

# Mental Health Outcomes Management System (mHOMS) Quarterly Outcomes Report

April 2018—June 2018

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*Adult/Older Adult Behavioral Health Services*



## Overview

County-contracted and County-operated behavioral health programs for adults and older adults collect outcome measures on a regular basis for clients who have a Behavioral Health Assessment (BHA). Specifically, outcomes assessments are entered into the Mental Health Outcomes Measurement System (mHOMS) for clients in Assertive Community Treatment (ACT), Behavioral Health Court (BHC), Case Management (CM), Outpatient (OP), Prevention Service (PREV), and the TAY Residential program (RES). Assessments are typically conducted every six months.

The following outcomes are collected in mHOMS:

- **The Illness Management and Recovery (IMR) Scale:** The IMR includes 15 clinician-rated items and addresses a different aspect of illness management and recovery. Scores can also be reported as three subscales, which combine individual items to represent illness recovery, management, and substance abuse dimensions of treatment outcomes.
- **The Recovery Markers Questionnaire (RMQ):** The RMQ is a 26-item questionnaire that assesses elements of recovery from the client's perspective. It was developed to provide the mental health field with a multifaceted measure that collects information on personal recovery.
- **The Substance Abuse Treatment Scale - Revised (SATS-R):** The SATS-R is a single item assessment of a client's motivation to change his/her substance use behavior. The assessment is an 8-point scale based on the four stages of treatment: engagement, persuasion, active treatment, and relapse prevention. Clinicians are required to complete a SATS-R when a client has an active substance related treatment plan goal in his/her client plan. **Use of the SATS-R will be discontinued in Fiscal Year (FY) 2018-2019. Measurement and reporting of the impact of Substance Use on functioning will be replaced with the IMR Substance Use subscale, which is already in use.**
- **Milestone of Recovery Scale (MORS):** The MORS captures clinician-reported recovery using a single-item recovery indicator. Clinicians are asked to categorize clients into one of the eight stages of recovery (rated 1 through 8, respectively) based on a client's level of risk, their level of engagement within the mental health system, and the quality of their social support network.

Quarterly data is analyzed to create County-wide reports on process outcomes and outcomes objectives. Process outcomes provide information about completion rates within the given quarter for both IMR and RMQ measures. Outcomes objectives include analysis of improvements in IMR, RMQ, SATS-R and MORS scores completed during the given quarter. This report provides information from the fourth quarter of FY 2017-2018, spanning April 1 through June 30, 2018.

This report also includes a summary of IMR and RMQ scores for all clients (both NEW and ALL) who had a pair of completed assessments within FY 2017-18. Scores are reported by subunit and location of service to present progress towards recovery across the entire fiscal year.

## Key Findings

- Completion rates for intake and follow-up IMR and RMQ outcomes assessments were calculated for new and existing clients to determine the proportion of assessments that were entered into mHOMS within appropriate time frames. Completion rates for existing clients for the IMR (51.0%) or RMQ (45.0%) follow-up assessments were slightly lower than the previous quarter (56.0% and 46.0%, respectively). Completion rates for new clients were consistent with the previous quarter.
- New clients had lower average IMR, RMQ, SATS-R and MORS scores at intake, compared to existing clients' previous assessment. This trend is expected, as clients new to services may be in crisis or experiencing greater symptom distress than existing clients who have been receiving services for several months or years.
- Both new and existing clients had significantly better Overall IMR, IMR Recovery, and IMR Management scores between the current assessment and previous assessment. This indicates that, in general, clients made progress towards their recovery during the current quarter.
- Most new clients (64.3%) showed improvements in RMQ ratings at the follow-up assessment, which suggests that these clients felt they had made progress towards their recovery after enrollment in services.
- The improvements in MORS ratings from the previous assessment to the current follow-up assessment were statistically significant for both new and existing clients.
- Poorly coping/engaged was the most common rating by clinicians for new clients (44.4%) at intake and for existing clients (74.5%) at the previous assessment.
- The majority (88.0%) of existing clients (n=44/50) identified as experiencing impairments to functioning due to substance use, as indicated by an IMR Substance Use subscale score of 1 or 2 on their previous assessment, showed improvements in substance use recovery within the current quarter.
- At intake, most new clients were rated by their clinician as being in the "Pre-engagement" stage of recovery (27.3%, n=6/22). However, a high percentage were rated as being "In Remission or Recovery" (18.2%, n=4/22).
- Close to half of new clients (45.5%) were more engaged in their substance use treatment at the follow-up assessment compared to intake. This percentage was lower than last quarter.
- SATS-R ratings remained consistent for many (44.2%) existing clients between the current and previous assessment.
- There was no statistically significant change in SATS-R scores for new or existing clients between the previous assessment and the current assessment.
- The highest proportion of existing patients were rated as being "In Remission or Recovery" stage at both the current (31.5%) and previous (29.9%) assessments.
- During FY 2017-18, IMR and RMQ scores showed a statistically significant increase for both New and ALL clients in Outpatient programs. IMR scores also increased significantly for NEW clients in ACT programs during FY 2017-18. These findings suggest that, in general, clients showed progress towards recovery during FY 2017-18.
- More clients had a pair of IMR assessments than RMQ assessments during FY 2017-18. This is unsurprising, as self-report measures completed by clients are encouraged, but are not a mandatory part of care.
- New clients had lower average IMR and RMQ scores at Assessment 1 and experienced a greater change in scores during the fiscal year, compared to ALL clients. These patterns also correspond with the IMR and RMQ outcomes reported for the current quarter.

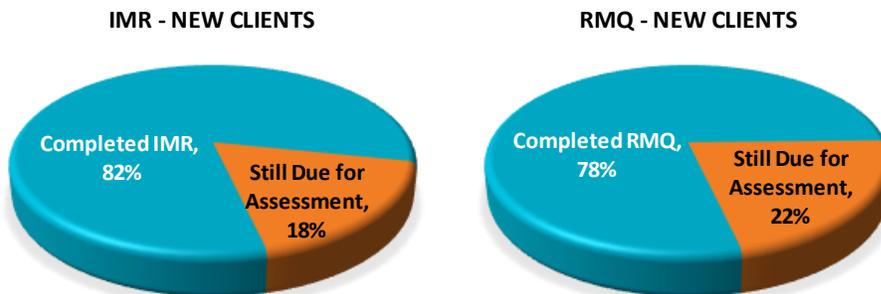
## Process Outcomes

### Measures being entered at appropriate timeframes

In order to better assess mental health outcomes, San Diego County Behavioral Health Services (SDCBHS) has implemented a system of measuring recovery from both clinician and client perspectives. mHOMS measures should be completed for all eligible clients at intake, with re-assessment every six months. Complete data from as many clients as possible will allow for accurate examinations of system and program-level outcomes.

Staff are expected to enter clinician and client measures into mHOMS within 30 days of intake for new clients, and can complete measures 30 days prior and 60 days after the due date for existing clients who are within a follow-up assessment period. Existing clients are **due** for an assessment if they do not have a completed outcomes assessment in mHOMS within the previous six months. Assessments are considered **completed** when successfully entered into the mHOMS system during the appropriate assessment period.

### Intake Assessments completed during the Current Quarter for New Clients

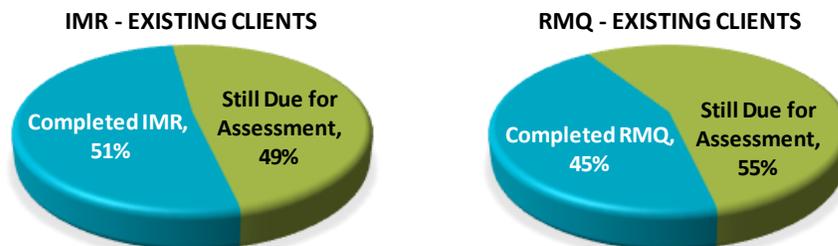


**NOTE:** New clients (n=336) are defined as having an open assignment and receipt of services during the current quarter at subunits (n=80) that complete outcomes assessments in mHOMS. IMR and RMQ completion counts for new clients are reported by subunit in Appendix A. Clients with an open assignment have not been discharged or closed in Cerner Community Behavioral Health (CCBH) during the current quarter. Assessment completion is evaluated up to 30 days after the quarter.

#### Within the current quarter:

- 336 new clients received services.
- Most new clients had an IMR (82.0%) or RMQ (78.0%) assessment entered into mHOMS at intake.
- Eighteen percent (18.0%) of new clients did not have an outcomes assessment (either IMR or RMQ) completed in mHOMS.

