

Supporting a better tomorrow by making a difference in the lives of Mississippians with mental illness, substance use disorders and intellectual/developmental disabilities, one person at a time.

FY17 End-of-Year Progress Report

FY17 – FY19 Mississippi
Department of Mental Health
Strategic Plan

September 2017

Mississippi Department of Mental Health FY17 End-of-Year Progress Report

Level	Name	Status	Current Value	Last Updates Comment
Plan	DMH FY 17 - FY 19 Strategic Plan	On Track		
Goal	To increase access to community-based care and supports for adults and children with mental illness and substance use disorders through a network of service providers that are committed to a person-centered and recovery-oriented system of care	On Track		
Objective	Objective 1.1 Enhance the effectiveness and efficiency of state hospital services for individuals who are civilly committed	On Track		
Outcome	Maintain a 90 percent occupancy percentage of inpatient beds by service of civilly committed individuals (occupancy percentage is filled beds compared to capacity)	On Track	94.3	The average occupancy percentage for acute psychiatric care for the four state hospitals is 94.3.
Outcome	Maintain readmission rates within national trends	On Track	6.6	National average: 7.2% MSH: 7.69% EMSH: 5% NMSH: 5.8% SMSH: 8% Average: 6.6%
Strategy	Strategy 1.1.1 Conduct weekly conference calls with Program Directors and Admission Directors to review available beds, number of commitments and waiting lists	On Track		
Strategy	Strategy 1.1.2 Develop quarterly report by DMH Programs outlining number served, occupancy percentage, and readmission rates	On Track		
Output	% of occupancy: acute psychiatric care (all behavioral health programs)	On Track		EMSH: 95% MSH: 91.89% NMSH: 99.3% SMSH: 96% (based on 45-beds)
Output	% of occupancy: continued treatment (MSH)	On Track	93.22	
Output	% of occupancy: MSH medical surgical hospital (MSH)	On Track	17.9	
Output	% of occupancy: chemical dependency (MSH)	On Track	100	
Output	% of occupancy: adolescent chemical dependency (EMSH)	On Track	46	
Output	% of occupancy: nursing homes (MSH and EMSH)	On Track		EMSH: 84% - Beds were reduced to 105 per building. Staffing issues resulted in decreased occupancy. MSH: 91.17%

Output	% of occupancy: children/adolescents (MSH and ESMH)	On Track		EMSH: 62% MSH: 33.56%
Output	% of occupancy: transition unit (EMSH)	On Track	67	
Output	% of occupancy: forensics (MSH)	On Track	98.32	
Output	% of individuals readmitted between 0-59 days after discharge	On Track	6.6	EMSH: 5% MSH: 7.69% NMSH: 5.8% SMSH: 8% Average: 6.6%
Output	% of individuals readmitted between 60-89 days after discharge	On Track	2.7	EMSH: 2% MSH: 2.3% NMSH: 4.5% SMSH: 2% Average: 2.7%
Output	% of individuals readmitted between 90-119 days after discharge	On Track	2.6	EMSH: 2% MSH: 2.9% NMSH: 2.6% SMSH: 3% Average: 2.6%
Output	% of individuals readmitted after 120-365 days after discharge	On Track	13.5	EMSH: 11% MSH: 14.1% NMSH: 16.8% SMSH: 12% Average: 13.5%
Objective	Objective 1.2 Enhance the transition process of individuals to a less restrictive environment	On Track		
Outcome	Improve the process for people transitioning from inpatient care to community-based care through Peer Bridgers	On Track	431	431 people transitioned from inpatient care at NMSH and were connected with a Peer Bridger for continual care in the community.
Strategy	Strategy 1.2.1 Utilize Peer Bridgers at a behavioral health program and local Community Mental Health Centers	On Track	5	There are a total of five Peer Bridgers serving in three CMHCs and NMSH. The Bridgers have been trained as Certified Peer Support Specialist Professionals. They attend team meetings with other clinical staff.
Output	Number of Peer Bridgers	On Track	5	There are a total of five Peer Bridgers. One Bridger in three of the CMHCs located in North Mississippi and two Bridgers at North MS State Hospital
Output	Number of WRAPs conducted at pilot site	On Track	443	
Output	Number of readmissions at pilot site	On Track	57	NMSH reported 16 readmissions within 30 days of the last admission and 41 readmissions within 60 days of last admission.

