

End There will be an improvement in the quality of life for adults and older adults with serious mental illness intellectual/developmental disabilities or substance use disorders which will be noted by improvement in their:

- functioning
- positive participation in their community

Sub End	Interpretation	Status
Functioning	Adults and older adults served will demonstrate an increased sense of well being and self sufficiency	1. Comparison of domain scores on nationally utilized MHSIP indicates higher scores as a result of services by VBCMH vs. the national comparison sample. Outcomes: VBCMH Adults 94 vs. 46 Older Adults 88 vs.45; Functioning: VBCMH 96 vs.46; Older Adults 94 vs. 49; Social Connectedness: VBCMH 91 vs. 55; Older Adults. 88 vs. 63.
	They will have relief from acute psychiatric conditions and will indicate that symptoms of mental illness interfere less with their daily life	2. 83% VBCMH adult customers and of older adults agree or strongly agree with items on MHSIP indicating relief from acute psychiatric symptoms and less interference with daily life vs. 51% of national sample
	<ol> <li>They will indicate that they obtained the information needed to take charge of managing their illness and indicate that VBCMH would be their chosen provider if had other choices and one they would recommend to others.</li> </ol>	3. Survey items 'obtained info needed to take charge of managing illness," "would choose this agency if had other choices" and "would recommend this agency to others" more than 95% agreed or strongly agreed
	4. Adults and older adults with Intellectual/developmental disabilities (I/DD) will maximize their physical and cognitive ability to interact with people and their environment, whether at home, workplace, or general community settings	4 Many years of comparison of domain scores on nationally utilized MHSIP indicates higher scores as a result of services for adults with I/DD served by VBCMH vs. the national comparison sample.



End There will be an improvement in the quality of life for adults and older adults with serious mental illness intellectual/developmental disabilities or substance use disorders which will be noted by improvement in their:

- functioning
- positive participation in their community

Sub End	Interpretation	Status
Positive participation in their community	1. Adults and older adults will optimize their level of self sufficiency, will self define their occupancy of time and have increased engagement in activities they find meaningful. Defining how their time is occupied and engaging in meaningful activities includes having friendships and family relationships and contributing to their communities through paid or volunteer work.	1. 91% of VBCMH adult customers and of older adult customers agreed or strongly agreed as a result of services that they get along better with family, do better in social situations, in school or work, do things that are more meaningful to them and that they want to do vs. 53% of national sample  VBCMH adult customers in all three populations served (I/DD, MI and SUD) are employed at rates equivalent to the state averages (34.4% vs 32%)
	Adults and older adults will live in places that are safe and where they have choice in their day to day lives	2. 81% of VBCMH adult customers agreed or strongly agreed as a result of services that their housing had improved, that they were better able to do things they wanted to do, and that they were better able to do things that were meaningful to them, and have people with whom they can do enjoyable things vs. 53% of national sample
	Improvement in positive participation in their community also means they will spend less time in psychiatric hospitals.	More VBCMH adult customers with MI or SUD continue to reside in a private residence (91% vs 86%) rather than in institutional settings, residential settings, or are homeless compared to the state average; More VBCMH adult customers with I/DD also reside in a private residence vs. the state average (87% vs, 82%.)
		3. Exceeded state standards for avoiding re-admissions to psychiatric inpatient within 30 days of discharge (less than 15% is standard; VB 6.5% state average 11.8%)  VBCMH spent 12.3% of its expenditures for inpatient care while the average expenditure was 26.7% for inpatient care.
		Spending significantly less on inpatient care is an indicator of better client outcomes.