### Follow-up Assessments completed during the Current Quarter for Existing Clients



**NOTE:** Existing client is defined as having an open assignment and at least one completed outcome assessment in mHOMS. IMR and RMQ completion rates for existing clients are reported by subunit in Appendix A. Clients with an open assignment have not been discharged or closed in CCBH during the current quarter.

#### Within the current quarter:

- 6,592 existing clients were due for an assessment.
- IMR assessments were entered into mHOMS for 51.0% of existing clients.
- The follow-up RMQ assessment was completed for close to half of all existing clients (45.0%).

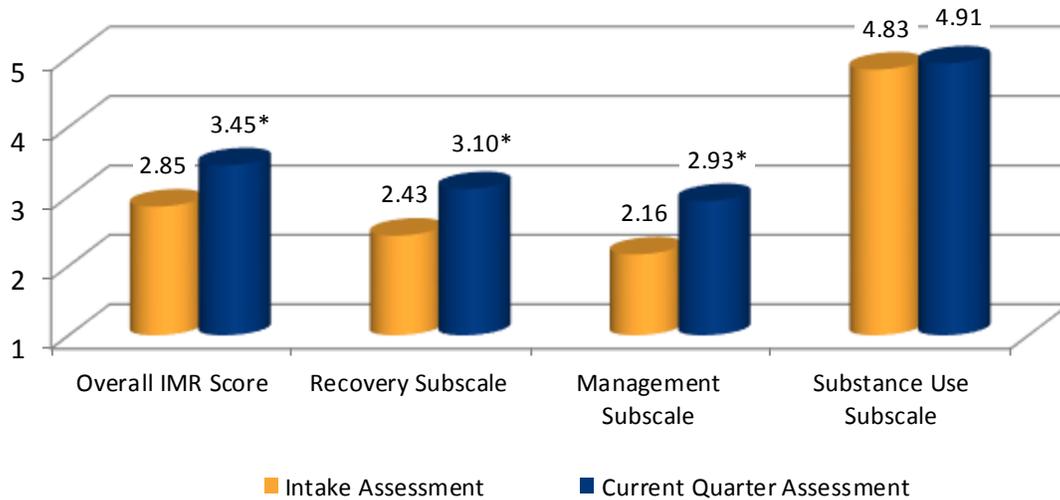
# Outcomes Objectives

## Illness Management and Recovery Scale

The IMR, which measures clinicians’ perceptions of their clients’ recovery, is typically conducted at intake with re-assessment every six months. IMR scores range from 1 to 5, with 5 representing the highest level of recovery. Scores can be reported as both an Overall Score, and by using three subscales, which combine individual items to represent illness recovery, management, and substance abuse dimensions of treatment outcomes.

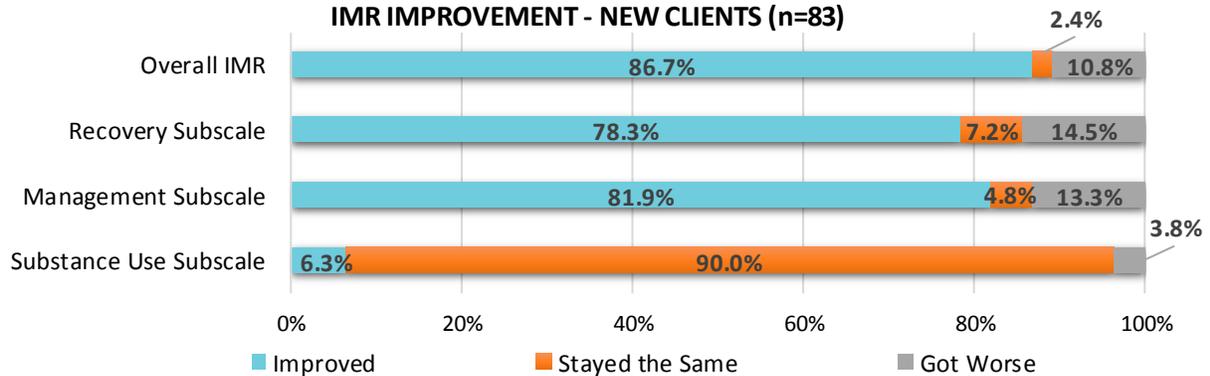
“NEW” clients (n=83) are those individuals who had a follow-up assessment within the current quarter and their previous assessment was an intake assessment.

**AVERAGE IMR SCORES - NEW CLIENTS (n=83)**

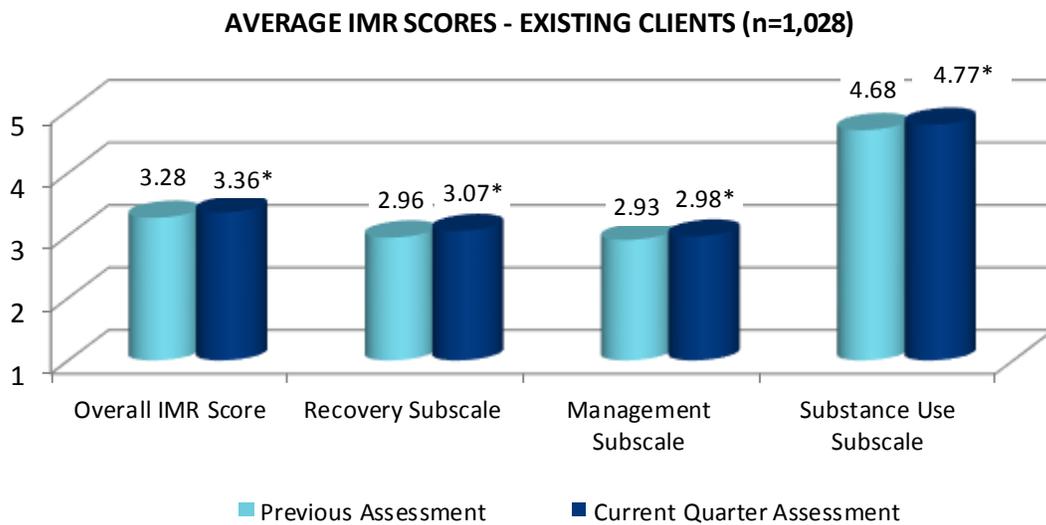


\* Indicates statistical significance

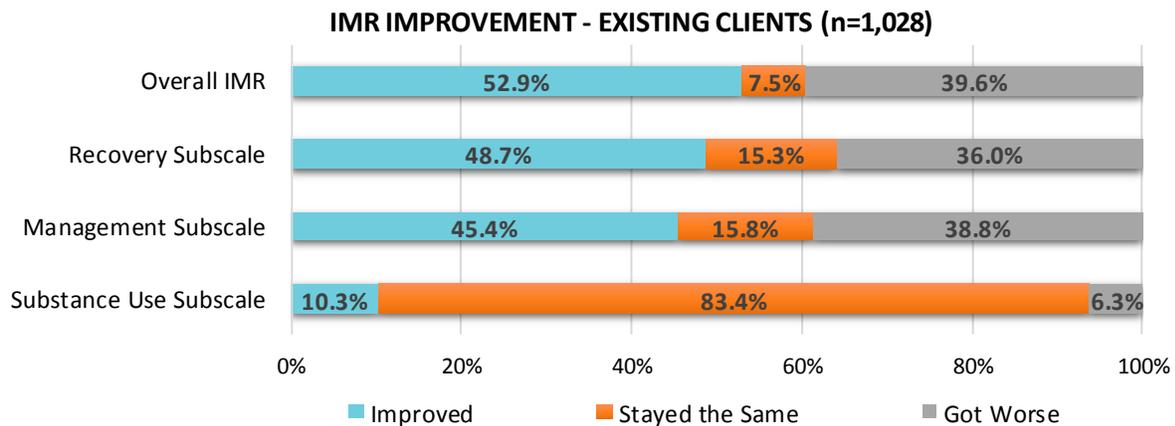
**IMR IMPROVEMENT - NEW CLIENTS (n=83)**



“EXISTING” clients (n=1,028) are those individuals who had a follow-up IMR assessment completed within the current quarter and a prior IMR assessment completed within the past four to eight months (Previous Assessment).



\* Indicates statistical significance



### IMR Results for New and Existing Clients:

The above charts include IMR data for clients who had a follow-up assessment completed within the current quarter and an intake or previous assessment completed within the past four to eight months. The method of comparing two assessments completed at different time points (also known as paired assessments) enables reporting on changes in average scores and the percentage of clients with an improvement in scores from their previous assessment. Since trends and changes in outcomes may differ for new clients and existing clients who are already engaged in services, results for new and existing clients are reported in separate charts.

