

FY 2011

**Third Quarter Data Report to
Durham Area Board**



August 4, 2011

**Report to The Durham Center Area Board of Directors
Third Quarter FY 2011 – Data Report**

This report allows the reader to view “at a glance” the main indicators of effectiveness to which The Durham Center is holding itself accountable. Additional presentations to the Area Board of Directors will focus more in-depth on one of the indicators described on the following pages, or on other critical systems improvement initiatives.

The indicators fall under the three goals in The Durham Center’s FY 11 – 13 Strategic Plan:

Goal One:

The Durham Center will Adopt Exemplary Practices in Managing Care

Goal Two:

The Durham Center will Ensure the Quality of Life for Consumers Served Improves

Goal Three:

The Durham Center will Develop High Quality Services and Supports for Consumers

In this report, data is presented to support measurable indicators of the above outcomes. All indicators will be reported on a quarterly basis unless noted otherwise.

Green lines specify targets for some of the indicators (note that not all indicators have specific targets outlined at this time).

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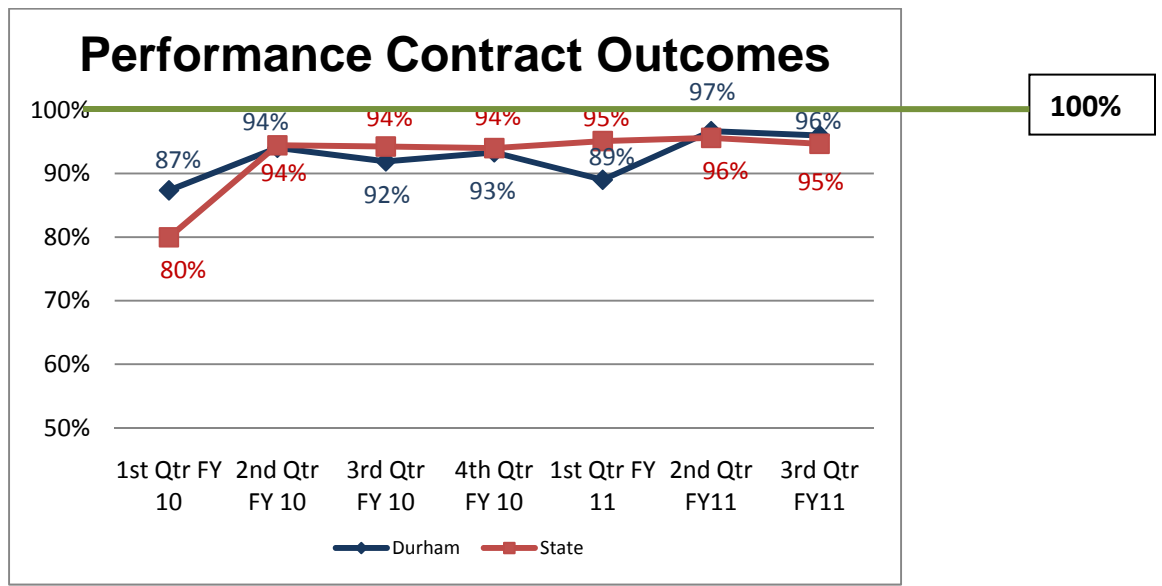
THE DURHAM CENTER DASHBOARD FOR FISCAL YEAR 2011

Objective	Data Source	Projected Outcomes	Q1	Q2	Q3	Q4	Current Status
Goal 1: The Durham Center will Adopt Exemplary Practices in Managing Care							
1.1 Meet 90% of State Performance Contract Outcomes:	DMH/DD/SAS Community Systems Improvement (CSI) & Performance Contract Reports	90% or >	89%	97%	96%		Met
1.1a: Services to Persons in Need 5% Above State Standards	DMH/DD/SAS CSI Report	MH: >50% SA: >12% DD: >40%	MH: A=52% MH: C=68% SA: A=12% SA: C=14%	MH: A=54% MH: C=66% SA: A=12% SA: C=13%	MH: A=56% MH: C=65% SA: A=12% SA: C=13%		MH: Met SA: Met
			DD: A=39% DD: C=28%	DD: A=39% DD: C=28%	DD: A=39% DD: C=27%		DD: Not Met
1.1b: Service Engagement is 5% Above State Standards	DMH/DD/SAS CSI Report	MH: >39% SA: >57% DD: >60%	MH: = 43% SA: = 74%	MH: = 42% SA: = 66% DD: = 64%	MH: = 42% SA: = 70% DD: = 63%		MH: Met SA: Met DD: Met
1.1c: Min. of 55% SA Consumers Retained for 4 visits in 45 days	DMH/DD/SAS CSI Report	>55%	53%	53%	49%		Not Met
1.2 At Least 35% of State/Local Funds are Used for Best Practices	Paid Claims and Provider Reports	35% of >	41%	50%	57%		Met
1.3 25% of Budget Expended per Qtr	Paid Claims/non-UCR Rev & Exp	25%	17%	21%	17%		Not Met
1.4 Monitor the number of Individuals Waiting for Services	Provider Reports (includes individuals waiting for CAP)	Collect Baseline	End of Qtr=300 Avg for Qtr=295	End of Qtr=275 Avg for Qtr=297	End of Qtr=325 Avg for Qtr=317		N/A
Goal 2: The Quality of Life and Outcomes for Consumers and Their Families will Improve							
2.1 The Rate for Individuals Admitted at EDs will be Less than 75 per 10,000	NC-DETECT	75 or <	N/A (88.3 for FY10 Q4)	N/A	N/A		Data Available Next Quarter
2.2 State Psychiatric Hospital Admissions will be 20 or Less/ month	DMH/DD/SAS HEARTS Data	< 20 per Month	17	18	20		Met
2.3 Less than 30% Admitted to State Hospital for 1-7 Days	DMH/DD/SAS CSI Report	< 30% - 1-7 Days	27%	25%	20%		Met
2.4 Reduce State Psychiatric Hospital Readmissions	DMH/DD/SAS CSI Report	<10% - 30 Days <22% - 180 Days	30 Days=14% 180 Days=26%	30 Days=8% 180 Days=20%	30 Days=10% 180 Days=22%		Met
2.5 85% of Consumers/Families will be Satisfied with Services	(Annual) National Core Indicators (DD) & Needs Assessment; (Quarterly) Sample Survey of Consumers	85% or >	N/A	90%	N/A		Data Available in Fall
Goal 3: The Durham Center Will Develop an Array of High Quality Services and Supports							
3.1 50% of Consumers Receiving Housing Supports Remain in Stable Housing for 6 Months	TDC Housing Specialist; Data by Disability	50% or >	N/A	N/A	N/A		Data Available Next Qtr
3.2 1% or Less of Children Placed in Non-Family Settings	DMH/DD/SAS CSI Report	1% or <	1%	1.5%	1.8%		Not Met
3.3 75% of People Receiving Supported Employment Feel Services Meet their Needs	Sample Survey	75% or >	N/A	N/A	Survey deadline extended until 6/30/11		Data Available Next Qtr

Goal One: The Durham Center will Adopt Exemplary Practices in Managing Care

1.1: The Durham Center will meet at least 90% of the State Performance Contract Outcomes.

