



Substance Use Disorder Treatment

EVALUATION REPORT FY21 - FY23

PROVIDED BY:



Introduction

Since 2014, the Lakeshore Regional Entity (LRE), the PIHP for Region 3, has maintained a system for providing substance use disorder (SUD) treatment and recovery services which delegates responsibility for managing treatment and recovery services to each of the five-member Community Mental Health Service Programs (CMHSP's) through subcontracts.

The 5 CMHSPs subcontracted to manage these services include:

- OnPoint (Allegan County)
- Community Mental Health of Ottawa County
- HealthWest (Muskegon County)
- Network180 (Kent County)
- West Michigan Community Mental Health System (Lake, Mason, and Oceana Counties)

A Strategic Plan for SUD Treatment services was developed to guide efforts during FY21 through FY23. This plan identified priority areas with metrics to monitor progress. An overview of the plan and evaluation framework is provided in the [LRE SUD Treatment Logic Model](#).

This report provides an annual update on efforts and trend data through FY23. Service access by priority populations and Treatment Performance Measures as reported for National Outcome Measures are also reviewed.

Data to inform this report includes Behavioral Health Treatment Episode Data Set (BH TEDS) (refreshed on 12/14/23) and encounter data for services provided (refreshed on 12/13/23). It should be noted that data for prior fiscal years may change from previous reports due to ongoing data entry.

Where a benchmark is provided it represents the LRE's regional rate for FY23.

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Services Priorities










The following pages provide an overview of metrics related to service priorities identified within the LRE Strategic Plan for Substance Use Disorder (SUD) services, including

- Access to Services
- Engagement and Retention
- Connection to Community Supports

Access to Services

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to access for these prioritized populations as identified within the Strategic Plan.

Targeted Metrics: Access		FY19	FY20	FY21	FY22	FY23	Trend* FY19-23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	21.0%	20.0%	20.0%	22.0%	24.0%	
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.4%	0.3%	0.3%	0.5%	0.2%	
	↑ admissions with legal status as 'in jail' (% of all admissions)	8.0%	7.0%	6.0%	8.0%	6.0%	
Persons with Opioid Use Disorder (OUD)	↓ avg days between request for medication assisted treatment (MAT) and first service	13.7	7.0	13.4	5.6	7.4	
	Maintain an average wait time of less than 3 days for persons with IVDU	6.6	6.4	9.8	7.1	8.0	
	↓ average days' time to service for Outpatient Level of Care for persons with intravenous drug use (IVDU)	9.5	6.3	9.5	5.5	7.5	
Older Adults	↑ in # of admissions for individuals aged 55-69	597	473	579	585	648	

*  Improving  Worsening  Relatively stable

Criminal Justice

In April of 2020, the LRE became responsible for supporting substance use disorder services for individuals transitioning into the community who are on probation after having been incarcerated.

Improvement Efforts

Working together with the Michigan Department of Corrections, the LRE has partnered with the SUD Regional Operations Advisory Team (ROAT) to identify ways to improve coordination and services for this population as they return to their communities. MDOC representatives attend meetings quarterly to discuss challenges and foster coordination. In March 2022, MDOC reported challenges with provider communication. CMHSP Members communicated with the provider network and the issue has not since been reported as a problem.

Efforts to expand services in the jail have been a priority, primarily with State Opioid Response funds. Medication assisted treatment (MAT) services are now offered in 5-of-7 county jails in the region.