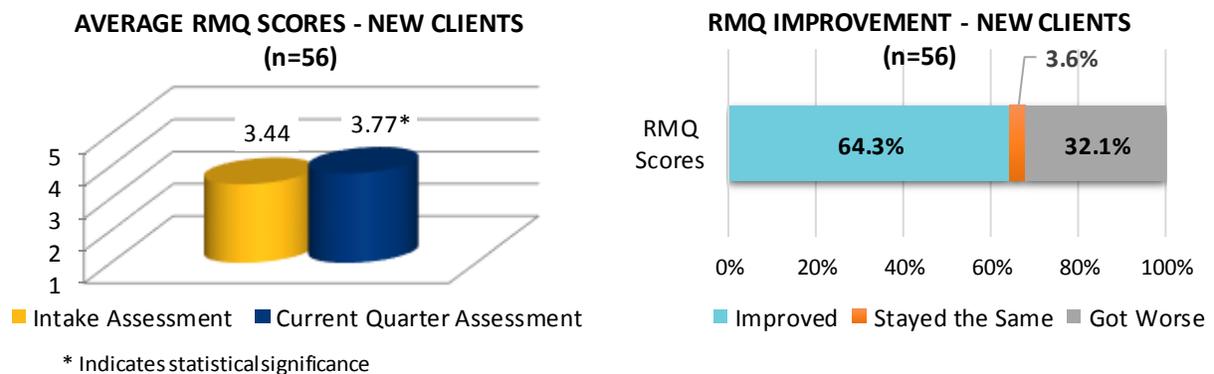
- New clients had lower Overall IMR, IMR Recovery, and IMR Management subscale scores at intake, compared to existing clients’ previous assessment. This trend is expected, as clients new to services may be in crisis or experiencing greater symptom distress than existing clients who have been receiving services for several months or years.
- Most new clients (86.7%) had improvements in Overall IMR scores at the follow-up assessment, compared to intake.

- New clients had greater improvements in IMR Management subscale scores than IMR Recovery subscale scores at the follow-up assessment.
- New clients had significantly better Overall IMR scores, as well as IMR Recovery and IMR Management subscale scores between the current assessment and intake assessment.
- There was no statistically significant change in IMR Substance subscale scores for new clients between the intake assessment and the current assessment.
- IMR Substance Use subscale scores did not change for the majority of new (90.0%) or existing (83.4%) clients with paired assessments; however, average Substance Use subscale scores were relatively high, indicating that few clients were impacted by alcohol or drug use.
- The majority (88.0%) of existing clients (n=44/50) identified as experiencing impairments to functioning due to substance use, as indicated by an IMR Substance Use subscale score of 1 or 2 on their previous assessment, showed improvements in substance use recovery within the current quarter. Few clients identified as experiencing substance use concerns maintained their level of impairment at the current assessment (12.0%), compared to the previous assessment.
- There were statistically significant changes in Overall IMR, IMR Recovery, IMR Management and IMR Substance Use subscale scores for existing clients between the previous assessment and the current assessment.
- Between 45.4% and 52.9% of existing clients with paired assessments had improved Overall IMR, Recovery, and/or Management subscale scores at the follow-up assessment, compared to their previous assessment.
- Fewer existing clients had a pair of assessments during the current quarter (n=1,028) compared to the third quarter of FY 2017-18 (n=1,135).

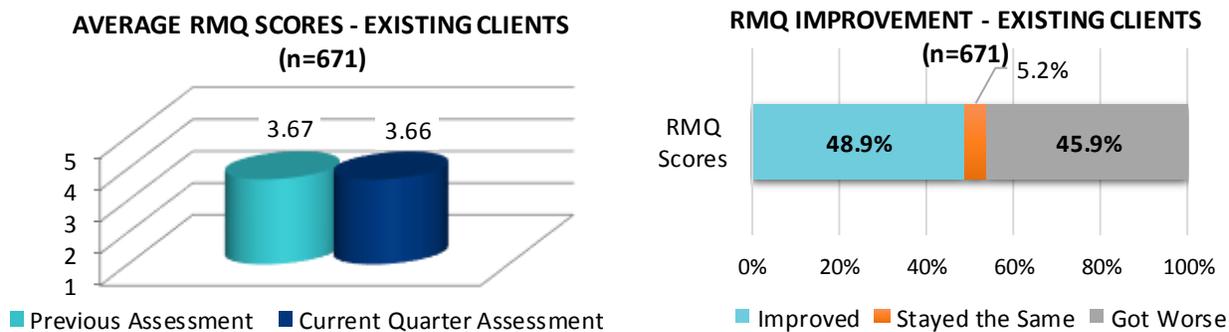
## Recovery Markers Questionnaire (RMQ)

The RMQ is a self-report measure of the client’s own state, and his or her preferences, needs and desires, and perceptions of their recovery. The RMQ includes 26 Likert Scale items, with a 5-point agreement response scale ranging from “strongly agree” to “strongly disagree,” regarding the recovery process and intermediate outcomes. The total mean score can also be calculated to measure performance.

“NEW” clients (n=56) are those individuals who had a follow-up RMQ assessment within the current quarter, and their previous assessment was an intake assessment.



“EXISTING” clients (n=671) include individuals served who had a follow-up RMQ assessment completed within the current quarter, and a prior assessment completed within the past four to eight months (Previous Assessment).



### RMQ Results for New and Existing Clients:

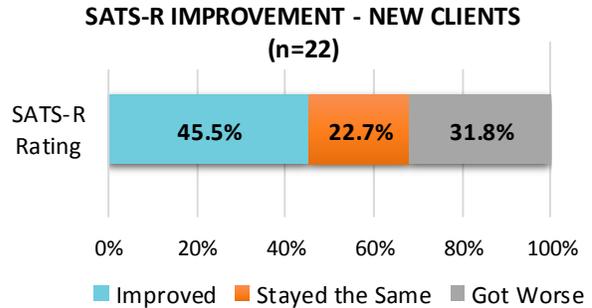
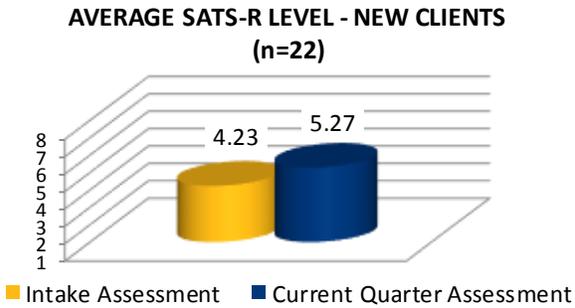
The above charts include RMQ data for clients who had a follow-up assessment completed within the current quarter and an intake or previous assessment completed within the past four to eight months. The method of comparing two assessments completed at different time points (also known as paired assessments) enables reporting on changes in average scores and the percentage of clients with an improvement in scores from their previous assessment. Since trends and changes in outcomes may differ for new clients and existing clients who are already engaged in services, results for new and existing clients are reported in separate charts.

- New clients had lower RMQ scores at intake compared to existing clients' previous assessment. This trend is expected, as existing clients who have been receiving services for several months or years would have more opportunities to make progress towards their recovery than clients new to services.
- The majority (64.3%) of new clients had improvements in RMQ scores at the follow-up assessment, compared to intake.
- There was a statistically significant change in RMQ scores for new clients between the intake assessment and the current assessment, suggesting that, on average, new clients perceived that they are making progress towards recovery.
- Almost half of existing clients (48.9%) reported that their recovery had improved at the follow-up assessment, compared to their previous assessment.
- Fewer existing clients had a pair of assessments during the current quarter (n=671) compared to the third quarter of FY 2017-18 (n=692).