Output	Number of first follow-up appointments attended	On Track	315	As reported by the Community Mental Health Centers involved in the Peer Bridger pilot project.
Outcome	Ensure continuing care plans are transmitted to the next level of care within five days of discharge	On Track		
Strategy	Strategy 1.2.2 Improve the efficiency of the discharge process by monitoring post discharge continuing care plans	On Track		
Output	Percentage of individuals receiving services care plans that are transmitted to the next level of care within five days	On Track	99	
Output	Percentage of discharge plans that begin at the time of admission	On Track	100	
Output	Percentage of discharge plans that include input from the person and/or family members	On Track	100	
Objective	Objective 1.3 Provide community supports for adults transitioning and/or living in the community to prevent out-of-home placements	On Track		
Outcome	Increase by at least 25% the utilization of alternative placement/treatment options for individuals who have had multiple hospitalizations and do not respond to traditional treatment	On Track		PACT teams added 140 new admissions in FY17 for a total number served of 387. This is an increase from FY16 which was 248.
Strategy	Strategy 1.3.1 Educate stakeholders about the options of Programs of Assertive Community Treatment (PACT) Teams to help individuals who have the most severe and persistent mental illnesses and have not benefited from traditional outpatient services	On Track		PACT teams added 140 new admissions in FY17.
Output	Number of PACT Teams	On Track	8	
Output	Number of admissions to PACT teams	On Track	140	
Output	Number of readmissions to a State Hospital of people already being served by a PACT Team	On Track	20	
Outcome	Expand employment options for adults with serious and persistent mental illness to employ an additional 75 individuals	On Track	116	
Strategy	Strategy 1.3.2 Fund six pilot employment sites for individuals with SMI	On Track	4	
Output	Number of businesses contacted for employment opportunities	On Track	2178	
Output	Number of individuals employed	On Track	116	

Objective	Objective 1.4 Strengthen the state's crisis response system to maximize availability and accessibility of services	On Track		
Outcome	Utilize Crisis Stabilization Units to divert individuals from more restrictive environments such as jail, hospitalizations, etc.	On Track	89.3	The Crisis Stabilization Units diverted 89.3% of admissions from a more restrictive environment in the first half of FY17.
Strategy	Strategy 1.4.1 Evaluate Crisis Stabilization Units based on defined performance indicators	On Track		Performance measures listed below.
Output	Diversion rate of admissions to state hospitals	On Track	89.3	The CSU diversion rate for FY17 is consistent with expectations at 89.3% of admissions diverted from further care at a state hospital.
Output	Average length of stay	On Track	9.53	
Output	Number of admissions	On Track	3129	There were 3,129 admissions in FY17.
Output	Number of involuntary admissions vs. voluntary admissions	On Track		In FY17, there were 1,795 voluntary admissions and 1,328 involuntary admissions.
Outcome	Utilize Mobile Crisis Response Teams to divert individuals from more restrictive environments such as jail, hospitalizations, etc.	Achieved	14	
Strategy	Strategy 1.4.2 Evaluate Mobile Crisis Response Teams based on defined performance indicators	On Track		Performance measures below.
Output	Number of contacts/calls	On Track	23168	
Output	Number of face-to-face visits	On Track	15668	Of the 23,168 contacts in FY17, 15,668 were face-to-face.
Output	Number referred to a Community Mental Health Center and scheduled an appointment	On Track	8640	Of the 23,168 contacts made in FY17 (of which 15,668 were face-to-face), 8,640 were scheduled a follow-up appointment at a CMHC.
Output	Number of encounters with law enforcement	On Track	552	Of the 15,668 face-to-face contacts made in FY17, only 552 required the assistance of law enforcement
Output	Number of people who need a higher level of care (jail, holding facility, CSU, state hospital, etc.)	On Track	2895	Of the 23,168 contacts made in FY17, 2,895 individuals needed a higher level of care.
Objective	Objective 1.5: Provide appropriate and affordable housing opportunities for adults with serious mental illness	On Track		
Outcome	Increase the availability of community supports/services for people with a serious mental illness in order to implement the Permanent Supportive Housing model	On Track		205 individuals housed through CHOICE