Each year a Performance Contract is developed between the Local Management Entities (LME) and NC DHHS. Each quarter the State provides a summary of LME status on critical measures (i.e., timely initiation and engagement in services and service to persons in need) and compliance in submitting required data/reports (Quarterly Incident Reports, NC SNAP) that are included within this *DHHS-LME Performance Contract*. The number of outcomes Durham has met continued to rise since FY 08. In the third quarter, The Durham Center met 96% of the performance standards. TDC did not reach 100% because of late NCTOPPS submissions. We continue to pursue an overall rating of 100%.

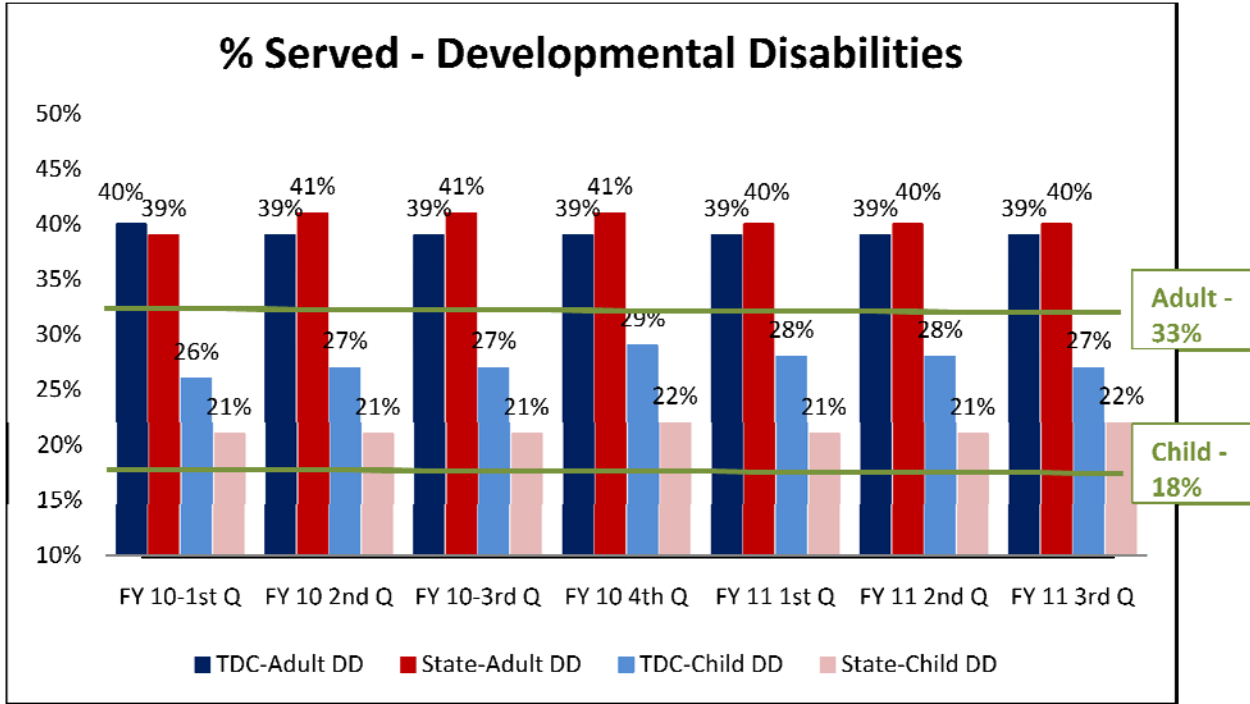


SOURCE: NCDHHS, NCDMHDDSAS, Community Systems Progress Indicators quarterly reports, FY08-FY11

In line with Durham Center’s Strategic Plan, several of the performance contract outcomes will be prioritized:

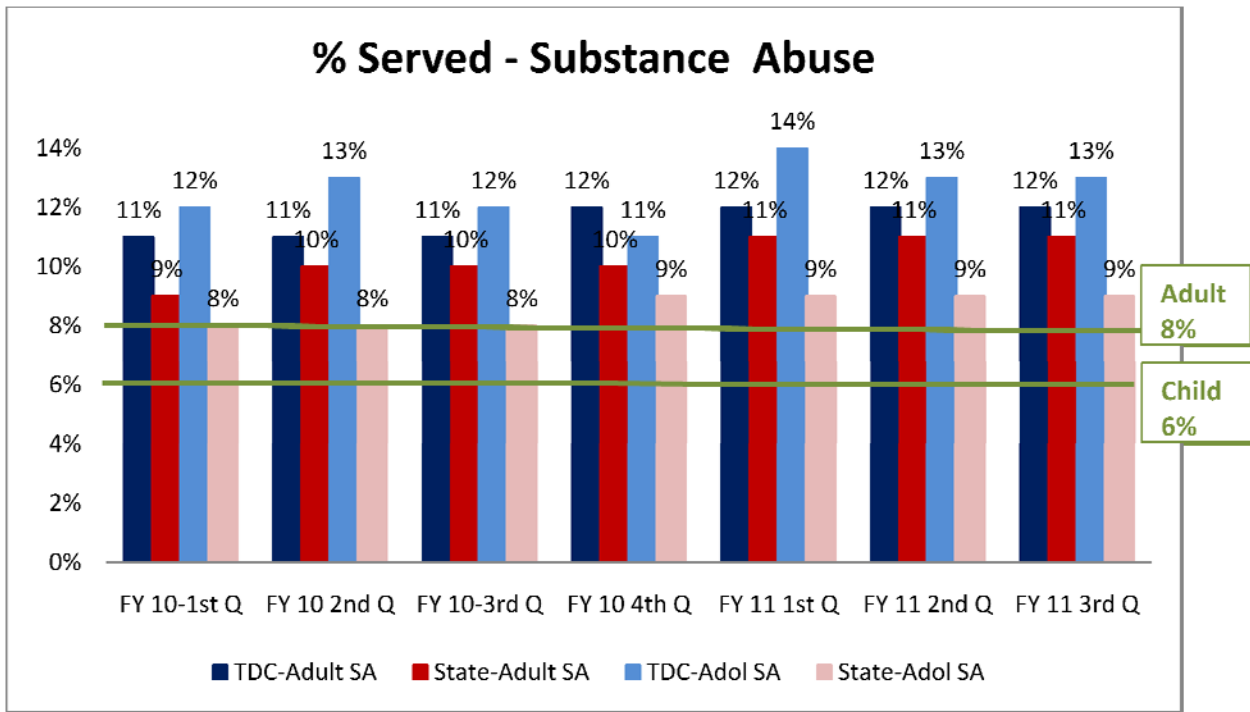
- Prevalence – The percentage of estimated individuals in need who present for services
- Engagement – The percentage of consumers who show for the first two appointments
- Retention in substance abuse treatment services – The percentage of consumers who show for the first four appointments.

1.1.A: Of the individuals estimated to need services, the following percentages, per disability group, will show for services: mental health - higher than 50%, developmental disabilities - higher than 40%, and substance abuse - higher than 12%.