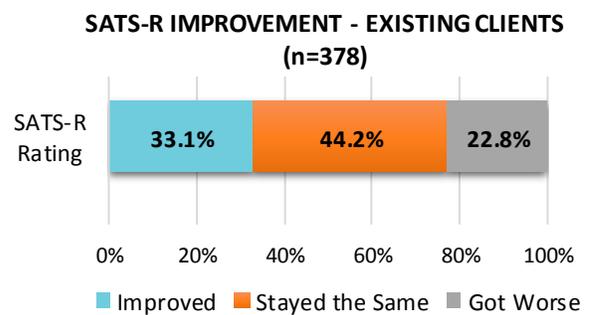
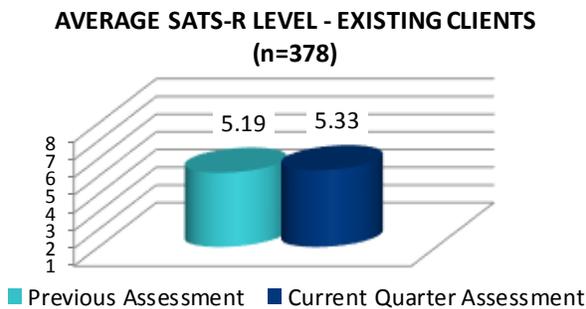
### Substance Abuse Treatment Scale - Revised (SATS-R)

The SATS-R is used by clinicians to assess a person's motivation to change their substance use behavior. It should not be used for diagnosis purposes. A clinician is required to complete a SATS-R when a client has an active substance-related treatment plan goal in his/her client plan. The SATS-R should be completed at initial development of the substance use goal; clients should be re-assessed every six months as long as the client continues to have a substance related goal in his/her client plan. SATS-R ratings range from 1 to 8; lower scores indicate that the client is less involved or engaged in substance use treatment. **The SATS-R will no longer be used in FY 2018-19. In its place, the IMR Substance Use Subscale will be used for reporting the impact of substance use on functioning.**

"NEW" clients (n=22) are those individuals who had a substance-related goal in his/her client plan at intake and a follow-up SATS-R assessment within the current quarter.



“EXISTING” clients (n=378) include individuals served who had a substance use goal, had a follow-up SATS-R assessment completed within the current quarter, and a prior SATS-R assessment completed within the past four to eight months (Previous Assessment).



### SATS-R Results for New and Existing Clients:

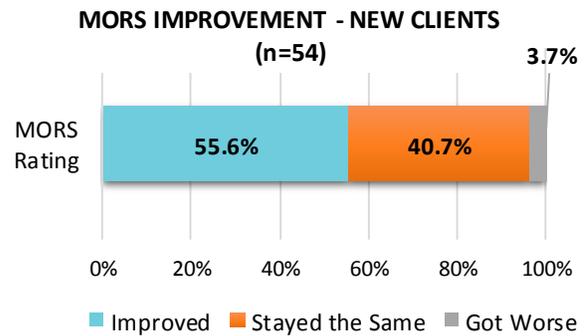
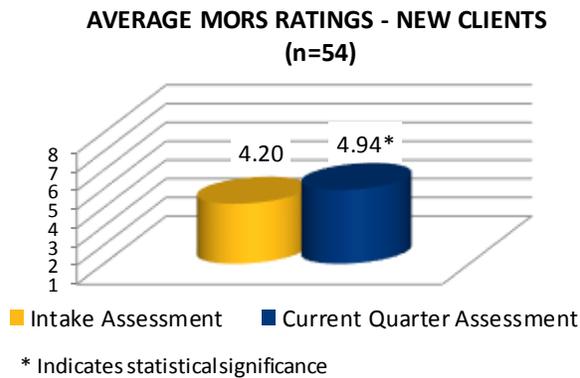
The above charts include SATS-R data for clients who had a follow-up assessment completed within the current quarter and an intake or previous assessment completed within the past four to eight months. The method of comparing two assessments completed at different time points (also known as paired assessments) enables reporting on changes in average scores and the percentage of clients with an improvement in scores from their previous assessment. Since trends and changes in outcomes may differ for new clients and existing clients who are already engaged in services, results for new and existing clients are reported in separate charts.

- New clients had lower SATS-R ratings at intake compared to existing clients’ previous assessment. This trend is expected, as existing clients who have been receiving services for several months or years would have more opportunities for engagement in substance use treatment than new clients.
- Close to half of new clients (45.5%) were more engaged in their substance use treatment at the follow-up assessment compared to intake.
- At intake, most new clients were rated by their clinician as being in the “Pre-engagement” stage of recovery (27.3%, n=6/22). However, a high percentage were rated as being “In Remission or Recovery” (18.2%, n=4/22).
- SATS-R ratings remained consistent for many (44.2%) existing clients between the current and previous assessment.
- There was no statistically significant change in SATS-R scores for new or existing clients between the previous assessment and the current assessment.
- The highest proportion of existing patients were rated as being “In Remission or Recovery” stage at both the current (31.5%) and previous (29.9%) assessments.

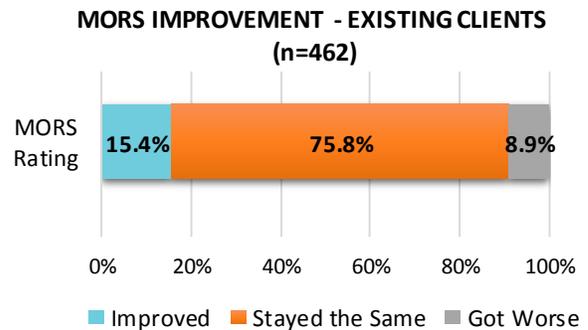
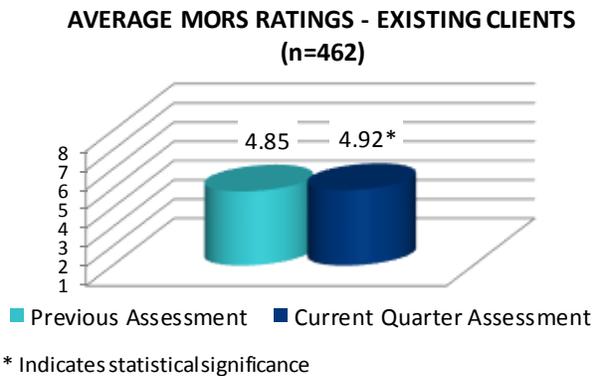
## Milestones of Recovery Scale (MORS)

The Milestones of Recovery Scale (MORS) is an assessment of the clinicians’ perceptions of their clients’ current milestone of recovery, and is typically conducted at intake with re-assessment every six months. MORS ratings range from 1 to 8, with higher scores indicating greater progress towards recovery.

“NEW” clients (n=54) are those individuals who had a follow-up MORS assessment within the current quarter, and the previous assessment was an intake assessment.



“EXISTING” clients (n=462) includes individuals served who had a follow-up MORS assessment completed within the current quarter and a prior MORS assessment completed within the past four to eight months (Previous Assessment).



## MORS Results for New and Existing Clients:

The above charts include MORS data for clients who had a follow-up assessment completed within the current quarter and an intake or previous assessment completed within the past four to eight months. The method of comparing two assessments completed at different time points (also known as paired assessments) enables reporting on changes in average scores and the percentage of clients with an improvement in scores from their previous assessment. Since trends and changes in outcomes may differ for new clients and existing clients who are already engaged in services, results for new and existing clients are reported in separate charts.

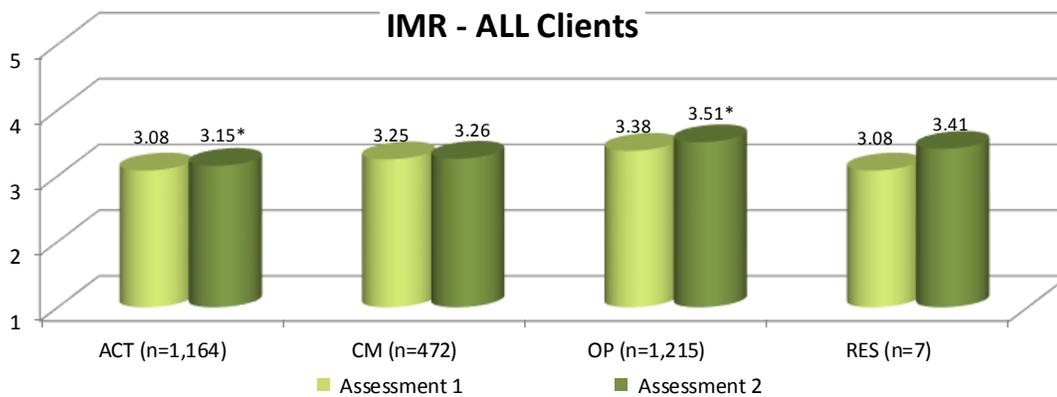
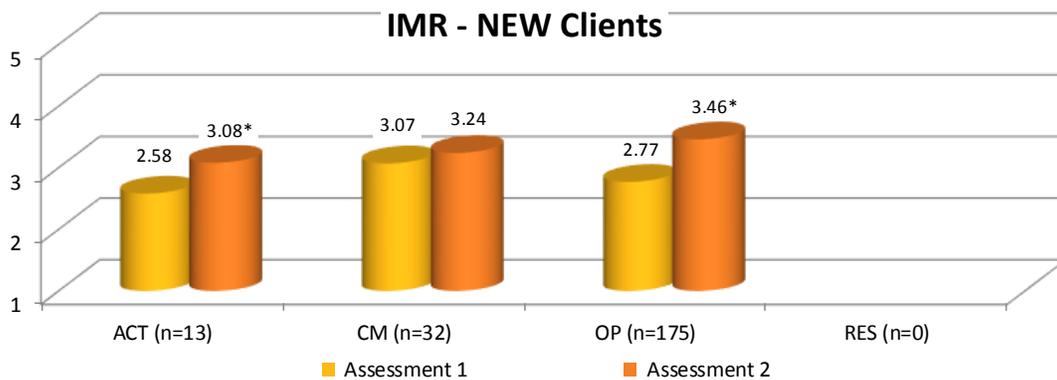
- New clients had lower MORS ratings at intake compared to existing clients’ previous assessment. This trend is expected, as existing clients who have been receiving services for several months or years would have more opportunities to make progress towards their recovery than clients new to services.