Strategy	Strategy 1.5.1 Ensure that people with a serious mental illness who are housed as a result of the Permanent Supportive Housing have the opportunity to live in the most integrated settings in the community of their choice by providing an adequate array of community supports/services	On Track		A total of 205 individuals were housed in FY17.
Output	Number of assessments provided	On Track	205	
Output	Number and type of supports/services provided	On Track		Individuals participating in CHOICE are receiving various services such as: outpatient, peer support, PACT, Physician Services, Community Supports, ICM, and PSR.
Output	Level of intensity of supports/services needed	On Track		Various levels needed: PSR, Outpatient, PACT, ICS, CS
Output	Number of people maintained in Permanent Supportive Housing	On Track	205	205 individuals were housed through CHOICE in FY17
Output	Number of people/days hospitalized in last 0-59 days	On Track	1	One individual was hospitalized and then released back to their home.
Output	Number of people/days hospitalized in last 60-89 days	On Track	1	One individual was hospitalized in the past 60-89 days and remains hospitalized.
Output	Number of people/days hospitalized in last 90-120 days	On Track	0	
Output	Number of people/days admitted to an ER in last 0-59 days	On Track	1	One individual was admitted to an ER and then released back to their home.
Output	Number of people/days admitted to an ER in last 60-89 days	On Track	0	
Output	Number of people/days admitted to an ER in last 90-120 days	On Track	0	
Output	Number of people/days in jail in last 0-59 days	On Track	1	One individual was placed in jail and then released back to their home.
Output	Number of people/days in jail in last 60-89 days	On Track	0	
Output	Number of people/days in jail in last 90-120 days	On Track	0	
Objective	Objective 1.6 Utilize peers and family members to provide varying supports to assist individuals in regaining control of their lives and their own recovery process	On Track		
Outcome	Increase the awareness of the Certified Peer Support Specialist program	On Track		
Strategy	Strategy 1.6.1 Conduct outreach to stakeholders to increase the number of Certified Peer Support Specialists and the role of CPSSs	On Track		
Output	Number of peers/family members trained as CPSSs	On Track	36	
Output	Number of CPSSs employed	On Track	159	

Output	Number of DMH Certified Providers employing CPSSs	On Track	33	
Outcome	Increase the number of trainings for transformation to a person-centered and recovery-oriented system of care	On Track	9	
Strategy	Strategy 1.6.2 Provide training and technical assistance to service providers regarding Recovery Model, Person Centered Planning & System of Care Principals, etc.	On Track	9	
Output	Number of trainings	On Track	9	
Output	Number of participants	On Track	268	This value represents training and technical assistance offered by the Division of Recovery and Resiliency
Outcome	Develop recommendations on how to best utilize Personal Outcome Measures (POM) data for adult mental health services	On Track		FY17 and FY18 POM data will be compared to previous years POM data to determine what critical areas are in need of improvement or enhancement.
Strategy	Strategy 1.6.3 Establish a workgroup to review previous POM data	Achieved		Seven providers were visited to review previous years POM data. Training and technical assistance was offered. The work group will review data collected FY17/18 and offer recommendations on what critical areas are needed for improvement.
Output	Number of recommendations on how to utilize data	On Track	0	Recommendations will be given when all data is collected and analyzed.
Output	Developed plan on how to implement recommendations	On Track		A workgroup was established to develop a plan to implement recommendations.
Outcome	Complete the development of a CPSS program for caregivers/parents and host two trainings	On Track		The first CPSS parents/caregiver training was conducted on March 28-31, 2017. There were 13 individuals certified as CPSS parent/caregiver. The next training is scheduled for the first quarter of FY18.
Strategy	Strategy 1.6.4 Establish a CPSS customized training for caregivers/parents	Achieved		A customized CPSS training for parent/caregivers has been developed.
Output	Number of trainings	On Track	1	
Output	Number of participants	On Track	13	
Output	Number of CPSS caregivers/parents	On Track	13	
Objective	Objective 1.7 Provide community supports for children transitioning to the community and to prevent out-of-home placements	On Track		
Outcome	Increase the number of children and youth that are served by MAP teams	On Track	1077	
Strategy	Strategy 1.7.1 Utilize MAP Teams to help serve children and youth in their community and prevent unnecessary institutionalizations	On Track		In FY17, 55 MAP Teams were utilized statewide to coordinate services among agencies to help children and youth remain in their communities.