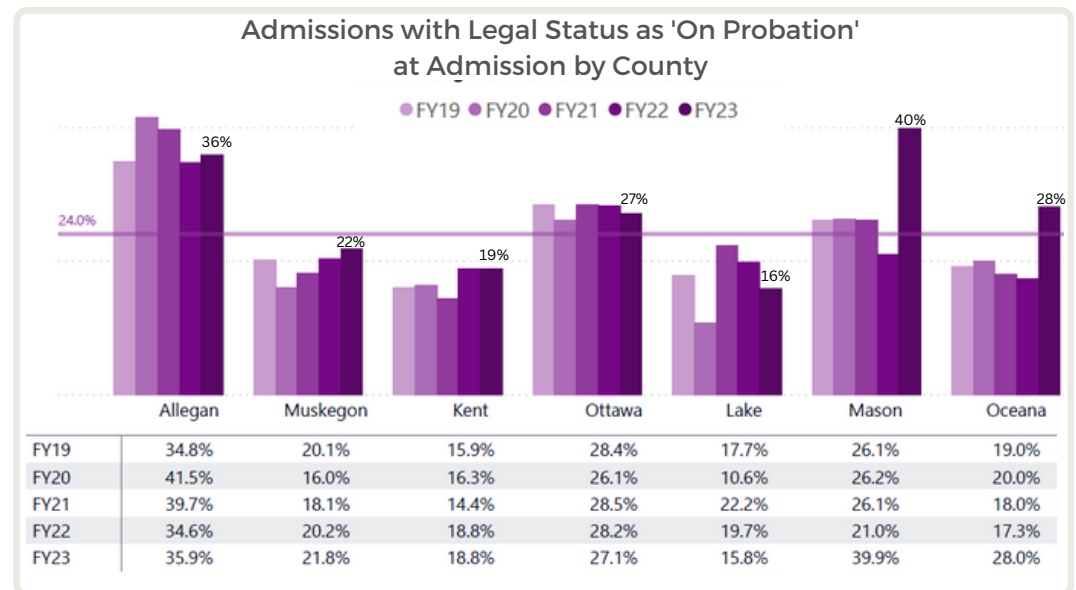
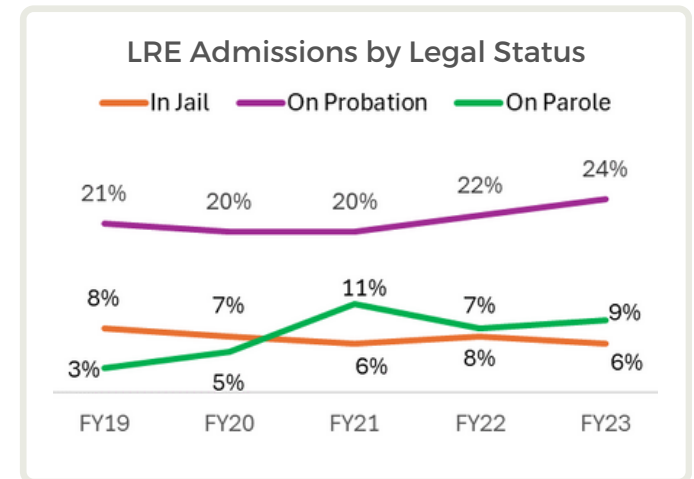
In FY21, Muskegon County established a peer recovery coach in the jail to support individuals receiving MAT while incarcerated to engage in services following release.

In FY23 the LRE hired a Priority Population Specialist to support coordination between MDOC and CMHSPs for this population.

Data Highlights

Between FY19 and FY23, the percent of admissions for individuals whose legal status was identified as 'on parole' or 'on probation' increased (from 24% to 33%) and the percent of admissions for individuals 'in jail' decreased slightly. Less than 1% of admissions reported the legal status as a 'pre booking' or 'post booking' diversion.

The percent of admissions for individuals on probation in FY23 was highest in Mason (40%) and Allegan (36%) Counties and has been increasing in Muskegon County.