- MORS ratings remained consistent for the majority of existing (75.8%) clients between the current and previous assessments. MORS ratings improved for the majority of new (55.6%) clients between the current and intake assessments.
- Poorly coping/engaged was the most common rating by clinicians for new clients (44.4%) at intake and for existing clients (74.5%) at the previous assessment.
- The changes in MORS ratings from the previous assessment to the current follow-up assessment were statistically significant for both new and existing clients.
- Paired assessments rates were fairly consistent with the third quarter of FY 2017-18 (n=461).

## Recovery Outcomes during Fiscal Year 2017-18

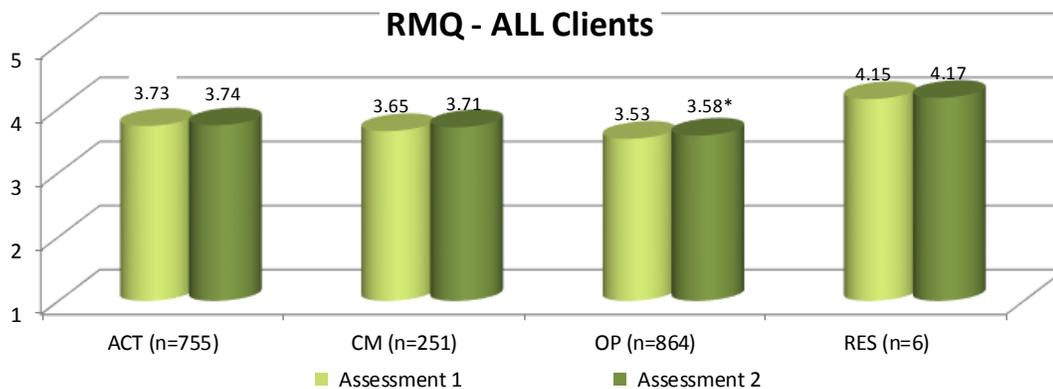
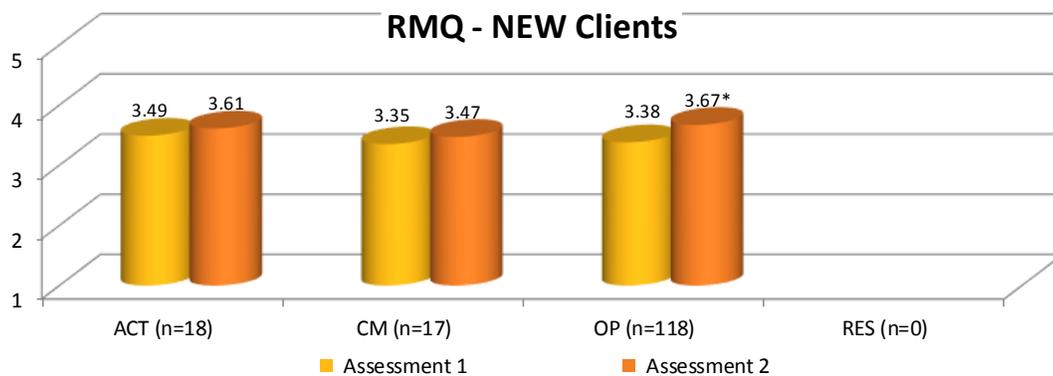
Recovery is a primary goal of the County of San Diego Behavioral Health Services (SDCBHS). In order to better assess mental health outcomes, SDCBHS has implemented a system of measuring recovery from both clinician (using the IMR) and client (using the RMQ) perspectives. To evaluate clients' progress towards recovery system-wide, changes in IMR and RMQ scores are examined across the fiscal year.

The charts below present differences in progress towards recovery by location of service: Assertive Community Treatment (ACT), Behavioral Health Court (BHC), Case Management (CM), Outpatient (OP), Prevention (PEI) Service, and TAY Residential program (RES). There were no matched pairs to report differences for clients at PEI programs. "NEW" clients are those individuals who had two IMR or RMQ assessments during FY 2017-18 (Assessments 1 and 2), and whose first service date was within 30 days of their first assessment. "ALL" clients includes every individual served who had two assessments during FY 2017-18 (Assessments 1 and 2), regardless of how long they have been receiving services.



\* Indicates statistical significance.

The charts include only programs that collected a pair of IMR assessments within FY 2017-18. There were no paired assessments for NEW or ALL clients at BHC and PEI programs, or for NEW clients at RES programs in FY 2017-18.



\* Indicates statistical significance.

The charts include only programs that collected a pair of RMQ assessments within FY 2017-18. There were no paired assessments for NEW or ALL clients at BHC or PEI programs, or for NEW clients at RES programs in FY 2017-18.

### Results for NEW and ALL Clients:

- During FY 2017-18, IMR and RMQ scores showed a statistically significant increase for both NEW and ALL clients in Outpatient programs. IMR scores also increased significantly for NEW clients in ACT programs during FY 2017-18. These findings suggest that, in general, clients showed progress towards recovery during FY 2017-18.
- More clients had a pair of IMR assessments than RMQ assessments during FY 2017-18. This is unsurprising, as self-report measures completed by clients are encouraged, but are not a mandatory part of care.
- NEW clients had lower average IMR and RMQ scores at Assessment 1 and experienced a greater change in scores during the fiscal year, compared to ALL clients. This trend is expected, as clients new to services may be in crisis or experiencing greater symptom distress than ALL clients who have been receiving services for several months or years. These patterns also correspond with the IMR and RMQ outcomes reported for the current quarter.

## IMR Scores by IMR Item — Means for Assessments 1 and 2

Each of the 15 individual items comprising the IMR addresses a different aspect of illness management and recovery. IMR scores range from 1 to 5, with 5 representing the highest level of recovery. NEW clients in the table below are those individuals who had two IMR assessments during FY 2017-18 (Assessments 1 and 2), and whose first service date was within 30 days of their first assessment. ALL clients includes every individual served who had two assessments during FY 2017-18 (Assessments 1 and 2), regardless of how long they have been receiving services. For ALL clients, IMR scores increased significantly on most items and all three subscales. For NEW clients, IMR Recovery and Management subscales and Overall scores showed a statistically significant increase. There was no significant change in IMR Substance subscale scores for NEW clients.

ITEM	ILLNESS MANAGEMENT & RECOVERY SCALE (IMR)	NEW CLIENTS				ALL CLIENTS			
		N	ASSESSMENT #		CHANGE	N	ASSESSMENT #		CHANGE
			1	2			1	2	
1	Progress towards personal goals	216	2.46	3.15	▲	2,816	2.85	2.93	▲
2	Knowledge	219	2.24	3.05	▲	2,850	2.92	2.99	▲
3	Involvement of family and friends in my treatment	218	3.07	3.16	▲	2,833	2.97	3.00	▲
4	Contact with people outside of my family	217	2.67	3.35	▲	2,827	2.97	3.08	▲
5	Time in structured roles	218	2.24	2.73	▲	2,794	1.95	2.05	▲
6	Freedom from symptom distress	219	1.87	2.67	▲	2,837	2.58	2.65	▲
7	Ability to function	219	1.90	2.67	▲	2,846	2.50	2.59	▲
8	Relapse prevention planning	213	2.06	2.95	▲	2,778	3.09	3.25	▲
9	Freedom from relapse of symptoms	217	2.36	3.34	▲	2,799	3.54	3.67	▲
10	Avoidance of psychiatric hospitalization	209	4.14	4.64	▲	2,806	4.36	4.49	▲
11	Coping	218	2.27	3.03	▲	2,827	2.89	2.98	▲
12	Involvement with self-help activities	216	2.27	2.75	▲	2,799	2.82	2.85	▲
13	Using medication effectively	130	3.87	4.25	▲	2,604	4.39	4.41	▲
14	Alcohol use does not impair functioning	209	4.60	4.72	▲	2,742	4.52	4.61	▲
15	Drug use does not impair functioning	207	4.55	4.81	▲	2,745	4.38	4.44	▲
	<b>OVERALL MEAN IMR SCORE</b>	220	2.80	3.41	▲	2,858	3.24	3.33	▲
SUBSCALES	Recovery subscale (the average of items 1, 2, 4, 8, and 12)	220	2.34	3.05	▲	2,846	2.93	3.02	▲
	Management subscale (the average of items 6, 7, 9, and 11)	220	2.10	2.93	▲	2,854	2.87	2.97	▲
	Substance subscale (the minimum of items 14 and 15)	209	4.83	4.90	▲	2,757	4.66	4.74	▲

Arrows indicate the direction of change between assessments. Dark/colored arrows indicate statistically significant change. Light/gray arrows indicate change that is not statistically significant.