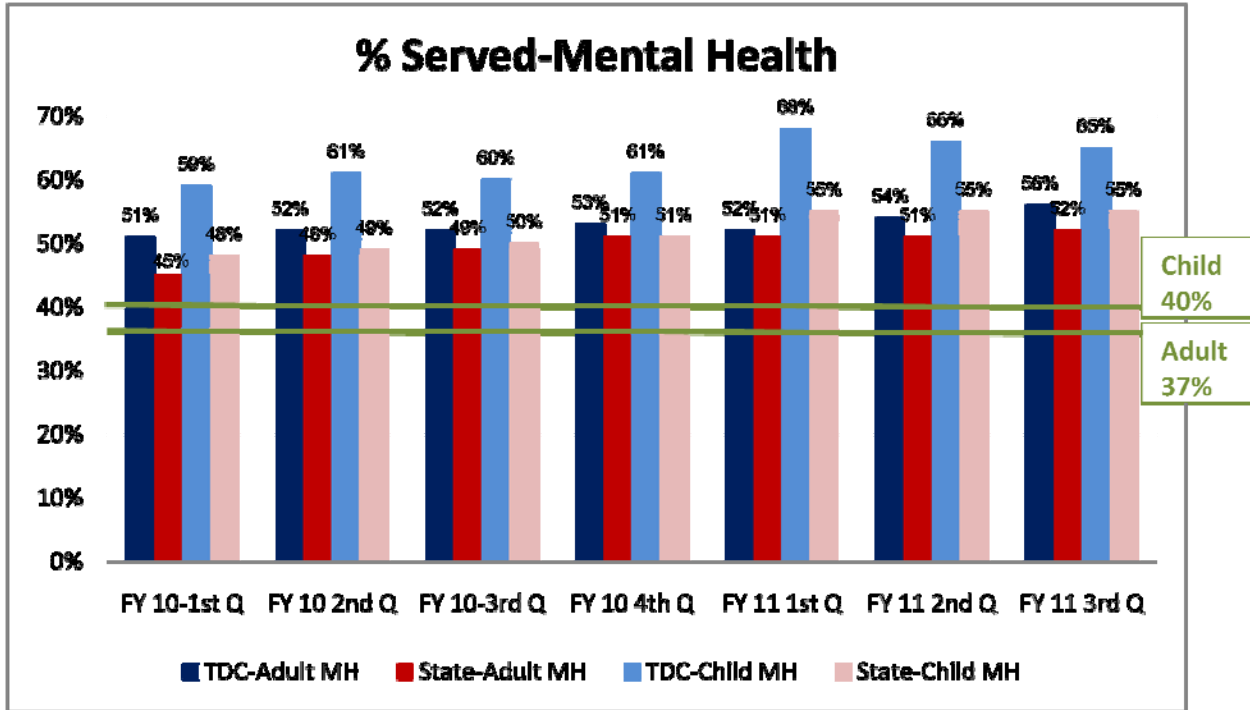
SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.

The percentage of individuals who present for developmental disability services has exceeded the state standards for both child (18%) and adult (33%) since FY 10. However, the percentages do not meet Durham Center’s FY 11 goals of 40%.



SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.

In Durham County, a greater percentage of individuals needing substance abuse treatment receive the treatment as compared to the average percent in other areas of the state and the state standard. Adolescent and adult substance abuse percent exceeds The Durham Center's FY 11 goal of serving greater than 12% of the estimated need.

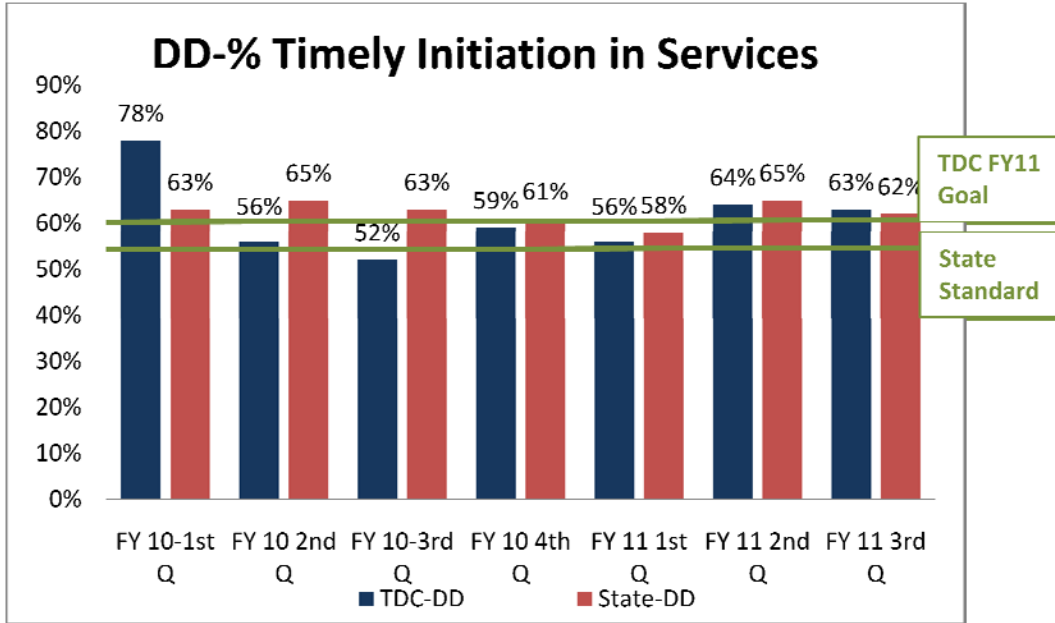


SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.

The percentage of individuals served with emotional disturbance or mental illness consistently exceeds the state standard, the state average, and Durham Center's FY 11 goal of 50%.

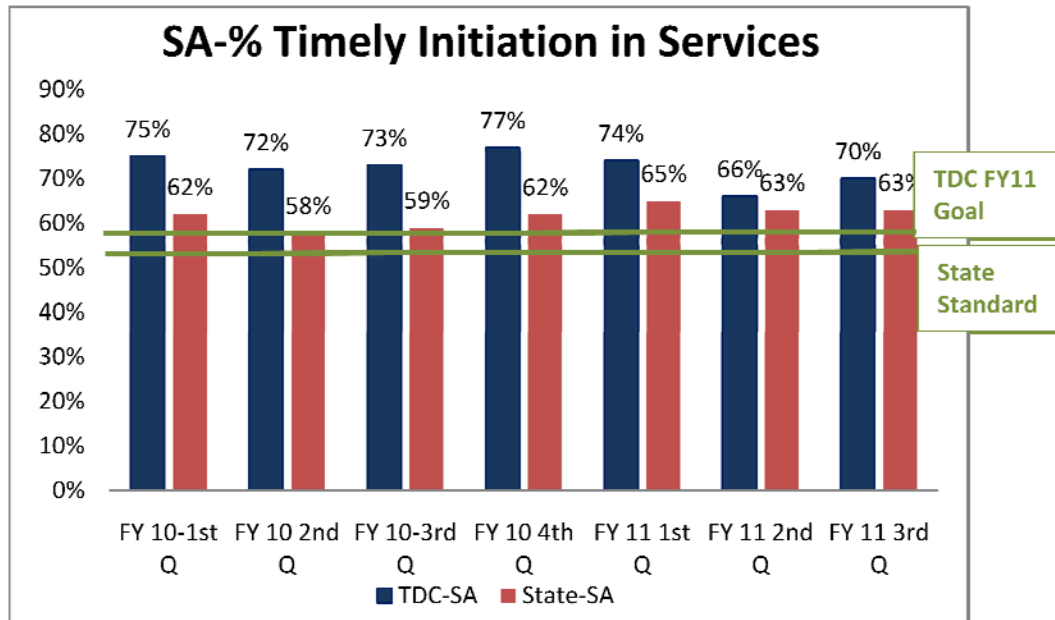
1.1.B: The engagement in services for each disability group will be 5% above the DMH/DD/SAS standards.