Output	Number served by MAP teams	On Track	1077	In FY17, 1,077 children and youth were served by MAP Teams.
Output	Number of MAP teams	On Track	55	In FY17, there were 55 MAP Teams.
Outcome	Increase the statewide use of Wraparound Facilitation with children and youth	On Track	1706	In FY17, 1,706 unduplicated children/youth were served.
Strategy	Strategy 1.7.2 Evaluate the utilization and practice of Wraparound Facilitation for children and youth with SED	On Track		
Output	Number of individuals that have been trained in Wraparound Facilitation	On Track	345	For FY17, 345 individuals have been trained.
Output	Number of providers that utilize Wraparound Facilitation	On Track	12	In FY17, 12 providers were certified to provide Wraparound Facilitation.
Output	Number of children and youth that are served by Wraparound Facilitation	On Track	1706	In FY17, 1,706 unduplicated children/youth received Wraparound Facilitation.
Output	Number of youth that received Wraparound Facilitation that were diverted from a more restrictive placement	On Track	1076	In FY17, 1076 children/youth were diverted from restrictive placement.
Outcome	Increase by 10% access to an evidence-based intervention program for youth and young adults (ages 15-30) who have experienced a first episode of psychosis	Achieved	75	In FY16, four youth were served. In FY17, 16 youth were served.
Strategy	Strategy 1.7.3 Assist youth and young adults in navigating the road to recovery from an episode of psychosis, including efforts to function well at home, on the job, at school and in the community through the Coordinated Specialty Care Team	On Track		
Output	Number of appropriate referrals	On Track	16	In FY17, NAVIGATE served 16 youth/young adults.
Output	Number and type of supports/services provided	On Track	7	In FY17, services provided include: crisis intervention, community support, peer support, physician/nurse, medication management, outpatient therapy, and employment/education support.
Output	Number of youth and young adults maintained in his/her home and/or community	On Track	16	16 maintained in home/community.
Outcome	Increase youth successfully transitioned from the Specialized Treatment Facility (STF) to communities with supportive wrap-around aftercare	On Track	82	
Strategy	Strategy 1.7.4 Educate parents/guardians of youth transitioning from STF of supportive wrap-around options so that families may choose via informed consent	On Track		