## RMQ Scores by RMQ Item — Means for Assessments 1 and 2

Each of the 24 individual items comprising the RMQ measure the clients' preferences, needs and desires, and perceptions of their recovery. RMQ scores range from 1 to 5, with 5 representing strong agreement with each statement. NEW clients in the table below are those individuals who had two RMQ assessments during FY 2017-18 (Assessments 1 and 2), and whose first service date was within 30 days of their first assessment. ALL clients includes every individual served who had two assessments during FY 2017-18 (Assessments 1 and 2), regardless of how long they have been receiving services. For NEW clients, RMQ scores increased on most items. Many of these increases were statistically significant for NEW clients, which suggests that clients' perceived an improvement in their recovery. For both NEW and ALL clients, RMQ scores overall showed a statistically significant increase.

ITEM	RECOVERY MARKER QUESTIONNAIRE (RMQ)	NEW CLIENTS				ALL CLIENTS			
		N	ASSESSMENT #		CHANGE	N	ASSESSMENT #		CHANGE
			1	2			1	2	
1	Safe living situation that feels like home	151	3.79	3.97	▲	1,861	3.87	3.94	▲
2	Trusted people available to help	153	3.92	4.08	▲	1,853	4.02	4.06	▲
3	At least one close mutual relationship	149	3.92	3.86	▼	1,846	3.85	3.90	▲
4	Involvement in meaningful productive activities	144	3.30	3.61	▲	1,845	3.56	3.60	▲
5	Psychiatric symptoms under control	152	2.96	3.57	▲	1,843	3.58	3.68	▲
6	Enough income to meet needs	150	2.40	2.81	▲	1,828	2.94	3.02	▲
7	See self working within six months	148	2.87	2.76	▼	1,806	2.67	2.62	▼
8	Learning new things	149	3.54	3.77	▲	1,845	3.63	3.66	▲
9	Good physical health	151	3.09	3.32	▲	1,849	3.32	3.32	▶
10	Positive spiritual/life connection	149	3.61	3.77	▲	1,850	3.85	3.86	▲
11	Respect for self	152	3.66	3.95	▲	1,850	3.90	3.91	▲
12	Using personal strengths skills or talents	150	3.45	3.67	▲	1,841	3.65	3.68	▲
13	Working towards goals	152	3.76	3.94	▲	1,843	3.84	3.86	▲
14	Have reasons to get out of bed	151	3.60	3.89	▲	1,841	3.91	3.91	▶
15	More good days than bad	151	3.28	3.49	▲	1,852	3.60	3.64	▲
16	Decent quality of life	150	3.34	3.71	▲	1,827	3.68	3.69	▲
17	Control of important decisions	150	3.47	3.82	▲	1,846	3.74	3.77	▲
18	Contribute to community	145	2.98	3.32	▲	1,832	3.38	3.39	▲
19	Growing as a person	147	3.51	3.93	▲	1,839	3.80	3.83	▲
20	Sense of belonging	149	3.34	3.64	▲	1,833	3.69	3.73	▲
21	Feel alert and alive	149	3.38	3.66	▲	1,830	3.71	3.73	▲
22	Hopeful about future	148	3.45	3.74	▲	1,831	3.73	3.75	▲
23	Able to deal with stress	150	2.89	3.34	▲	1,840	3.41	3.51	▲
24	Can make positive changes in my life	150	3.77	3.97	▲	1,820	3.84	3.88	▲
	<b>TOTAL MEAN RMQ SCORE</b>	153	3.39	3.64	▲	1,876	3.63	3.66	▲

Arrows indicate the direction of change between assessments. Dark/colored arrows indicate statistically significant change. Light/gray arrows indicate change that is not statistically significant.

# APPENDIX A

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## IMR Scores by Program Sub-Unit during Fiscal Year 2017-18 — Means for Assessments 1 and 2

The mean IMR scores presented in the table below for assessments 1 and 2 represent the average of all item scores for each program sub-unit. For some programs, there was an insufficient number of valid assessment pairs for NEW clients (indicated below with “NA”). Increased scores were seen for clients in most programs, and several programs showed statistically significant increases in scores for both NEW and ALL clients. One program showed a statistically significant decrease in their clients’ scores.

UNIT	SUB-UNIT	PROGRAM NAME	NEW CLIENTS				ALL CLIENTS			
			ASSESSMENT #			CHANGE	ASSESSMENT #			CHANGE
			N	1	2		N	1	2	
1110	1111	CO SOUTHEAST CLINIC (A)	2	2.21	3.50	▲	8	3.14	3.10	▼
1120	1121	CO NORTH CENTRAL CLINIC (A)	1	2.93	2.53	-	8	3.52	3.40	▼
1130	1131	CO EAST COUNTY CLINIC (A)	21	3.09	3.55	▲	198	3.53	3.57	▲
1320	1321	CO MORENA TRADITIONAL CM	NA	NA	NA	-	54	3.44	3.44	▶
	1328	CO EAST STRENGTH BASED CM	NA	NA	NA	-	48	3.18	3.15	▼
3000	3001	UPAC MIDTOWN CENTER-PAROLEE	NA	NA	NA	-	NA	NA	NA	-
	3002	UPAC MIDTOWN CENTER MHSA	1	2.67	3.47	▲	35	3.35	3.36	▲
	3003	UPAC MIDTOWN CENTER TAY MHSA	NA	NA	NA	-	1	3.13	3.20	-
3010	3011	UPAC EAST WIND ADULT MHSA	4	2.96	3.53	▲	68	3.48	3.49	▲
3020	3021	UCSD GIFFORD	NA	NA	NA	-	3	3.38	3.84	-
3030	3032	NHA PROJECT ENABLE MHSA	3	2.93	3.22	▲	27	3.15	3.29	▲
	3033	NHA PROJECT ENABLE TAY MHSA	NA	NA	NA	-	1	2.67	3.00	-
3040	3042	CRF HEARTLAND CENTER TAY MHSA	4	2.42	3.08	▲	30	3.19	3.53	▲
	3043	CRF HEARTLAND CENTER (A/OA) MHSA	19	2.55	3.49	▲	197	3.49	3.61	▲
	3048	CRF HEARTLAND AB109	NA	NA	NA	-	4	3.41	4.23	▲
3050	3051	MHS KINESIS N ESCONDIDO	NA	NA	NA	-	NA	NA	NA	-
	3052	MHS KINESIS N ESCONDIDO MHSA	2	2.65	3.43	▲	42	2.95	3.32	▲
	3053	MHS KINESIS N FALLBROOK MHSA	1	1.87	3.87	-	4	3.33	3.50	▲
	3056	MHS KINESIS NORTH RAMONA/MHSA	2	2.36	3.15	▲	8	3.04	3.68	▲
	3057	MHS KINESIS N ESCON TAY MHSA	2	2.60	3.50	▲	8	2.28	2.79	▲
3060	3062	MHS VISTA CLINIC TAY MHSA	2	2.89	3.94	▲	20	3.23	3.59	▲
	3066	MHS VISTA CLINIC ADULT MHSA	8	2.90	3.52	▲	191	3.39	3.33	▼
	3067	MHS VISTA CLINIC YTP FSP MHSA	NA	NA	NA	-	2	2.30	3.30	▲
3070	3073	MHS NORTH INLAND ADULT MHSA	1	2.31	2.36	-	4	3.44	3.58	▲
3080	3083	MHS NORTH COASTAL ADULT MHSA	1	2.29	2.50	-	34	3.33	3.53	▲
3090	3091	CRF DOUGLAS YOUNG CLINIC MHSA	1	2.71	3.00	-	12	3.32	3.44	▲
	3093	CRF DOUGLAS YOUNG TAY MHSA	NA	NA	NA	-	4	3.44	3.05	▼
3100	3101	CRF SOUTH BAY GUIDANCE CENTER A/OA MHSA	2	2.77	3.00	▲	10	3.14	3.25	▲
	3104	CRF SOUTH BAY GUIDANCE CENTER TAY MHSA	6	2.48	3.28	▲	12	3.22	3.44	▲
	3105	CRF SB GUIDANCE FSP CM MHSA	NA	NA	NA	-	NA	NA	NA	-
3110	3111	CRF A. CROWELL CENTER MHSA	NA	NA	NA	-	NA	NA	NA	-
3150	3156	FHC LOGAN HEIGHTS CENTER MHSA	12	2.93	3.49	▲	34	3.32	3.36	▲

Arrows indicate the direction of change between assessments. Dark/colored arrows indicate statistically significant change. Light/gray arrows indicate change that is not statistically significant.

