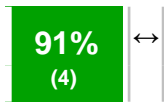


# CMC Mental Health Performance Report for 9/1/20 to 9/30/20

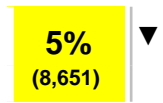
Data filtered to ASU, ASU EOP Hub, Condemned, IN\_TRANSIT, Institution Wide, LTRH, MHCB, MI, MI CCCMS, MI EOP, PSU, PC, PC CCCMS, PC EOP, SHU, STRH only

## Performance Improvement Priorities

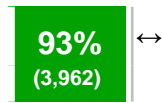
### 10.1 Diagnostic Monitoring



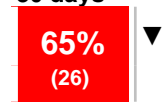
### 10.2 Appointments Cancelled Due to Custody



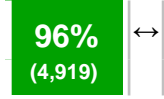
### 10.3 Timely Psychiatry Contacts



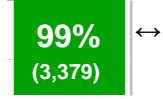
### 10.4 MHCB and Acute/ICF discharges not readmitted w 30 days



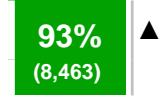
### 10.7 Timely PC Contacts



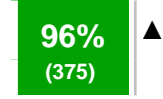
### 10.8 Effective Communication Achieved



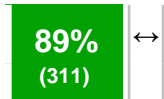
### 10.9 Appointments seen as scheduled



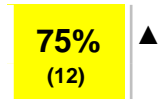
### 10.10 Timely MH Referrals



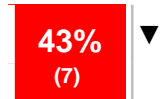
### 10.13 Polypharmacy Medication Review



### 10.14 Quality of SRASHE (Risk Assessment)



### 10.15 Treatment plans with satisfactory documentation

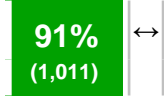


### 10.16 Discharges from MHCE with clinician review of d/c summary

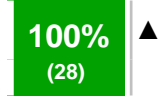


## Mental Health Crisis Bed

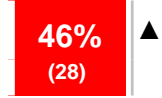
### 15.1 MHCB Daily Provider Contacts



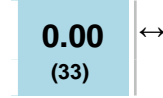
### 15.2 MHCB physical discharges within timeframes



### 15.3 MHCB clinical stays within timeframes

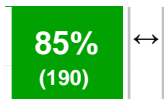


### 15.4 Seclusion Rate

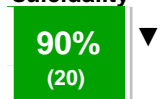


## Suicide Prevention

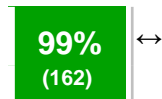
### 20.1 Suicide Risk Evaluation



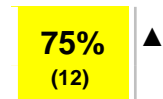
### 20.2 5 day follow-ups with documentation of current suicidality



### 20.3 Discharge FollowUps

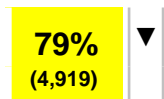


### 20.4 Quality of SRASHE (Risk Assessment)

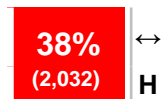


## Access to Care

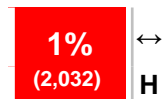
### 30.1 Timely IDTTs



### 30.2 Treatment Scheduled



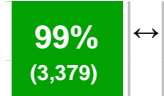
### 30.3 Treatment Offered



### 30.4 Treatment Attended



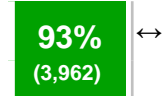
### 30.7 Effective Communication Achieved



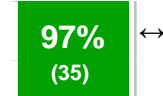
### 30.8 Timely PC Contacts



### 30.9 Timely Psychiatry Contacts

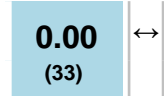


### 30.10 Mental Health Screens

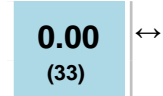


## Safety

### 40.1 Restraint Rate

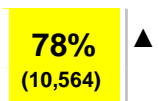
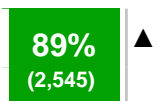


### 40.2 Seclusion Rate

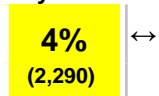




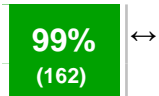
ithin 10.5 Psychiatrist continuity of care 10.6 Primary clinician continuity of care



10.11 Non-Formulary by Psychiatrist

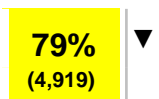


10.12 Discharge FollowUps

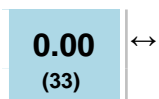


3

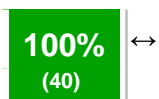
10.17 Timely IDTTs



15.5 Restraint Rate



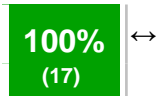
15.6 Timely admission to MHCB



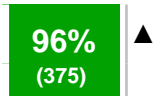
k



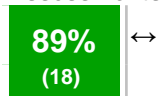
30.5 Timely transfers to CCCMS/EOP



30.6 Timely MH Referrals



30.11 Timely MH RVR Assessments



## Quality of Care

50.1 Discharges from MHCB with clinician review of d/c summary

100%

(1)



50.2 Treatment plans with satisfactory documentation

43%

(7)



50.3 IDTT Staffing

96%

(454)



50.4 Treatment plans with re: for refusal and intervention documented for high refuser

100%

(1)



50.7 Group treatment in a confidential setting

76%

(1,069)



50.8 RVR MH assessments where the patient was informed of the limits of confidentiality.

91%

(11)



50.9 RVR assessments where all documentation requirements were met

100%

(11)



50.10 PHQ-9 Change Per Day

-0.1

(115)



## Utilization and Resource Management

60.1 MHCB and Acute/ICF discharges not readmitted within 30 days

65%

(26)



60.2 Appointments Cancelled Due to Custody

5%

(8,651)



60.3 Treatment Cancelled

88%

(2,032)



H

60.4 Treatment Refused

3%

(2,091)



H

60.7 MHCB clinical stays within timeframes

46%

(28)



## Segregated Housing

70.1 Placement of ASU/SHU CCCMS in STRH/LTRH within timeframes

83%

(6)



## Data Entry

90.1 Appointment Closure Lag

3%

(94,658)



90.2 MH Milestones Over/Under Awarded

100%

(566)



90.3 MH referral resolved before it was received

20

(20)



90.4 Inpatient MHI errors

33

(33)



## Alternative Housing

110.1 Alternative Housing Stays

100%

(40)



# CMC Mental Health Performance Report for 9/1/20 to 9/30/20

Data filtered to ASU, ASU EOP Hub, Condemned, IN\_TRANSIT, Institution Wide, LTRH, MHCB, MI, MI CCCMS, MI EOP, PSU, PC, PC CCCMS, PC EOP, SHU, STPH only

ason		50.5 Primary clinician continuity of care	50.6 Psychiatrist continuity of care
s		<div>78% (10,564)</div> ▲	<div>89% (2,545)</div> ▲

		60.5 Appointments seen as scheduled	60.6 MHCB physical discharges within timeframes
		<div>93% (8,463)</div> ▲	<div>100% (28)</div> ▲

		90.5 MH referral received date later than data entry date	90.6 Confidential Cellside
		<div>6 (6)</div> ▲	<div>94 (94)</div> ▼