Persons with OUD

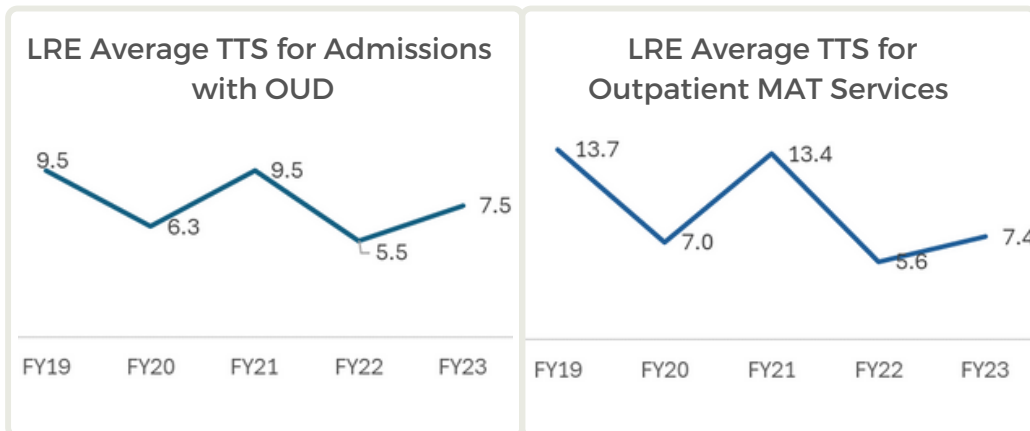
In recent years, the rate of opioid use and the need for treatment for individuals with an opioid use disorder (OUD) increased significantly. Of note was the need for increased medication assisted treatment (MAT) throughout the region.

Data Highlights

Between FY19 and FY23, the average time to service (TTS) for individuals with an OUD ranged from a low of 6.5 in FY22 to a high of 9.5 in FYs 19 and 21.

During FY21 delays in TTS were primarily due to medication assisted treatment (MAT) caused by intermittent use of a waitlist at a provider in Muskegon County. This improved substantially in FY22, with the TTS for Muskegon County's MAT services from 28.5 in FY21 and to 4.7 in FY22 and 7.2 in FY23.

When trends in time to service for MAT are reviewed by county, TTS in FYs 22 and 23 was highest in Allegan County at 9.8 and 14.8 respectively. In FY23, the remaining counties range from a low of 4.5 in Oceana to a high of 9.8 in Lake.



Improvement Efforts

State Opioid Response (SOR), State Targeted Response (STR), American Rescue Plan Act (ARPA), and COVID-19 Block grants allowed expansion of MAT services throughout the region. Projects included the addition of new Suboxone providers, providing transportation to MAT services, supporting recovery homes, and recovery management teams. In addition, these funds expanded Narcan distribution and education throughout all counties.

During FY21, efforts to address the waitlist in Muskegon County included transitioning the screening and medical assessment scheduling and managing the waitlist to HealthWest. HealthWest also began offering open intake assessment appointments and doing well-being check-ins with those on the waitlist as well as offering interim services. In addition, WCMCHS started jail-based MAT services in Lake County and provided stipends to support community-based MAT services in all 3 counties.

During FY22, efforts to increase MAT capacity include:

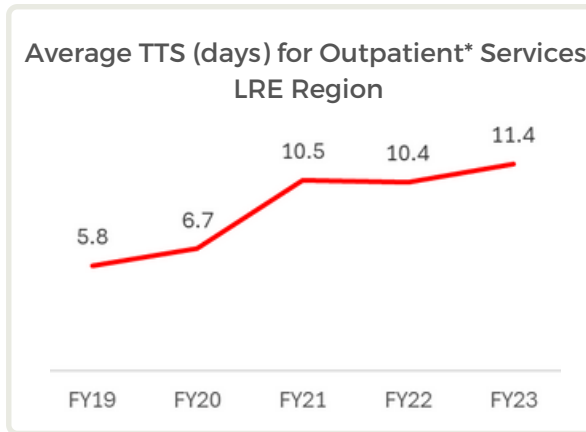
- N180 and HealthWest worked to engage additional MAT providers and provided assistance with the credentialing process. In Muskegon, Eastside began services on 10.1.22.
- To address staffing shortages N180 provided staff retention and new hire bonuses.
- HealthWest hired a recovery coach for the jail to coordinate treatment following release from jail.
- WCMCHS built capacity to provide MAT services when the provider in their counties discontinued services. Began 1.1.23 with no interruption.
- Allegan and Ottawa began providing jail-based MAT services.