# IMR Scores by Sub-Unit during FY 2017-18—

## Means for Assessments 1 and 2, *continued*

			NEW CLIENTS				ALL CLIENTS			
UNIT	SUB-UNIT	PROGRAM NAME	N	ASSESSMENT #		CHANGE	N	ASSESSMENT #		CHANGE
				1	2			1	2	
3160	3161	SURVIVORS OF TORTURE (A) MHSA	8	3.02	3.59	▲	51	3.64	3.70	▲
3180	3181	CRF MARIA SARDIÑAS WELLNESS & REC MHSA	NA	NA	NA	-	4	3.38	3.45	▲
	3182	CRF MARIA SARDIÑAS WELLNESS & REC TAY MHSA	NA	NA	NA	-	NA	NA	NA	-
	3183	CRF MARIA SARDIÑAS WELLNESS & REC FSP CM MHSA	NA	NA	NA	-	2	3.57	3.40	▼
	3188	CRF MS WELL&REC AB109	NA	NA	NA	-	1	4.07	3.93	-
3240	3241	CRF DOWNTOWN IMPACT FSP MHSA	1	2.67	2.73	-	269	3.14	3.28	▲
	3244	CRF DOWNTOWN IMPACT VIHP MHSA	NA	NA	NA	-	6	3.30	3.41	▲
	3245	CRF DOWNTOWN IMPACT POFA MHSA	1	2.13	2.80	-	2	2.40	2.87	▲
3250	3251	DEAF COMMUNITY SERVICES OP (A) MHSA	8	3.15	3.83	▲	18	3.28	3.62	▲
3280	3281	TELECARE OLDER ADULT SBCM MHSA	29	3.07	3.23	▲	311	3.17	3.19	▲
3310	3312	TELECARE GATEWAY TO RECOVERY FSP MHSA	NA	NA	NA	-	180	2.88	2.93	▲
	3315	TELECARE PROJECT 25 FSP MHSA	NA	NA	NA	-	12	3.12	2.95	▼
3330	3331	TELECARE LTC ACT FSP OP MHSA	NA	NA	NA	-	145	2.94	2.99	▲
3350	3353	MHS NO COUNTY SB CM MHSA	3	3.07	3.33	▲	53	3.63	3.62	▼
3360	3361	MHS NORTH STAR ACT FSP MHSA	NA	NA	NA	-	13	3.65	3.54	▼
	3364	MHS NO STAR ACT FSP MHSA POFA	NA	NA	NA	-	11	3.61	3.09	▼
3400	3401	CRF IMPACT FSP MHSA	1	3.00	3.60	-	182	3.37	3.41	▲
	3404	CRF IMPACT POFA MHSA	NA	NA	NA	-	34	3.23	3.21	▼
3410	3411	MHS CENTER STAR ACT FSP MHSA	NA	NA	NA	-	15	2.55	2.87	▲
	3413	MHS CENTER STAR FSP VIHP MHSA	NA	NA	NA	-	NA	NA	NA	-
3480	3481	CRF ACT OLDER ADULT FSP MHSA	NA	NA	NA	-	88	3.31	3.31	▶
	3482	CRF SR IMPACT FSP MHSA POFA	NA	NA	NA	-	49	2.90	2.94	▲
3960	3961	CRF CASA PACIFICA TRANS RES	NA	NA	NA	-	7	3.08	3.41	▲
	3963	CRF CASA PACIFICA OP	NA	NA	NA	-	2	3.57	3.60	▲
4110	4111	EXODUS CENTRAL AB109 MHSA	15	3.02	3.82	▲	45	2.97	3.61	▲
4190	4192	TELECARE PROPS SD AB109	6	2.47	3.07	▲	17	2.37	2.34	▼
4200	4201	TELECARE MH COLLABOR CRT MHSA	NA	NA	NA	-	8	3.78	3.98	▲
	4203	TELECARE MH COL CRT MHSA POFA	1	3.50	4.07	-	16	3.57	3.74	▲
4210	4211	TELECARE ASST OP TRMT MHSA	NA	NA	NA	-	NA	NA	NA	-
4230	4231	SYHC CHALDEAN MID EST (A) MHSA	38	2.51	3.31	▲	116	3.46	3.73	▲
4240	4242	MHS ACTION CNTRL FSP MHSA POFA	5	2.15	3.03	▲	17	1.94	3.09	▲
4250	4251	MHS ACTION EAST FSP MHSA POFA	3	2.35	2.73	▲	19	2.28	2.72	▲
4260	4261	PATHWAYS CATALYST FSP MHSA	NA	NA	NA	-	31	3.25	3.02	▼
	4264	PATHWAYS CATALYST FSP MHSA POFA	1	4.38	3.47	-	47	3.07	2.99	▼
4270	4274	PWS KICKSTART MHSA	7	2.80	3.46	▲	6	3.50	3.72	▲
	4275	PWS KICKSTART OP	3	2.70	3.32	▲	6	3.34	3.77	▲
4280	4281	UPAC NEW LEAF REC CTR OP MHSA	1	3.07	1.86	-	1	2.50	2.67	-
4290	4291	UPAC NEW LEAF REC CTR OP MHSA	NA	NA	NA	-	3	2.59	3.40	▲
4340	4341	CRF ADELANTE FSP MHSA	NA	NA	NA	-	3	2.40	2.96	▲
7240	7241	SURVIVORS OF TORTURE (C) MHSA	1	3.47	4.60	-	1	2.79	3.29	-

Arrows indicate the direction of change between assessments. Dark/colored arrows indicate statistically significant change. Light/gray arrows indicate change that is not statistically significant.

## RMQ Scores by Program Sub-Unit during Fiscal Year 2017-18 — Means for Assessments 1 and 2

The mean RMQ scores presented in the table below for Assessments 1 and 2 represent the average of all item scores for each program sub-unit. For some programs, there was an insufficient number of valid assessment pairs for NEW clients (indicated below with “NA”). Increased scores were seen for clients in several programs, and five programs showed statistically significant increases in their clients’ scores. Two programs showed a significant decrease in their clients’ RMQ scores.