Output	Number of youth referred to MYPAC aftercare	On Track	25	
Output	Number of youth referred to a local Community Mental Health Center aftercare	On Track	31	
Output	Number of youth referred to a supportive aftercare provider other than MYPAC or a local Community Mental Health Center	On Track	12	
Output	Number of youth actually transitioned to MYPAC aftercare	On Track	16	
Output	Number of youth actually transitioned to a local Community Mental Health Center aftercare	On Track	17	
Output	Number of youth who attended the Initial Intake with the referred local Community Mental Health Center aftercare provider	On Track	21	
Output	Number of youth who attended the first appointment after the Initial Intake with the referred local Community Mental Health Center aftercare provider	On Track	19	
Goal	To increase access to community-based care and supports for people with intellectual and/or developmental disabilities through a network of service providers that are committed to a person-centered system of care	On Track		
Objective	Objective 2.1 Provide community supports and services for persons transitioning to the community from an institutional setting	On Track		
Outcome	Increase the number of people transitioning to the community from the ICF/IID Regional Programs by 5% each year	Achieved	7	
Outcome	Decrease percentage of people currently accessing ICF/IID level of care in an institutional setting	On Track		HRC: 8.66% ESS: .34% BRC: 29.30% NMRC: 6.30% SMRC: 7% The overall decrease percentage of people accessing ICF/IID level of care in an institutional setting is 10.3%.
Strategy	Strategy 2.1.1 Ensure people transitioning to the community have appropriate options for living arrangements	On Track		BIDD continues to certify new community providers and establish new services with current providers to ensure ID/DD Waiver services and appropriate options for living arrangements are available.
Output	Number of people transitioned from facility to ICF/IID community home	On Track	39	

Output	Number of people transitioned to community waiver home/apartment/host home	On Track	48	
Output	Number of people transitioned home with waiver supports	On Track	21	
Objective	Objective 2.2 Educate families, schools and communities on options, services and supports available for people with IDD	On Track		
Outcome	Create a statewide public awareness campaign to increase knowledge of community services available to persons with intellectual and developmental disabilities	On Track		BIDD provides public awareness activities including IDD Awareness Day at the Capitol along with informational meetings for parents, family members, and providers routinely throughout the state.
Strategy	Strategy 2.2.1: Establish a workgroup with representatives from all programs	Achieved		BIDD established representatives from the Regional Program's public relations departments and BIDD Division Directors for tracking and providing community awareness events and activities.
Output	Number of educational materials developed	On Track	8	Materials included: Powerpoint presentation, brochures, flyers and a transition services booklet which highlights personal stories of success.
Output	Number of public awareness events attended	On Track	127	127 public awareness activities and events were attended including the IDD Day at the Capitol.
Output	Number of materials/stories distributed	On Track	3155	3155 educational and informational materials were provided to parents, families, and providers
Objective	Objective 2.3: Provide a comprehensive system of community programs and services for people with intellectual and developmental disabilities seeking community-based service options	On Track		
Outcome	Percentage of people with intellectual and developmental disabilities served in the community versus in an institutional setting (community is waiver/non-waiver/group homes and institutional is campus residential)	On Track	71	1061 person served at the Regional Programs. 2646 persons served with ID/DD Waiver services. 71 % of total served lived in the community.

Outcome	Serve 400 additional people through the 1915i (IDD Community Support Program)	At Risk		Enrollment is 467. There were 25 discharges since July 1, 2016. Most of these are due to people being offered enrollment in the ID/DD Waiver. Some providers are refusing to enroll or limiting enrollment of persons on Community Support Program (CSP) due to the Day Habilitation rate not being sufficient to meet the cost of staffing needs. The Division of Medicaid has initiated a rate study, but has given no indication as to when it will be completed. The Division of Medicaid also has had issues with electronic billing for CSP requiring many providers to continue to send paper billing leading them not being willing to add additional people. The rates and billing problems have contributed to lack of new providers applying to provide CSP Services. Current providers are at capacity.
Outcome	Transition an additional 250 people from the Planning List to Waiver Services	Off Track	133	
Strategy	Strategy 2.3.1 To increase the availability of comprehensive community programs and services	On Track		All of the outputs under this strategy include DMH's Regional Programs and DMH Certified Providers, with the exception of people receiving ID/DD waiver support coordination services which is DMH Regional Programs only.
Output	Number of people receiving Transition Assistance	On Track	16	
Output	Number of people receiving in home nursing respite	On Track	198	
Output	Number of people receiving in home respite services	Not Started		
Output	Number of people receiving behavioral support services	On Track	70	
Output	Number of people receiving crisis support services	On Track	44	
Output	Number of people receiving intervention services	On Track	16	
Output	Number of people receiving supported employment services	On Track	277	
Output	Number of people receiving supported living services	On Track	163	
Output	Number of people receiving host home services	Not Started		
Output	Number of people receiving day services adult	On Track	1067	
Output	Number of people receiving pre-vocational services	On Track	1045	