Rural Communities

Access to services in rural areas has been identified as a challenge. Counties considered rural in the LRE region include Allegan, Lake, Mason, and Oceana.

To support access and respond to Covid-19 restrictions, tele-health services were established once state policy changed to allow for provider reimbursement. Innovative methods to support transportation needs include incentives for volunteers to drive consumers to and from treatment facilities in some of the rural communities in the region.

During FY22 a provider in Allegan was identified with extensive delays in TTS and a corrective action plan was put in place; with some improvement reflected in FY23 data. In addition, it was identified that some providers were using an incorrect date for the request for service for referred individuals. During FY23, the LRE worked to ensure the date of request for service was accurately recorded.



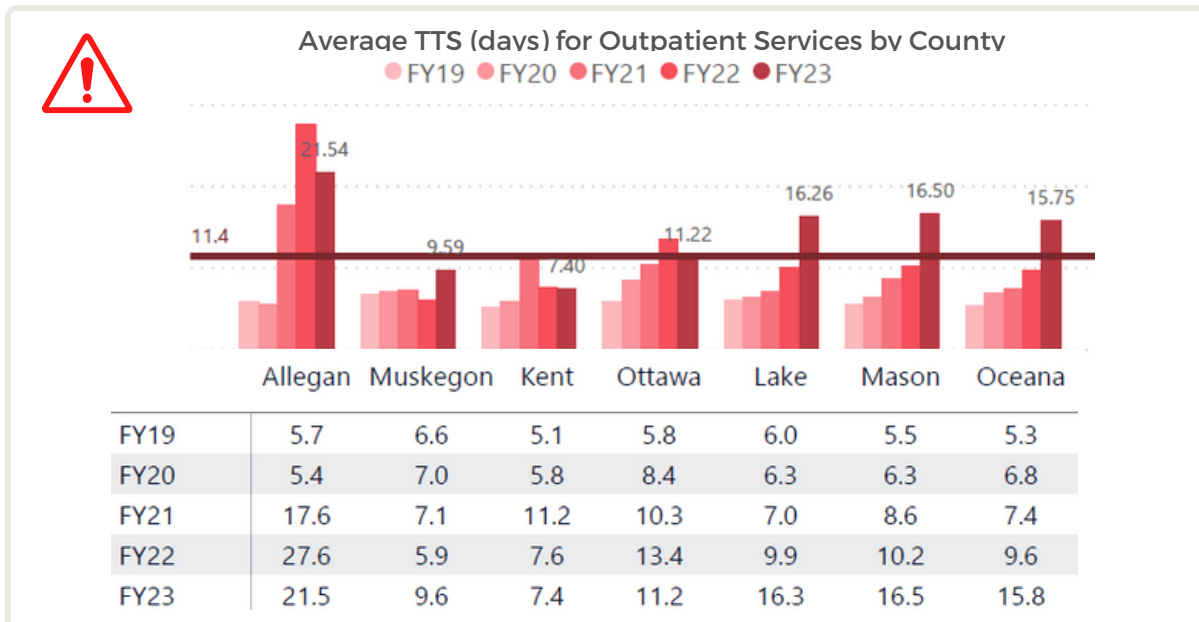
Data Highlights

Time to Service (TTS) for Outpatient services increased substantially between FY20 and FY21 and has remained high.

Among rural counties, the TTS for Outpatient services has been increasing with substantial increases between FY22 and FY23 for each rural county.

It should be noted that:

- TTS does not provide adjustments for limited client availability which delays the appointment or for the client rescheduling their appointment.
- Interim services are provided in some instances, such as peer recovery coach support, which are not reflected in the BHTEDS due to being funded by other sources.



