calling forms #IIIA | 75 % | 3 100 %***n=*** 3 | 0 0 %***n=*** 2 | 1 33 %***n=*** 3 | 0***n=*** | 4 50%***n=*** 8 |

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| ***Provider Appeals*** |
| 45 | Provider appeals are handled according to Medi-Cal regulations.. | Data Source: EVEREST Complaint Tracking System | 98 % | 76 100 %***n=*** 76 | 72 100 %***n=*** 72 | 87***n=*** | 100 %87 | 135 100 %***n=*** 135 | 370 100%***n=*** 370 |

\* County Satisfaction Surveys are Completed through out year by AOD programs and all others are completed annually.

 ***Info not available/Not reported/no goal set***

***Data examined/no activity***

***Meets or Exceeds Goal***

***Has not Attained Goal***