

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

Mental Health

Developing Community

Respecting Individuality,

• 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 92 vs. 46 Older Adults 94 vs.45; Functioning: VBCMH 88 vs.46; Older Adults 87 vs. 49; Social Connectedness: VBCMH 92 vs. 55; Older Adults. 100 vs. 63.
	2. They will have relief from acute psychiatric conditions and will indicate that symptoms of mental illness interfere less with their daily life	2. 84% VBCMH adult customers and 88% 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
	3. 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.	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 90% agreed or strongly agreed
	 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 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. Outcomes: VBCMH 90 vs. 46 Functioning: VBCMH 84 vs. 46 Social Connectedness 91 vs. 55



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2019

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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.	 86% of VBCMH adult customers and 91% 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. 50% of national sample More VBCMH adult customers in all three populations served (I/DD, MI and SUD) are employed than the state average
	2. Adults and older adults will live in places that are safe and where they have choice in their day to day lives	2. 87% of VBCMH adult customers and 95% of older 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 continue to reside in a private residence (95% vs82) and with SUD (73% vs 63%) rather than in institutional settings, residential settings, or are homeless increasing compared to the state average; The state average for adult customers with I/DD has caught up to VBCMH level of 77%
		 Exceeded state standards for avoiding re-admissions to psychiatric inpatient within 30 days of discharge (less than 15% is standard; VB 4.4% state average 9.8%) VBCMH spent 12.6% of its expenditures for inpatient care while the average expenditure was 21.7% for inpatient care. Spending significantly less on inpatient care is an indicator of better client outcomes.