*non-intensive & excludes MAT

Older Adults

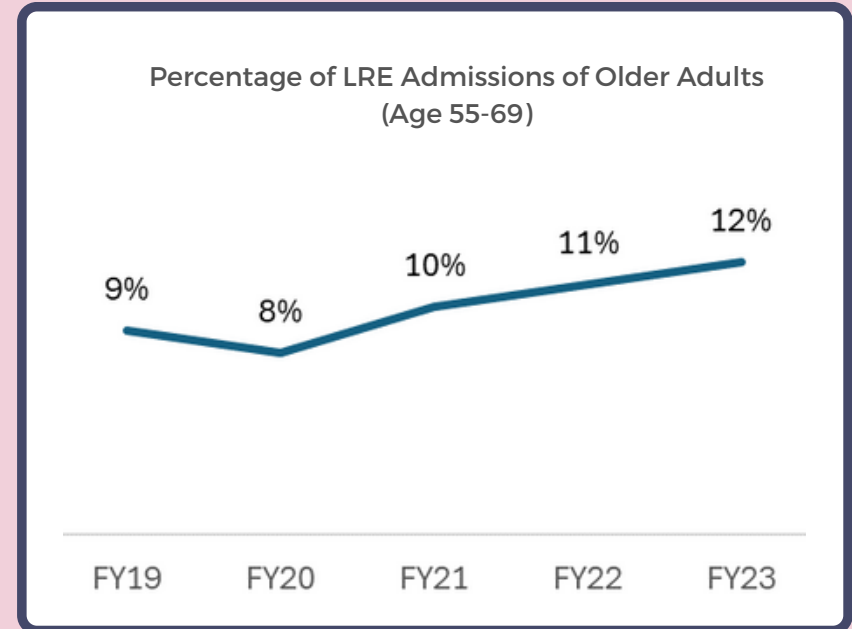
Improving access to services for older adults is currently a state-mandated priority. Planned efforts in the LRE region include promoting availability of services and the ability to access services, as well as providing training for providers on addressing behavioral health needs of older adults.

LRE leadership participated in state-level strategic planning for older adult services, which is available [here](#).

The LRE discussed older adults at the SUD ROAT and prevention meetings to assess community readiness for providing services for older adults. Potential trainings available to providers were reviewed and state trainings on the topic were promoted.

Data Highlights

The number of admissions in the region for older adults decreased substantially in FY20 which may have been due to Covid-19 restrictions. The percentage of admissions that were for older adults has been increasing since FY20 to a high of 12% in FY23.



	FY19	FY20	FY21	FY22	FY23
Admissions Older Adults	597	473	579	585	648



Engagement and Retention

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to engagement and retention in care as identified in the Strategic Plan.

Targeted Metrics: Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Trend* FY19-23
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis who received integrated svcs	6.0%	7.0%	11.0%	14.0%	20.0%	
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	27.9%	24.8%	25.3%	29.4%	36.5%	
	↓ average # days between discharge and admission to next level of care following ST residential						
	w/in 7 days	2.0	2.4	1.6	1.8	1.1	
	7+ days	17.5	17.6	17.2	16.6	15.4	
	Overall	7.8	9.1	9.1	8.3	7.1	
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'						
	Detox	25.2%	19.0%	18.2%	18.5%	29.7%	
	ST Res	67.6%	73.4%	70.5%	54.8%	71.0%	
	↑ % discharges from residential svcs w/reason as 'transfer/ completed level of care'						
	Detox	41.8%	51.7%	53.0%	49.1%	44.2%	
	ST Res	1.7%	1.5%	1.9%	18.1%	4.7%	
Initial Engagement	↓ % of treatment episodes with no 2nd visit	11.8%	11.4%	10.1%	10.9%	8.0%	
	↑ clients seen for a 2nd encounter w/in 14 days of 1st service (of those w/ a 2nd encounter)	87.4%	88.3%	88.0%	89.5%	92.7%	

* Improving Worsening Relatively stable

Integrated Treatment

The percent of clients with a co-occurring disorder that are reported as having received integrated treatment has been historically low in the LRE region, with only 6% in FY19.