The State Division of Mental Health, Developmental Disabilities, and Substance Abuse Services sets standards for providers to engage consumers early in their services - 55% for developmental disability services (DD), 52% for substance abuse services (SA), and 34% for mental health services (MH).

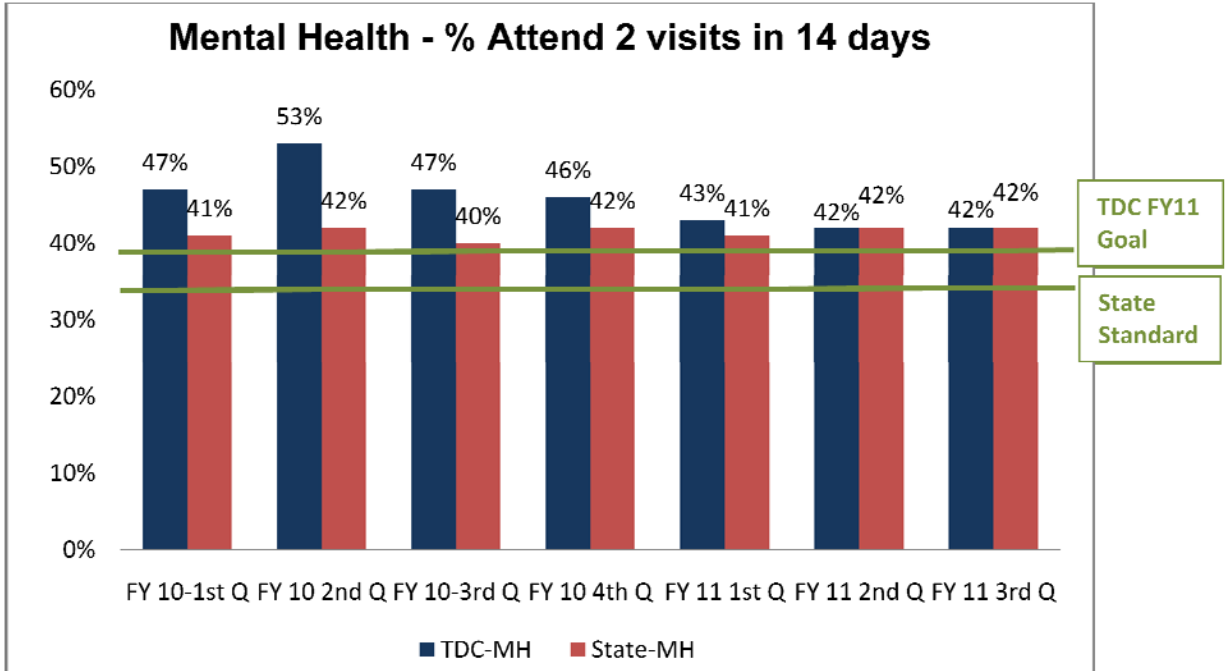


SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.

While Durham County providers consistently exceeded the state standards, they also met or exceeded The Durham Center's FY 11 higher goals of 60% (DD), 57% (SA), and 39% (MH).

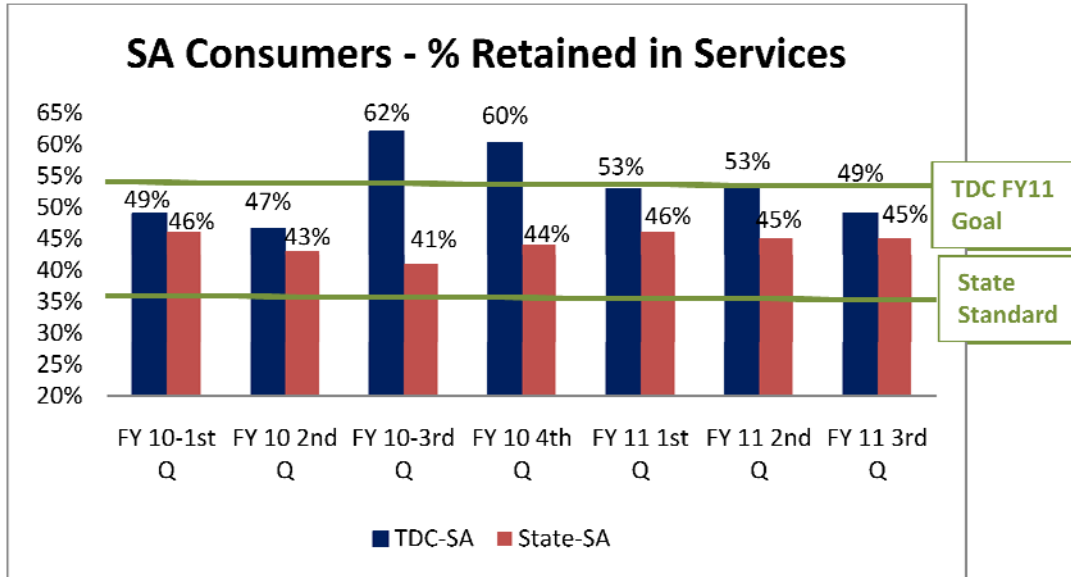


SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.



SOURCE: Medicaid and State Service Claims Data for paid through April 30, 2011.

1.1.C: There will be a minimum of 55% of consumers retained in substance abuse outpatient services for at least 4 contacts in 45 days.