Output	Number of people receiving home and community support services	On Track	1320	
Output	Number of people receiving ID/DD waiver support coordination services	On Track	2633	
Output	Number of people receiving targeted case management services	On Track	660	
Output	Number of people receiving Community Support Services/Case Management	On Track	104	
Output	Number of people receiving comprehensive diagnostic evaluations	On Track	1083	
Output	Number of people receiving job discovery services	On Track	63	
Output	Number of people receiving work activity services	On Track	144	
Output	Number of people receiving supervised living services	On Track	695	
Objective	Objective 2.4 Provide Supported Employment Services to people with IDD in partnership with the Department of Rehabilitation Services	On Track		
Outcome	Number of referrals for Supported Employment Services in partnership with the Mississippi Department of Rehabilitation Services	On Track	23	
Strategy	Strategy 2.4.1 Develop a statewide plan to increase employment opportunities	On Track		An IDD Employment Workgroup was brought together to examine ways in which DMH could provide guidance to sheltered workshops during the transition away from sheltered work. The IDD Employment Workgroup met twice and developed an outline for sheltered workshops to use as a guide informing families and people receiving services about changes to their services. The IDD Workgroup will continue to meet to further refine the definition of Prevocational Services as well as the minimum requirements for community participation for people attending other types of day programs.
Output	Increase percentage of people utilizing supported employment services	On Track		The number of people receiving Supported Employment increased from 224 to 254.

Output	Decrease percentage of people utilizing pre-vocational services	At Risk		The utilization of Prevocational Services has not decreased. The reimbursement rate for Prevocational Services through the IDD Community Support Program is higher than the reimbursement rate for Day Habilitation. Therefore, providers are encouraging people to enroll in Prevocational Services. DMH has requested a rate increase from the Division of Medicaid. They have indicated they will conduct a rate study, but they have given no timeline. For the ID/DD Waiver, DMH has held a series of statewide meetings regarding decreasing the use of Prevocational Services, per requirements from the Centers for Medicare and Medicaid Services (CMS-Medicaid's federal governing authority). Providers have been asked to submit transition plans indicating how they will reduce the number of people and utilization rates for Prevocational Services.
Strategy	Strategy 2.4.2 Develop a curriculum for job coaches and job trainers in partnership with MDRS	On Track		DMH staff and MDRS staff are continuing work on this project. The Mississippi Council on Developmental Disabilities awarded mini-grant to coordinate the development of a curriculum for job trainers/coaches employed by the Department of Rehabilitation Services, ID/DD Waiver providers and IDD Community Support Program providers. Staff from the DMH, MDRS, Arc of MS, Goodwill Industries (a provider), and representatives from APSE and Disability Rights Mississippi are collaborating to develop the curriculum by December 2018.
Output	Number of job trainers and job coaches trained	On Track		Planning to conduct this training continues.
Goal	To ensure people receive quality services in safe settings and utilize information/data management to enhance decision making and service delivery	On Track		
Objective	Objective 3.1 Provide initial and ongoing certification services to ensure community-based service delivery agencies making up the public mental health system comply with state standards	On Track		