For a client to be counted as having received integrated treatment services, services can be provided by one provider, or multiple providers as long as services are coordinated and there is a joint treatment plan with input from both disciplines. A billing modifier code must also be used when reporting all encounters (HH).

IMPROVEMENT EFFORTS

The SUD ROAT reviewed this issue in FY21 and determined that data entry guidance was unclear and was being used with varying interpretations by the provider network resulting in underreporting.

To address this, and other data entry issues, the LRE hosted a BH TEDS training in August 2021 and improvement was reflected in FY22 records. In FY22 CMHSP Members worked to ensure that providers had the HH modifier activated for billing purposes. This issue was addressed again at a BH TEDS training in FY23.

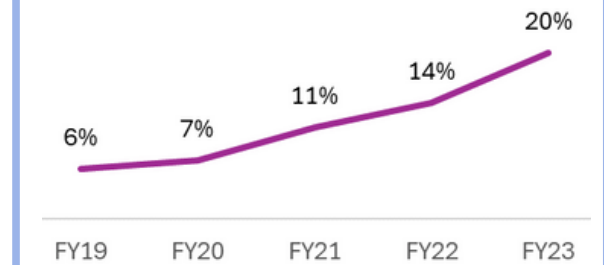
★ In FY23, CMHOC also modified how providers view medical records to make it easier to bill correctly and achieved substantial improvement with the highest rates in the region.

DATA HIGHLIGHTS

Between FY19 and FY23, the percent of clients with co-occurring disorder who received integrated treatment increased to 20% for the region.

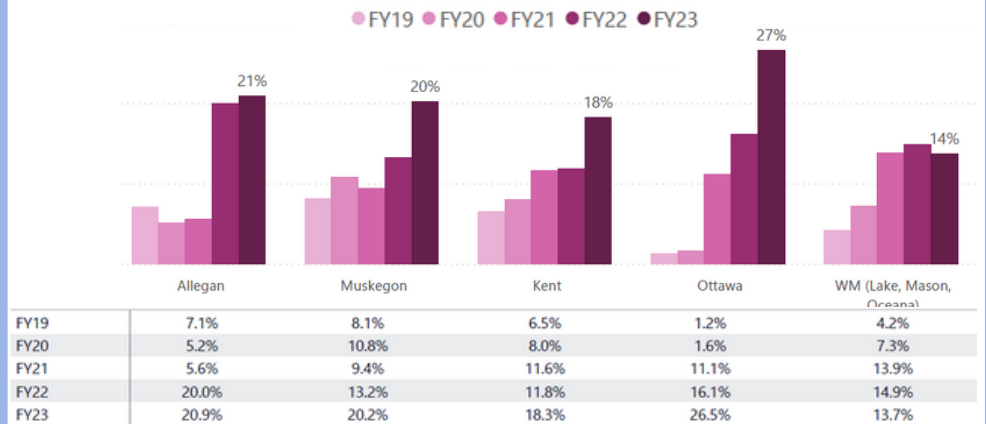
While the rate is still low, the region has achieved substantial and continual improvements since 2019.

★ Clients with Co-Occurring Disorders that Received Integrated Treatment



Between FY20 and FY23, Allegan, Muskegon, and Ottawa counties achieved substantial increases.

Clients with Co-Occurring Disorders that Received Integrated Treatment by CMHSP



Continuity of Care

It is important that clients who complete sub-acute detox and then short-term residential (ST Res) services engage in treatment at the next level of care (LOC) as soon as possible to reduce the likelihood of relapse. Also, because detox and ST Res should always be followed by a lower LOC, the discharge reason should be recorded as "Transferring/Completed Level of Care" and should **not** be recorded as "Completed Treatment".

