

South Peninsula Behavioral Health Services  
Performance Improvement Team Annual Report  
January – December 2014 (Bold = Reported to DHSS)

Domain	Objective	Indicator	Population (s) Applied To	Target	Frequency of Measure	Data
Business Function	Regulatory Efficiency	Grant fund reporting requirements are submitted timely and accurately	DD Grant BH Grant	100%	Quarterly	<b>1<sup>st</sup> Qtr 100%</b> <b>2<sup>nd</sup> Qtr 100%</b> <b>3<sup>rd</sup> Qtr 100%</b> <b>4<sup>th</sup> Qtr 100%</b>
Business Function	Financial Sustainability	Funds on hand for days of SPBHS operations	Agency Wide	90 days	Quarterly	1 <sup>st</sup> Qtr 90 days 2 <sup>nd</sup> Qtr 90 days 3 <sup>rd</sup> Qtr 90 days 4 <sup>th</sup> Qtr 90 days
Business Function	Regulatory Compliance	AKAIMS Data Integrity Minimal Data Set Report-DBH required data set	BH	98%	Quarterly	<b>1<sup>st</sup> Qtr 98.48%</b> <b>2<sup>nd</sup> Qtr 98.73%</b> <b>3<sup>rd</sup> Qtr 99.25%</b> <b>4<sup>th</sup> Qtr 99.18%</b>
Effectiveness	Improved Life Domains	Percent of clients reporting improvement in life domains <sup>1</sup> between first and second Client Status Review (RBA Dashboard #8)	BH Adults BH Youth	90%	Quarterly	<b>BH Adults</b> <b>1<sup>st</sup> Qtr 37.5%</b> <b>2<sup>nd</sup> Qtr 55.6%</b> <b>3<sup>rd</sup> Qtr 81.7%</b> <b>4<sup>th</sup> Qtr 81.5%</b> <b>BH Youth</b> <b>1<sup>st</sup> Qtr 100%</b> <b>2<sup>nd</sup> Qtr 100%</b> <b>3<sup>rd</sup> Qtr 93.7%</b> <b>4<sup>th</sup> Qtr 61.5%</b>
Effectiveness	Improved Quality of Life	Percent of clients reporting improvement in quality of life domains <sup>2</sup> between first and second Client Status Review (RBA Dashboard #9)	BH Adults BH Youth	90%	Quarterly	<b>BH Adults</b> <b>1<sup>st</sup> Qtr 62.5%</b> <b>2<sup>nd</sup> Qtr 66.7%</b> <b>3<sup>rd</sup> Qtr 73.4%</b> <b>4<sup>th</sup> Qtr 88.3%</b> <b>BH Youth</b> <b>1<sup>st</sup> Qtr 50%</b> <b>2<sup>nd</sup> Qtr 37.5%</b> <b>3<sup>rd</sup> Qtr 78.5%</b> <b>4<sup>th</sup> Qtr 61.5%</b>
Effectiveness	Satisfaction with Quality of Life	Percent of clients reporting being “satisfied” or better regarding their quality of life on their second Client Status Review (RBA Dashboard #11)	BH Adults BH Youth	90%	Quarterly	<b>BH Adults</b> <b>1<sup>st</sup> Qtr 87.5%</b> <b>2<sup>nd</sup> Qtr 82.4%</b> <b>3<sup>rd</sup> Qtr 72.8%</b> <b>4<sup>th</sup> Qtr 88.1%</b> <b>BH Youth</b> <b>1<sup>st</sup> Qtr 100%</b> <b>2<sup>nd</sup> Qtr 85.7%</b> <b>3<sup>rd</sup> Qtr 67.8%</b> <b>4<sup>th</sup> Qtr 83.4%</b>