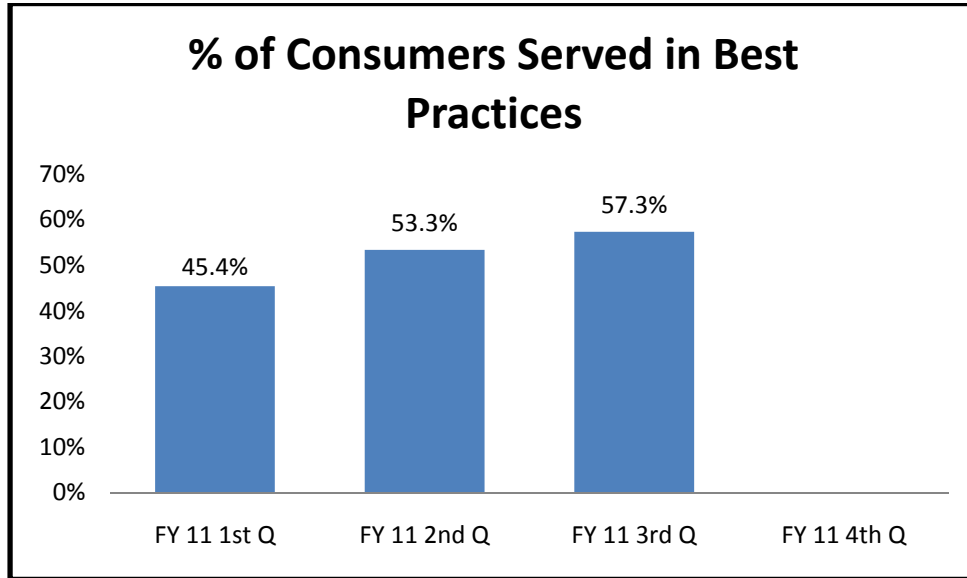


SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.

Research indicates that individuals who remain in substance abuse treatment for longer periods of time have better outcomes. Durham Center set a goal of 55% of individuals attending at least 4 sessions in 45 days. Data from the third quarter of FY 11 indicated that only 49% of consumers attended the four sessions provided by Durham Center network agencies. While the percentage falls below Durham Center goal, it is above the minimum state standard of 39%.

1.2: At least 35% of state and local funds will be used for evidence-based or best practice services.

The Durham Center has been building a system of services shown to be effective in research studies and evaluation for several years. The chart below shows the percent of consumers served in these programs.



Source: The Durham Center **state and local** paid claims data and non-UCR reimbursements submitted by providers between July 1 – March 31, 2011. Data for the 3rd Quarter indicated an unduplicated count of 2,139 consumers. Best practice programs served 1,226 individuals.

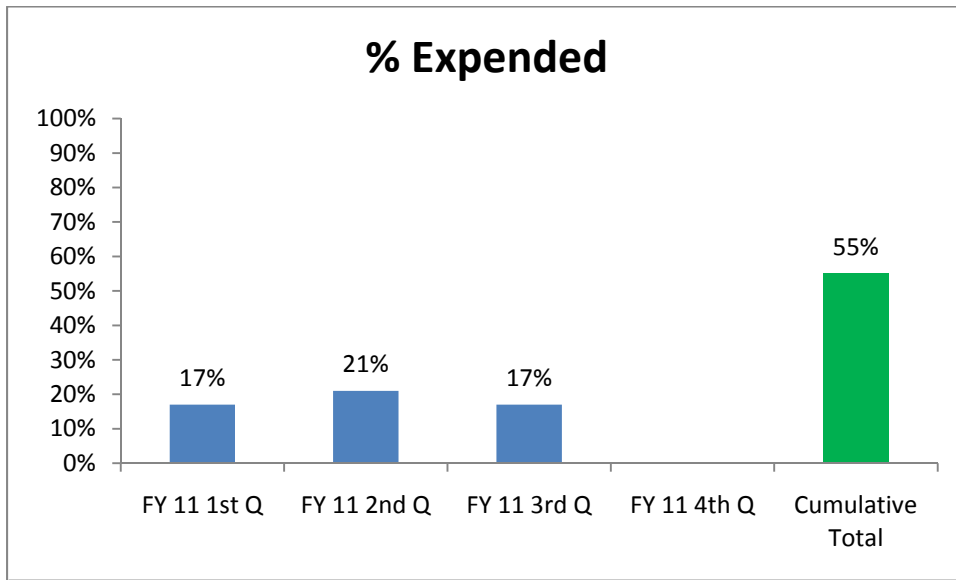
The services and programs considered best practice are as follows:

Programs:	Age Group	Disability
CASCADES (residential treatment for women & their children)	Adult	SA
Child Wrap-Around Initiative	Child	MH/SA
Dialectical Behavior Therapy	Adult	MH
Dual Disorder Intensive Outpatient Program	Adult	MH/ SA
Durham Inclusion Support Services	Child/Adult	DD
Family Care Program	Adult	SA
Lifetime Connections	Adult	DD
NC START (crisis response/consultation)	Adult	DD
Project Search	Child/Adult	DD
Seeking Safety	Adult	MH/SA
Substance Abuse Brief & Intensive Outpatient Program	Adult	SA
Substance Abuse Prevention (Nurturing Parenting, Family Support Program, Strengthening Families)	Child/Adult	SA
Supported Employment	Adult	DD/MH
Time Banks	Adult	DD
Voices Together	Adult	DD
Voucher Respite	Child/Adult	DD
Wellness, Management, & Recovery	Adult	MH

Services:	Age Group	Disability
Assertive Community Treatment Team (ACTT)	Adult	MH/SA/DD
Community Alternative to Employment Training (CAET)	Child/Adult	DD
Family Therapy	Child	MH/SA
Multisystemic Therapy (MST)	Child	MH/SA
Opioid Treatment	Adult	SA

1.3: Approximately 25% of our budget will be expended each quarter.

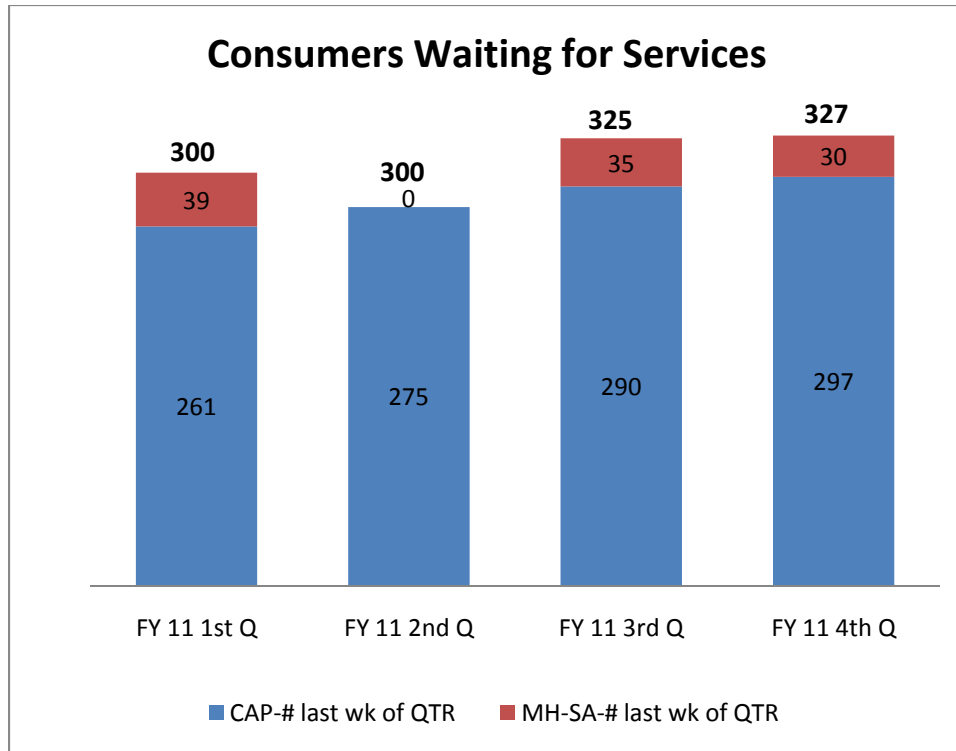
As stewards of public funding, The Durham Center strives to manage services effectively and efficiently. Expenditures increased in the second quarter to 21% of budget and decreased slightly in the third quarter to 17%. Overall, The Durham Center is slightly below its goal by spending 55% of the budget.