Improvement Efforts

To address this issue during FY21, data was reviewed and discussed with the SUD ROAT and reviewed quarterly thereafter.

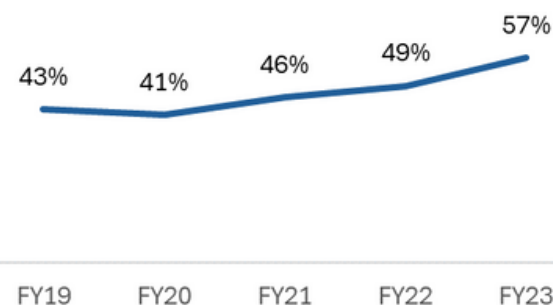
In response, each CMHSP reviewed data with their staff and provider networks. Ottawa, West MI, and Muskegon CMHSPs also engaged peer recovery coaches to assist these individuals and support engagement in local services following discharge from ST Res. In addition, accurate recording of the discharge reason was addressed during the BH TEDS training in August 2021. The benefits of these efforts are reflected in FY22 but were not sustained into FY23.

In FY23, CMHOC began monitoring consumers during this transition to ensure immediate follow-up, achieving substantial improvement with the highest rate of admissions to the next LOC within 30 days in FY23.

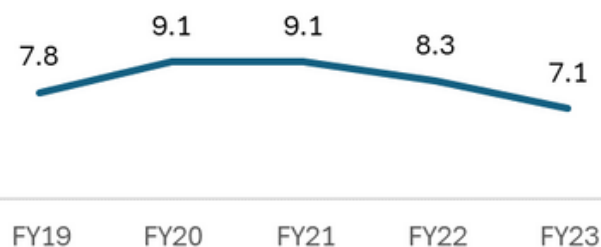
HealthWest hired a peer recovery coach in July of 2023 to assist with communication between the provider and consumer to improve engagement at the next LOC.

Data Highlights

Percent of Discharges from ST Res Admitted to the Next level of care w/in 30 Days

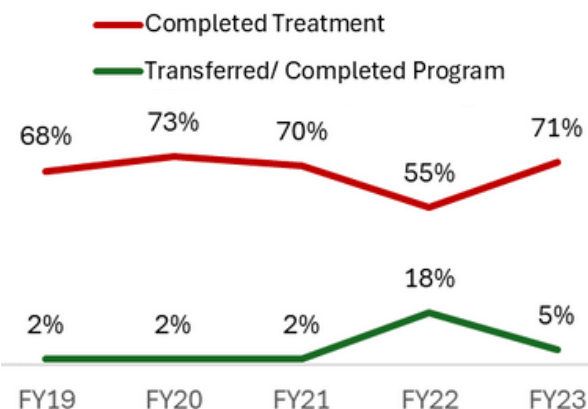


Average # Days Between ST Res Discharge and Admission to Next LOC*



*For those w/an admission within 30 days of discharge

Discharge Reason for Discharges from ST Res (Discharges from ST Res should not be recorded as 'completed treatment')