Domain	Objective	Indicator	Population (s) Applied To	Target	Frequency of Measure	Data
Efficiency	CSR Timeliness	Percent of CSR's completed within the required 135 days from previous CSR (AKAIMS)	BH Adults BH Youth	100%	Quarterly	<b>BH Adults</b> 1 <sup>st</sup> Qtr 96.27% 2 <sup>nd</sup> Qtr 95.49% 3 <sup>rd</sup> Qtr 97.2% 4 <sup>th</sup> Qtr 97.8%  <b>BH Youth</b> 1 <sup>st</sup> Qtr 95.77% 2 <sup>nd</sup> Qtr 98.28% 3 <sup>rd</sup> Qtr 96.6% 4 <sup>th</sup> Qtr 98.11%
Efficiency	Frequency of Contact	Percent of active BH recipients who have not been seen for a face-to-face contact for at least 135 days (RBA Dashboard #7.b)	BH Adults BH Youth	< 5%	Quarterly	<b>BH Adults</b> 1 <sup>st</sup> Qtr 7.75% 2 <sup>nd</sup> Qtr 6.72% 3 <sup>rd</sup> Qtr 5.7% 4 <sup>th</sup> Qtr 4.87%  <b>BH Youth</b> 1 <sup>st</sup> Qtr 1.77% 2 <sup>nd</sup> Qtr 0.85% 3 <sup>rd</sup> Qtr 2.83% 4 <sup>th</sup> Qtr N/A
Efficiency	Documentation Completeness	Elapse time of less than 30 days on average between experiencing Alaska Screening Tool (AST) to first service for BH Adults and Youth (RBA Dashboard #3)	BH Adults BH Youth	30 days	Quarterly	<b>BH Adults</b> 1 <sup>st</sup> Qtr 9.31 days 2 <sup>nd</sup> Quarter 17.83 days 3 <sup>rd</sup> Qtr 4.68 days 4 <sup>th</sup> Qtr 11.38 days  <b>BH Youth</b> 1 <sup>st</sup> Qtr 10.87 days 2 <sup>nd</sup> Qtr 9.7 days 3 <sup>rd</sup> Qtr 16.4 days 4 <sup>th</sup> Qtr 12.39 days
Efficiency	Documentation Completeness	Percent of AST's completed per admission (AKAIMS)	BH Adults BH Youth	95%	Quarterly	<b>BH Adults</b> 1 <sup>st</sup> Qtr 100% 2 <sup>nd</sup> Qtr 100% 3 <sup>rd</sup> Qtr 100% 4 <sup>th</sup> Qtr 100%  <b>BH Youth</b> 1 <sup>st</sup> Qtr 100% 2 <sup>nd</sup> Qtr 100% 3 <sup>rd</sup> Qtr 100% 4 <sup>th</sup> Qtr 100%

Domain	Objective	Indicator	Population (s) Applied To	Target	Frequency of Measure	Data
Efficiency	Documentation Completeness	Percent of initial CSRs completed per admission (AKAIMS)	BH Adults BH Youth	95%	Quarterly	<u>BH Adults</u> 1 <sup>st</sup> Qtr 100% 2 <sup>nd</sup> Qtr 100% 3 <sup>rd</sup> Qtr 100% 4 <sup>th</sup> Qtr 100%  <u>BH Youth</u> 1 <sup>st</sup> Qtr 100% 2 <sup>nd</sup> Qtr 100% 3 <sup>rd</sup> Qtr 100% 4 <sup>th</sup> Qtr 100%
Efficiency	Timely Submission of Documentation of Services	Percent of full-time staff documentation that is turned in by Tuesday am each week for the services provided in the preceding week.	DD BH Adults BH Youth * added SPBHS-wide	90%	Monthly * Changed to Quarterly reporting	<u>DD</u> Jan- Mar 63%. Apr-June 44% July-Sept 60% Oct- Dec 62%  <u>BH Adults</u> Jan- Mar 13% Apr-June 60% July- Sept 65% Oct- Dec 69%  <u>BH Youth</u> Jan- Mar 48% Apr-June 49% July-Sept 58% Oct- Dec 53%  <u>SPBHS- wide</u> Jan-Mar 41% Apr-June 51% July-Sept 61% Oct-Dec 61%  SPBHS-wide average for the year = 53.5%