Source: The Durham Center state and local paid claims data between July 1 – March 31, 2011 and non-UCR expenditure claims submitted by providers.

1.4: Monitor # of Individuals Waiting for Services.

As the economic crisis continues, the need for behavioral health services has increased. The Durham Center will monitor the number of individuals waiting for services in order to identify service gaps and build needed services in the community.



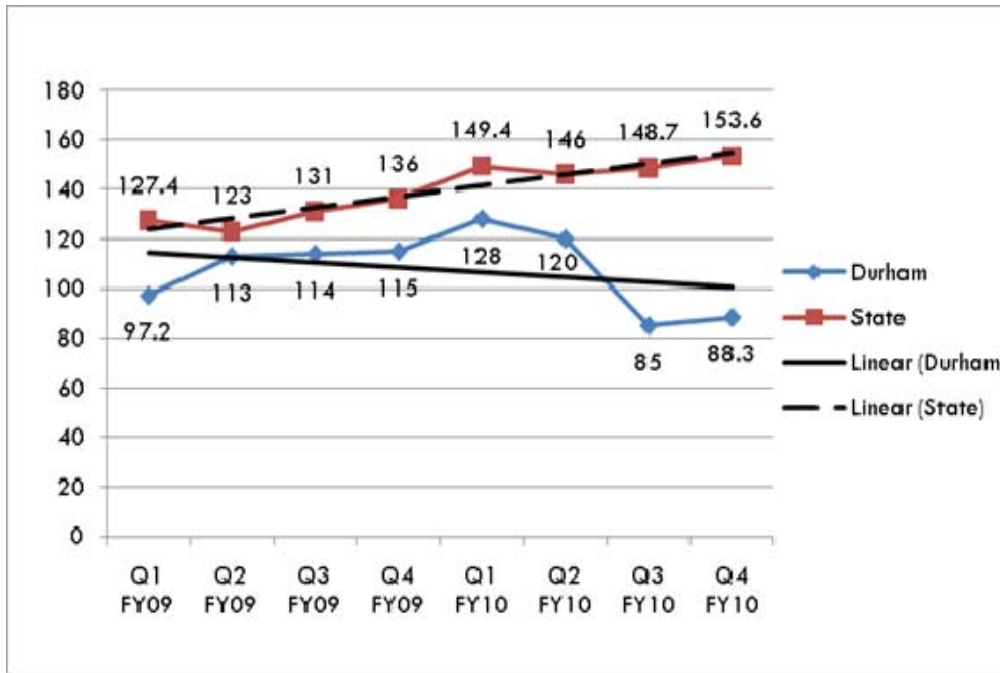
Source: Numbers submitted by providers from January 4 – June 30, 2011.

In the first half of FY 11, consumers waited for CAP-MR/DD (Medicaid waiver for individuals with developmental disabilities), the Family Support Program (in-home substance abuse prevention), residential substance abuse treatment programs, and intensive dual-disorder (MH-SA) program. The number waiting fell in the 2nd Quarter, primarily due to less demand around the major holidays (Thanksgiving and Christmas) and increased in the latter part of the fiscal year.

Goal Two: The Durham Center will Ensure the Quality of Life for Consumers Served Improves

2.1: % of Individuals with MH/DD/SA Diagnoses Admitted at Emergency Department will be less than 75 per 10,000 people.

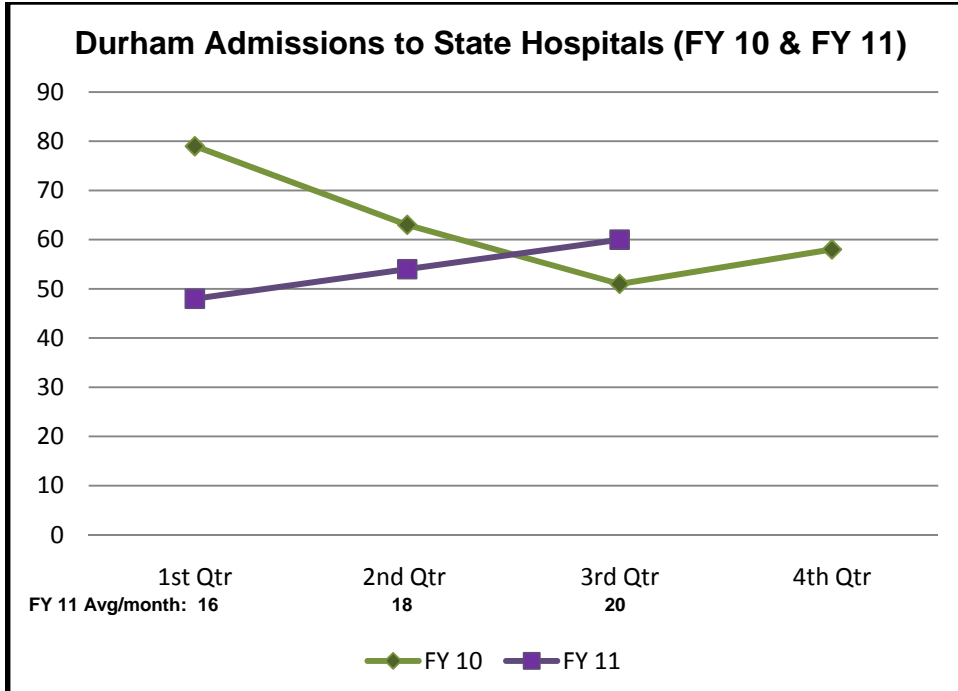
In past years, Durham County has had a history of high rates of admissions of individuals with behavioral health disorders (defined as either mental illness, substance abuse, or both) to community emergency departments. However, over the last two years, the rate for Durham County has been lower than the state average and continues to decrease. In fiscal year 2009 Durham’s rate was approximately 97 per 10,000 people, with the state average at approximately 127 per 10,000 individuals. With Durham’s rate continuing to decrease, the Durham Center (TDC) Local Management Entity (LME) currently ranks as the 4th lowest compared to the other LMEs for all disability groups. The statewide admissions have increased over the past 2 years, as indicated in the chart provided. Data for FY 11 has not yet been released.



Source: North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT), FY 11 data not yet available.

2.2: State Psychiatric Hospital Admissions Will be 20 or Less/Month.