UNIT	SUB-UNIT	PROGRAM NAME	NEW CLIENTS				ALL CLIENTS			
			ASSESSMENT #			CHANGE	ASSESSMENT #			CHANGE
			N	1	2		N	1	2	
1110	1111	CO SOUTHEAST CLINIC (A)	2	3.73	4.29	▲	6	3.89	3.65	▼
1120	1121	CO NORTH CENTRAL CLINIC (A)	NA	NA	NA	-	9	3.34	3.79	▲
1130	1131	CO EAST COUNTY CLINIC (A)	20	3.49	3.48	▲	196	3.53	3.52	▼
1320	1321	CO MORENA TRADITIONAL CM	NA	NA	NA	-	35	3.98	3.95	▼
	1328	CO EAST STRENGTH BASED CM	NA	NA	NA	-	22	3.81	3.83	▲
3000	3001	UPAC MIDTOWN CENTER-PAROLEE	NA	NA	NA	-	NA	NA	NA	-
	3002	UPAC MIDTOWN CENTER MHSA	NA	NA	NA	-	37	3.48	3.55	▲
	3003	UPAC MIDTOWN CENTER TAY MHSA	NA	NA	NA	-	NA	NA	NA	-
3010	3011	UPAC EAST WIND ADULT MHSA	2	2.96	3.29	▲	27	3.44	3.42	▼
3020	3021	UCSD GIFFORD	NA	NA	NA	-	NA	NA	NA	-
3030	3032	NHA PROJECT ENABLE MHSA	2	3.00	2.69	▼	31	3.41	3.26	▼
	3033	NHA PROJECT ENABLE TAY MHSA	NA	NA	NA	-	1	3.57	3.29	-
3040	3042	CRF HEARTLAND CENTER TAY MHSA	2	3.84	4.15	▲	18	3.80	3.91	▲
	3043	CRF HEARTLAND CENTER (A/OA) MHSA	15	3.04	3.42	▲	144	3.34	3.36	▲
	3048	CRF HEARTLAND AB109	NA	NA	NA	-	4	3.24	4.11	▲
3050	3051	MHS KINESIS N ESCONDIDO	NA	NA	NA	-	NA	NA	NA	-
	3052	MHS KINESIS N ESCONDIDO MHSA	3	3.43	3.46	▲	34	3.63	3.65	▲
	3053	MHS KINESIS N FALLBROOK MHSA	1	3.67	4.13	-	4	3.86	4.16	▲
	3056	MHS KINESIS NORTH RAMONA/MHSA	1	4.83	4.46	-	5	3.61	3.73	▲
	3057	MHS KINESIS N ESCON TAY MHSA	2	3.35	3.48	▲	6	3.77	3.50	▼
3060	3062	MHS VISTA CLINIC TAY MHSA	2	4.00	3.67	▼	10	3.68	3.87	▲
	3066	MHS VISTA CLINIC ADULT MHSA	5	3.99	4.06	▲	126	3.72	3.75	▲
	3067	MHS VISTA CLINIC YTP FSP MHSA	NA	NA	NA	-	2	2.92	4.36	▲
3070	3073	MHS NORTH INLAND ADULT MHSA	1	2.37	2.17	-	3	2.96	3.22	▲
3080	3083	MHS NORTH COASTAL ADULT MHSA	NA	NA	NA	-	20	3.56	3.57	▲
3090	3091	CRF DOUGLAS YOUNG CLINIC MHSA	1	2.54	2.50	-	14	3.54	3.71	▲
	3093	CRF DOUGLAS YOUNG TAY MHSA	NA	NA	NA	-	3	3.11	3.53	▲
3100	3101	CRF SOUTH BAY GUIDANCE CENTER A/OA MHSA	2	2.41	4.29	▲	16	3.56	3.91	▲
	3104	CRF SOUTH BAY GUIDANCE CENTER TAY MHSA	6	3.38	3.93	▲	11	3.76	3.74	▼
	3105	CRF SB GUIDANCE FSP CM MHSA	NA	NA	NA	-	NA	NA	NA	-
3110	3111	CRF A. CROWELL CENTER MHSA	NA	NA	NA	-	1	3.33	3.29	▼
3150	3156	FHC LOGAN HEIGHTS CENTER MHSA	12	3.48	3.64	▲	33	3.22	3.32	▲

Arrows indicate the direction of change between assessments. Dark/colored arrows indicate statistically significant change. Light/gray arrows indicate change that is not statistically significant.

# RMQ Scores by Sub-Unit during FY 2017-18—

## Means for Assessments 1 and 2, *continued*

			NEW CLIENTS				ALL CLIENTS			
UNIT	SUB-UNIT	PROGRAM NAME	N	ASSESSMENT #		CHANGE	N	ASSESSMENT #		CHANGE
				1	2			1	2	
3160	3161	SURVIVORS OF TORTURE (A) MHSA	5	3.38	3.48	▲	34	3.46	3.56	▲
3180	3181	CRF MARIA SARDIÑAS WELLNESS & REC MHSA	NA	NA	NA	-	3	4.20	3.67	▼
	3182	CRF MARIA SARDIÑAS WELLNESS & REC TAY MHSA	NA	NA	NA	-	NA	NA	NA	-
	3183	CRF MARIA SARDIÑAS WELLNESS & REC FSP CM MHSA	NA	NA	NA	-	NA	NA	NA	-
	3188	CRF MS WELL&REC AB109	NA	NA	NA	-	1	4.04	3.67	-
3240	3241	CRF DOWNTOWN IMPACT FSP MHSA	2	3.75	3.90	▲	220	3.84	3.78	▼
	3244	CRF DOWNTOWN IMPACT VIHP MHSA	NA	NA	NA	-	4	3.58	3.57	▼
	3245	CRF DOWNTOWN IMPACT POFA MHSA	1	4.04	3.83	-	1	3.23	3.13	-
3250	3251	DEAF COMMUNITY SERVICES OP (A) MHSA	5	4.03	4.31	▲	6	3.69	3.83	▲
3280	3281	TELECARE OLDER ADULT SBCM MHSA	17	3.35	3.47	▲	169	3.55	3.65	▲
3310	3312	TELECARE GATEWAY TO RECOVERY FSP MHSA	NA	NA	NA	-	88	3.75	3.77	▲
	3315	TELECARE PROJECT 25 FSP MHSA	NA	NA	NA	-	9	3.82	3.69	▼
3330	3331	TELECARE LTC ACT FSP OP MHSA	NA	NA	NA	-	33	3.83	3.91	▲
3350	3353	MHS NO COUNTY SB CM MHSA	NA	NA	NA	-	23	3.87	3.61	▼
3360	3361	MHS NORTH STAR ACT FSP MHSA	NA	NA	NA	-	9	4.13	3.88	▼
	3364	MHS NO STAR ACT FSP MHSA POFA	NA	NA	NA	-	9	3.61	3.36	▲
3400	3401	CRF IMPACT FSP MHSA	1	4.75	3.71	-	138	3.64	3.70	▲
	3404	CRF IMPACT POFA MHSA	NA	NA	NA	-	25	3.77	3.48	▼
3410	3411	MHS CENTER STAR ACT FSP MHSA	NA	NA	NA	-	13	3.13	3.30	▲
	3413	MHS CENTER STAR FSP VIHP MHSA	NA	NA	NA	-	1	3.35	3.58	-
3480	3481	CRF ACT OLDER ADULT FSP MHSA	NA	NA	NA	-	64	3.77	3.82	▲
	3482	CRF SR IMPACT FSP MHSA POFA	2	3.23	2.81	▼	32	3.69	3.63	▼
3960	3961	CRF CASA PACIFICA TRANS RES	NA	NA	NA	-	6	4.15	4.17	▲
	3963	CRF CASA PACIFICA OP	NA	NA	NA	-	NA	NA	NA	-
4110	4111	EXODUS CENTRAL AB109 MHSA	14	3.68	4.21	▲	44	3.78	3.96	▲
4190	4192	TELECARE PROPS SD AB109	1	2.67	2.96	-	5	3.72	3.89	▲
4200	4201	TELECARE MH COLLABOR CRT MHSA	NA	NA	NA	-	8	3.96	4.09	▲
	4203	TELECARE MH COL CRT MHSA POFA	1	4.83	5.00	-	16	3.88	3.99	▲
4210	4211	TELECARE ASST OP TRMT MHSA	NA	NA	NA	-	NA	NA	NA	-
4230	4231	SYHC CHALDEAN MID EST (A) MHSA	4	2.44	3.22	▲	1	3.25	3.88	-
4240	4242	MHS ACTION CNTRL FSP MHSA POFA	4	2.38	3.69	▲	16	2.89	3.75	▲
4250	4251	MHS ACTION EAST FSP MHSA POFA	3	3.07	3.61	▲	16	3.65	3.66	▲
4260	4261	PATHWAYS CATALYST FSP MHSA	NA	NA	NA	-	16	3.90	3.64	▼
	4264	PATHWAYS CATALYST FSP MHSA POFA	3	4.60	3.52	▼	30	3.64	3.72	▲
4270	4274	PWS KICKSTART MHSA	6	2.96	3.35	▲	6	3.37	3.37	▶
	4275	PWS KICKSTART OP	2	2.70	3.67	▲	5	3.30	3.62	▲
4280	4281	UPAC NEW LEAF REC CTR OP MHSA	1	1.52	2.92	-	4	4.12	4.29	▲
4290	4291	UPAC NEW LEAF REC CTR OP MHSA	NA	NA	NA	-	1	2.17	3.46	-
4340	4341	CRF ADELANTE FSP MHSA	NA	NA	NA	-	2	3.82	3.86	▲
7240	7241	SURVIVORS OF TORTURE (C) MHSA	2	3.86	4.00	▲	NA	NA	NA	-

Arrows indicate the direction of change between assessments. Dark/colored arrows indicate statistically significant change. Light/gray arrows indicate change that is not statistically significant.