Outcome	Increase the number of certified community-based service delivery agencies, services, and programs	On Track		
Strategy	Strategy 3.1.1 Provide interested provider orientation to educate agencies seeking DMH certification on the requirements for certification and service provision.	On Track	4	
Output	Number of interested provider agencies participating in interested provider orientation	On Track	125	
Output	Number of completed applications received by DMH for new provider agency certification	On Track	30	
Output	Number of new provider agencies approved	On Track	9	
Output	Number of completed applications received by DMH for services added by a DMH certified provider agency	On Track	35	
Output	Number of new services added by a DMH certified provider agency approved	On Track	35	
Output	Number of completed applications received by DMH for programs added by a DMH certified provider agency	On Track	107	
Output	Number of new programs added by a DMH certified provider agency approved	On Track	107	
Objective	Objective 3.2 Ensure individuals receiving community-based services through the public mental health system have an objective avenue for accessing services and resolution of grievances related to services needed and/or provided	On Track		
Outcome	Increase number of positive grievance resolutions related to grievances received through the Office of Consumer Support	On Track		
Outcome	Increase public knowledge about services through information and referral	On Track		
Strategy	Strategy 3.2.1 Make toll-free number available to individuals receiving services through the public mental health system and other stakeholders to seek information and/or referral and file grievances related to services provided by DMH certified provider agencies	On Track		Ongoing. The DMH Helpline phone number is posted at each DMH certified program location which is monitored through certification visits. Additionally, it is advertised on the DMH website, Facebook page, and other DMH publications.
Output	Number of calls seeking information and/or referral received through DMH's toll-free number	On Track	6441	
Output	Number of grievances filed through the Office of Consumer Support	On Track	205	

Outcome	Increase access to care for individuals with multiple hospitalizations through Specialized Placement Options Transition Team (SPOTT)	On Track		96 placements and 148 referrals
Strategy	Strategy 3.2.2 Evaluate the utilization of the Specialized Placement Option to Transition Team (SPOTT)	On Track		148 referrals to SPOTT
Output	Number of referrals made to the Specialized Placement Option to Transition Team (SPOT)	On Track	148	
Output	Number of placements made through SPOTT	On Track	96	
Objective	Objective 3.3 Utilize evidence-based or best practices among DMH Programs and DMH Certified Providers for core services	On Track		
Outcome	Increase the number of evidence-based and emerging best practices trainings by 5% each year	On Track		
Strategy	Strategy 3.3.1 Promote at least six evidence-based, best practices and promising practices trainings offered through the DMH learning management system through internal communication efforts	Achieved		
Output	Number of trainings promoted	On Track		Three flyers were distributed to DMH and DMH Certified Providers promoting nine evidence-based, best practices and promising practices trainings offered through Relias, DMH's learning management system
Outcome	Ensure DMH Programs and DMH Certified Providers are utilizing evidence-based practices, best practices and promising practices	On Track		
Strategy	Strategy 3.3.2 Gather and verify information on all evidence-based practices, best practices and promising practices actively used by DMH Programs and all DMH Certified Providers	On Track		
Output	Number of evidence-based practices, best practices and promising practices actively used by DMH Certified Providers	On Track		This information will be gathered during the site visit process beginning in January 2017.

Output	Distribute a survey to DMH Programs to evaluate the use of evidence-based practices, best practices and promising practices, at DMH Programs	Achieved		In August 2016, DMH distributed a survey to all 12 Programs to compile a list of the evidenced-based, best and emerging practices currently being used at the Programs. The survey included service areas, practice utilized, fidelity monitored, and fidelity measurement. All 12 Programs responded to the survey and a list of the practices were compiled.
Output	Number of evidence-based practices, promising practices, or best practices actively used by DMH Programs	On Track	82	
Objective	Objective 3.4 Develop an Electronic Health Records system to improve services provided to individuals served	On Track		
Outcome	Implement an Electronic Health Records system at all DMH Behavioral Health Programs and IDD Programs	Achieved		An electronic health records system has been implemented at all DMH Programs.
Strategy	3.4.3 Utilize client web portal for reviewing their health information	At Risk		Due to the statewide security policy, we are unable to meet this output with our current EHR. There is an update to the system that we should be getting by 2018 that will change the network protocol and work on our statewide network. There is also a challenge with the clients that we serve and their ability to setup and check the patient portal.
Output	% of clients served who view their health information online	At Risk	0	See above comment.
Outcome	Automate the interface from the electronic health records system to labs, pharmacies, and Dr. First	Off Track		In an effort to save money and lower support costs for our EHR, we are consolidating the 10 EHR systems into 2 systems. MSH is currently using a lab and pharmacy interface at Whitfield Med. The other Program's interface development will begin after the consolidation.
Strategy	3.4.1 Utilize computerized provider order entry (CPOE) for medication orders	Off Track		In an effort to save money and lower support costs for our EHR, we are consolidating the 10 EHR systems into 2 systems. There will be one for Mental Health and one for IDD. After consolidation, a standardized CPOE will be used in our EHR. MSH is currently using CPOE at Whitfield Med.
Output	Report to CMS for Meaningful Use	Off Track		EMSH and MSH are at 90% for meeting Meaningful Use objectives. Their reporting period begins Oct. 2, 2017. If we are unable to meet 100%, we will not meet Meaningful Use.