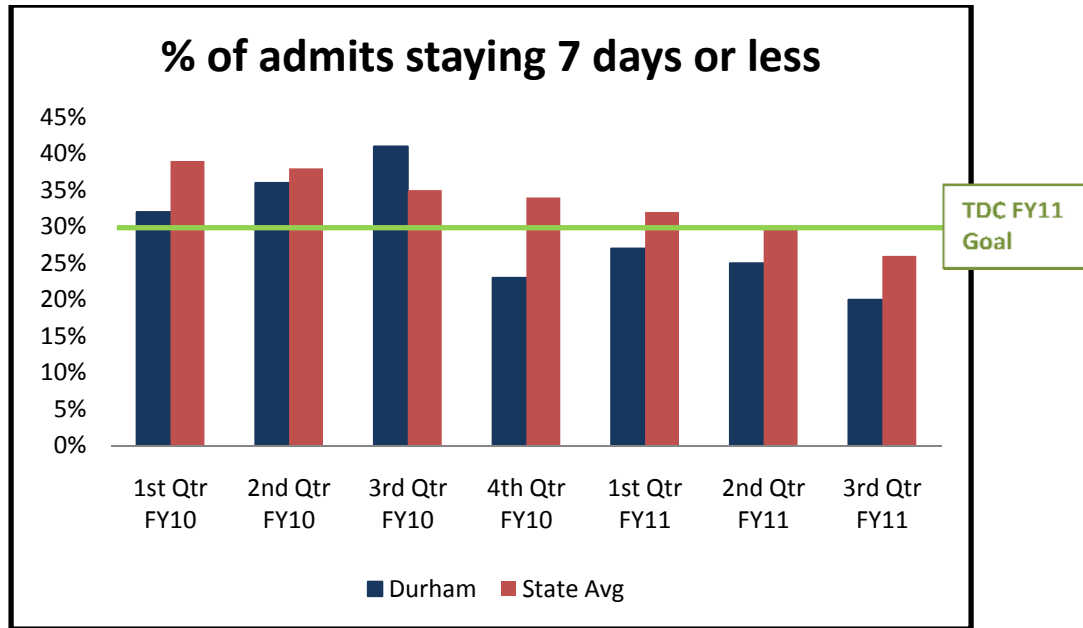
Admissions of Durham residents to state hospitals decreased by an estimated 76% over the last three years. Durham’s State Hospital admission rate had been consistently higher than the State rate until the 2nd Quarter of 2010 (October to December of 2009). The reduction in hospital use can be credited to Durham Center’s Hospital Plan, which includes Durham Center Access’ diversion of admissions to the State hospitals, the Mobile Crisis Team in 2009, and Durham Center’s care coordination efforts. TDC’s goal for FY 11 is to reduce admissions to no greater than 20 per month. In FY 11, an average of 16, 18, and 20 consumers per month (1st, 2nd, and 3rd Quarters, respectively) were admitted to the state facilities. We will continue ensure consumers are served in the most appropriate and least restrictive environments.



SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Data through March 31, 2011.

2.3: Less Than 30% of Durham Consumers will be Admitted to State Hospitals for 1 – 7 Days.

State psychiatric hospitals provide a safety net for the community service system. Adequate care in the community should provide short-term inpatient care in a local hospital. This helps families stay involved and reserves high-cost state facility beds for consumers with long-term care needs. Reducing the short-term use of state psychiatric hospitals also allows more effective and efficient use of funds for community services. This indicator is measured as the percent of persons discharged from state psychiatric hospitals each quarter who have a length of stay of 7 days or less.

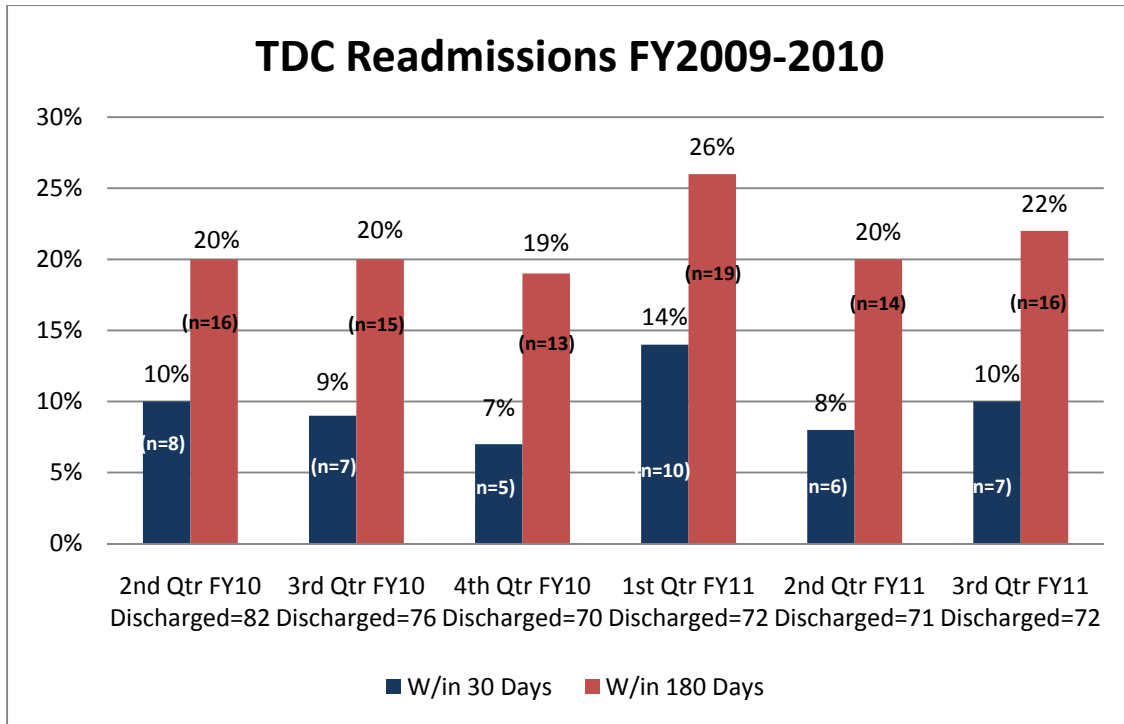


SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Data for discharges through March 31, 2011 as reported in the Consumer Data Warehouse (CDW) as of 5/9/11.

Except for the third quarter of FY 10, the percentage of Durham County residents who stay in state hospitals for 7 days or less has been lower than the state average. In the first three quarters of FY 11, the percentage has fallen below The Durham Center’s goal of less than 30%.

2.4: Reduce State Psychiatric Hospital Readmissions.