Domain	Objective	Indicator	Population (s) Applied To	Target	Frequency of Measure	Data
Access	Timely Initial Clinical Assessment	Percent of persons who present for non-emergent services who are provided an initial clinical assessment the same day. (Total completed)	BH Adults	10%	Monthly	Jan. 85% (13) Feb. 86% (21) Mar. 90% (10) April 89% (18) May 83% (12) June 89% (18) July 100% (14) August 75% (16) Sept. 86% (14) Oct. 86% (14) Nov. 100% (11) Dec. 71% (14)  Average # per month: 14.6
Access	Timely Initial Psychiatric Evaluation	Percent of persons who present for non-emergent psychiatric services who are provided an initial psychiatric evaluation within 30 days of internal written referral. (Total completed)	BH Adults BH Youth	95%	Monthly	<u>BH Adults</u> Jan. 50% (6) Feb. 86% (7) Mar. 100% (5) Apr. 100% (8) May 88% (9) June 71% (7) July 100% (6) August 100% (7) Sept. 75% (4) Oct. 83.3% (6) Nov. 25% (4) Dec. 0% (4)  <u>BH Youth</u> Jan. 100% (2) Feb. 75% (4) Mar. 75% (5) Apr. 100% (2) May 0% (1) June 100% (2) July 100% (3) August 100% (1) Sept. 50% (2) Oct. 100% (1) Nov. 100% (2) Dec. 0% (1)  Average # per month Adults: 6 Youth: 2.16

Domain	Objective	Indicator	Population (s) Applied To	Target	Frequency of Measure	Data
Access	Initial Clinical Engagement	Percent of BH adults and youth who receive treatment services within 30 days of enrollment. (RBA Dashboard #7.a)	BH Adults BH Youth	90%	Quarterly	<b>BH Adults</b> 1 <sup>st</sup> Qtr 87.18% 2 <sup>nd</sup> Qtr 92.68% 3 <sup>rd</sup> Qtr 100% 4 <sup>th</sup> Qtr 97.06%  <b>BH Youth</b> 1 <sup>st</sup> Qtr 100% 2 <sup>nd</sup> Qtr 100% 3 <sup>rd</sup> Qtr 83.3% 4 <sup>th</sup> Qtr 89.47%
Stakeholder Input	Satisfaction of Persons Served	Percent of persons served and family members who Agree or Strongly Agree that services are built around what they and/or their family want	I/DD Persons Served  I/DD Family Members	85%	Annually	<b>Persons Served</b> 100 %  <b>Family/ Guardian</b> 95%
Stakeholder Input	Satisfaction of Persons Served	Percent of persons served and family members who Agree or Strongly Agree that they are satisfied with their care providers	I/DD Persons Served  I/DD Family Members	85%	Annually	<b>Persons Served</b> 92%  <b>Family/ Guardian</b> 100%
Stakeholder Input	Satisfaction of Persons Served	Percent of persons served who report being “Satisfied” or better regarding getting services and being treated with respect on their second CSR (RBA Dashboard # 10)	BH Adults BH Youth	80%	Quarterly	<b>BH Adults</b> 1 <sup>st</sup> Qtr 87.5% 2 <sup>nd</sup> Qtr 87.5% 3 <sup>rd</sup> Qtr 94.4% 4 <sup>th</sup> Qtr 95.45%  <b>BH Youth</b> 1 <sup>st</sup> Qtr 100% 2 <sup>nd</sup> Qtr 100% 3 <sup>rd</sup> Qtr 100% 4 <sup>th</sup> Qtr 100%
Stakeholder Input	Satisfaction of Full Time Staff	The percent of staff who agree or strongly agree that everyone is treated fairly at this organization	All full time staff	75%	Annually	56.1%
Stakeholder Input	Satisfaction of Part Time Staff	The percent of staff who agree or strongly agree that they are paid fairly for the work they do	All part time staff	75%	Annually	65.7%

<sup>1</sup>Life Domains

Including financial/basic needs, housing situation, meaningful activities/employed, mental/emotional health, physical health and thoughts of self harm.

<sup>2</sup>Quality of Life Domains

Including productivity, physical health, mental/emotional health, thoughts about self harm, family and social support for recovery, feeling safe, sense of connectedness, well-being and spirituality, financial security and housing situation.