Strategy	Strategy 3.4.2 Replace manual reporting with electronic online reporting	On Track		The EHR system has a multitude of online reporting but there is still manual reporting in place. This is due to the fact that if the EHR system is down or a disaster hits, staff will have access to client information.
Output	Number of permissible prescriptions and lab requests generated and transmitted electronically (eRx)	Achieved	100	The information below is from the Program's pharmacy. MSH - 2736 NMSH - 13030 SMSH - 9985 EMSH - 2371
Output	Return on investment	At Risk	1195000	While AIU money was received by EMSH and MSH for Meaningful Use, they are struggling to meet all of the Meaningful Use objectives. Without the patient portal process, they will not meet 100% of Meaningful Use objectives. EMSH and MSH currently meet 90% of the objectives.
Outcome	Develop a bed registry to track data daily to maximize the availability of DMH operated and funded program beds	On Track		An online bed count dashboard has been discussed and requirements gathered. The Crisis Stabilization Units will pilot this website beginning in August 2017.
Strategy	Strategy 3.4.4. Based on data from EHR, create centralized web portal for checking bed availability at Behavioral Health Programs	On Track		While each DMH program running the same EHR has their own bed dashboard and census, a central bed dashboard can be created after EHR consolidation.
Output	Developed web portal	On Track		See above comment.
Objective	Objective 3.5 Maximize the efficiency of collecting and accessing Central Data Repository	On Track		
Outcome	Increase the validity and timely reporting of data by 30% to meet federal, state and DOJ reporting requirements	Achieved	40	
Outcome	Utilize a dashboard for 20% of service categories for CDR and URS tables	Achieved	100	All CDR service categories reports can be viewed from the CDR Dashboard.
Outcome	Increase access to all CDR reports and dashboard by create one central location	Achieved		
Strategy	Strategy 3.5.1 Establish CDR user groups for DMH Programs, CMHCs, and Private Providers that meet on a quarterly basis	Achieved		CDR user groups have been defined and meet on a quarterly basis.
Output	% of participants in user groups compared to total DMH number of DMH Certified Providers	On Track	20	The number of participants in the user groups varies from quarter to quarter.
Strategy	Strategy 3.5.2 Develop a dashboard for DMH leadership to track progress and eliminate manual reporting	Achieved		A Dashboard has been created and placed on the DMH Intranet for DMH leadership to review and track progress.

Output	Number of service categories displayed on a dashboard	Achieved	100	All CDR service categories are included in the monthly services by provider report.
Strategy	Strategy 3.5.3 Develop a CDR website for viewing CDR reports and dashboard	Achieved		
Output	Number of reports available	Achieved	5	
Output	Number of people accessing reports	Achieved	100	The following reports are displayed on the CDR website. Number Served by Age, Gender, Race, Ethnicity Admissions/Discharge Overview by Provider Admissions/Discharge Totals by Provider Services by Provider by Month Monthly Data Submission Report.