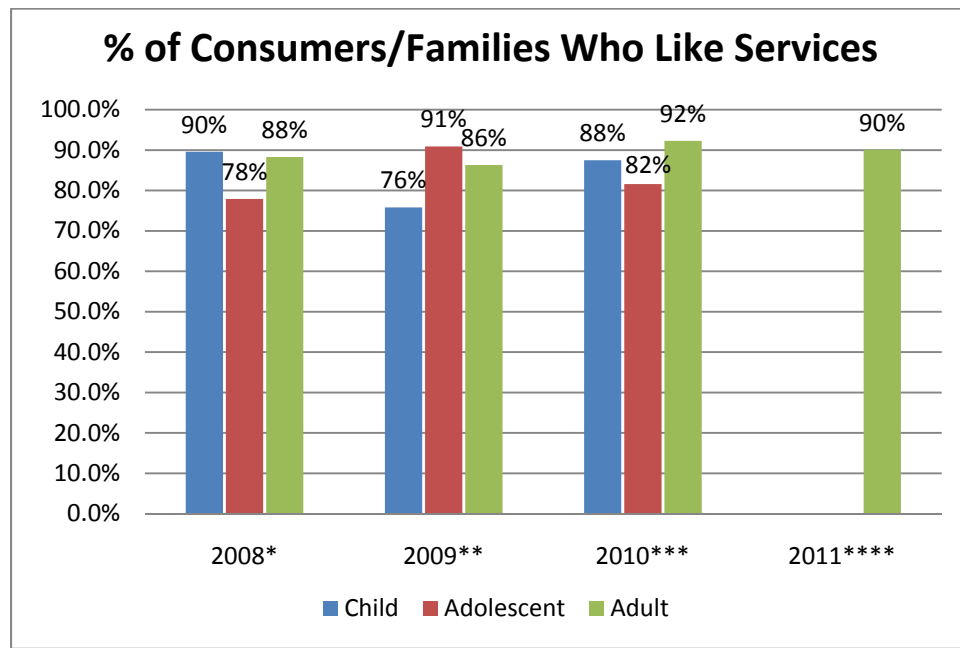
Successful community living, without repeated admissions to inpatient care, requires effective coordination and ongoing appropriate levels of community care after hospitalization. A low psychiatric hospital readmission rate is a nationally accepted standard of care that indicates how well a community is assisting individuals at risk for repeated hospitalizations. Historically, the rate of readmission for Durham County residents has been higher than the state average. The Durham Center’s FY 11 goal is no more than 10% for consumers re-admitted within 30 days of discharge and 22% of less for consumers re-admitted within 180 days. In every quarter since the 2nd Q of FY 10, except for the 1st Q of FY 11, TDC did meet its goal.



SOURCE: Healthcare Enterprise Accounts Receivable Tracking System (HEARTS) Data for discharges through March 31, 2011 as reported in the Consumer Data Warehouse (CDW) as of 5/9/11.

2.5: 85% of Consumers/Families will be Satisfied with Services.

The Durham Center received the results of perception of care surveys, conducted in 2009 and Spring of 2010, in December of 2010. The baseline results are provided below:



Source: NCDMH/DD/SAS, Perception of Care Survey Results, 2008, 2009, 2010 and The Durham Center Needs Assessment.

*2008 results from surveys sent by all service providers. **2009 results from providers of Intensive In Home and Community Support Team. ***2010 results from providers of Substance Abuse Intensive Outpatient Programs, Substance Abuse

Comprehensive Outpatient Treatment, Day Treatment, and Psychosocial Rehab. ****2011 data from Durham Center Needs Assessment. Number indicates % of consumers who strongly agree or agree with the statement "I am happy with the services I receive". A separate survey for families of children or adolescents in services was not administered.

Results from The Durham Center Needs Assessment Consumer Survey indicated that 90% of consumers were satisfied with their services. The Durham Center will continue to monitor satisfaction and respond to consumer/family concerns.

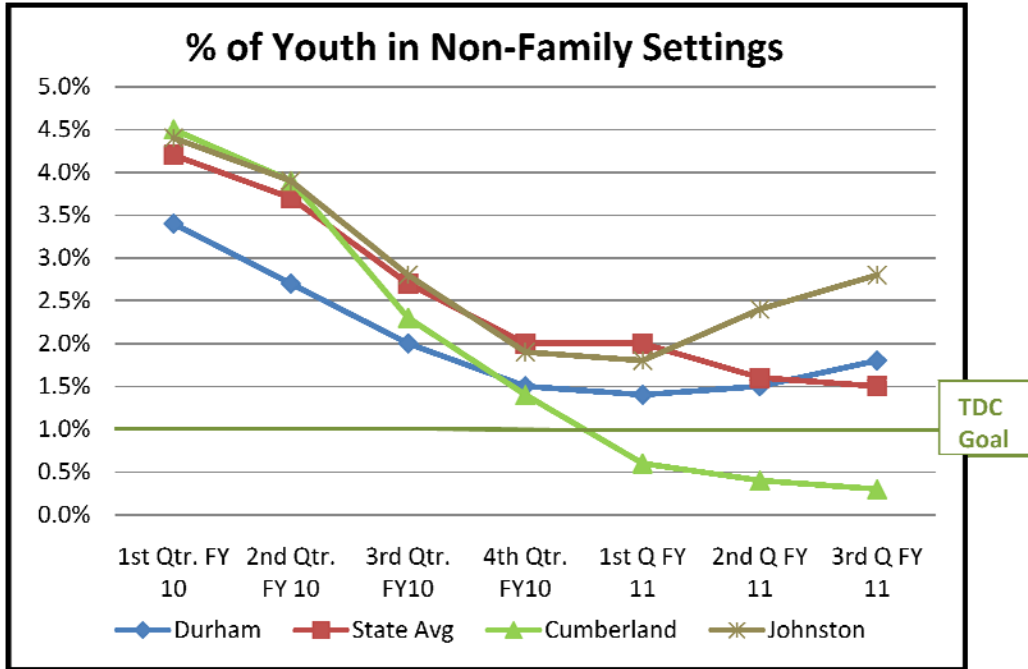
Goal Three: The Durham Center Will Develop an Array of High Quality Services and Support

3.1: 50% of Consumers Receiving Housing Supports Remain in Stable Housing for 6 Months

Data will be available in the next quarter.

3.2: 1% of Less of Children Placed in Non-Family Settings (Level 2 - Program Type, Level 3 and Level 4 Residential Services)

Serving youth in family-based settings can promote positive interpersonal relationships and support better recovery and adjustment. The Durham Center puts forth a strong effort to keep children in family-based settings with appropriate structured supports. The percentage for the entire state has decreased due to reductions in group home funding. Durham had the state's lowest percentages in the first and third quarters of FY09. The percentage has increased in FY 11 and, in the third quarter, is above the state average. As a comparison to The Durham Center, 56% more youth in the Johnston LME catchment area are in non-family settings, while there are 83% less Cumberland LME youth in these out of home placements.



SOURCE: Medicaid and State Service Claims Data paid through April 30, 2011.

3.3: 75% of the Individuals Receiving Supported Employment Feel Service Meets Their Needs.

Approximately 98 consumers in the first half of FY 11 have been authorized for supported employment services, which include CAET (Community Alternatives to Employment and Training), Supported Employment, Long-Term Follow Along, and job development). The consumers in these services received the surveys and instructions in April 2011. Consumers who bring completed surveys to The Durham Center office were given a bus pass, as an incentive. Initially, The Durham Center received 18 completed surveys, an estimated response rate of 19%. To increase participation, the deadline for survey completion was extended until June 30, 2011.

Results will be available in the next quarter.