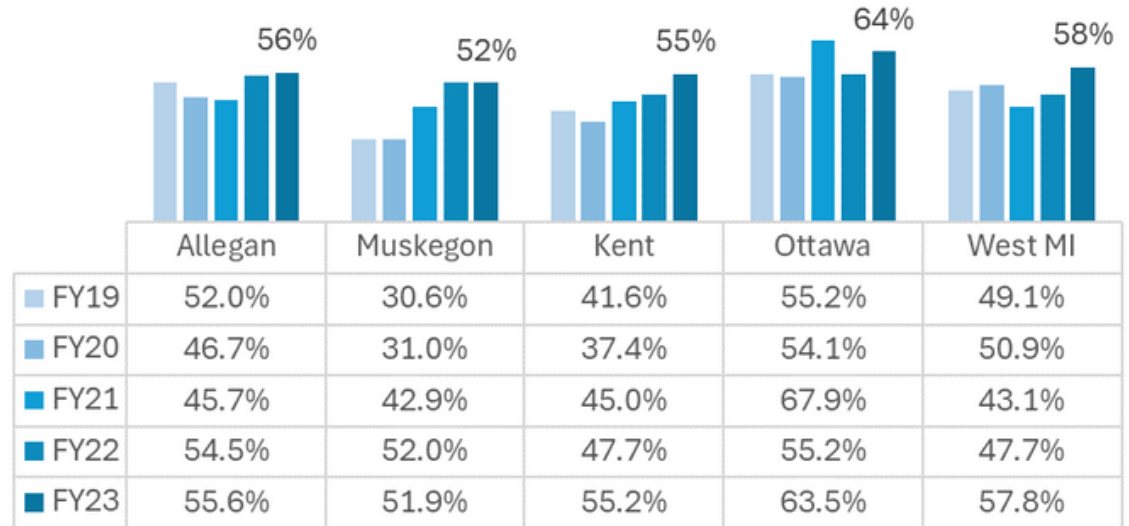
Continuity of Care

Data Highlights

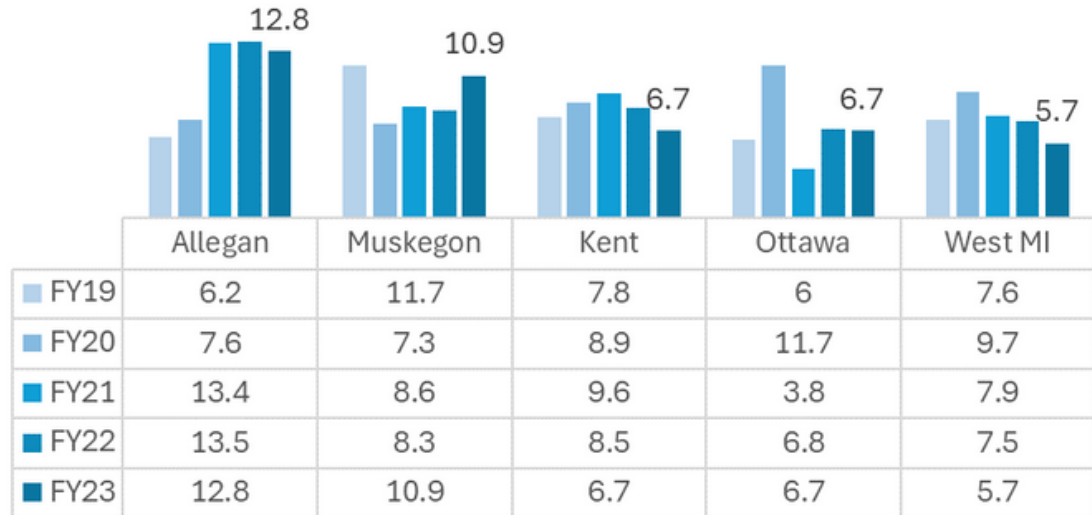
Between FY19 and FY23, the percent of clients being discharged from ST Res who were admitted to the next level of care within 30 days continued to increase region-wide, achieving a high of 57%. Improvements were achieved in each CMHSP.

The average number of days between discharge from ST Res and admission to the next LOC improved between FY21 and FY23 to an overall TTS of 7.1 days in FY23, region-wide. TTS for admissions that did not occur within 7 days also improved to 15.4 days regionally.

Percent of Discharges from ST Res Admitted to the Next level of care w/in 30 Days by CMHSP



Average # Days Between ST Res Discharge and Admission to Next LOC* by CMHSP



Initial Engagement

Metrics to monitor whether clients successfully engage in services after initial contact the LRE monitors how many clients had only one encounter (excluding those who did not require a second visit) and whether a client's 2nd visits occurred within 14 days of the first.

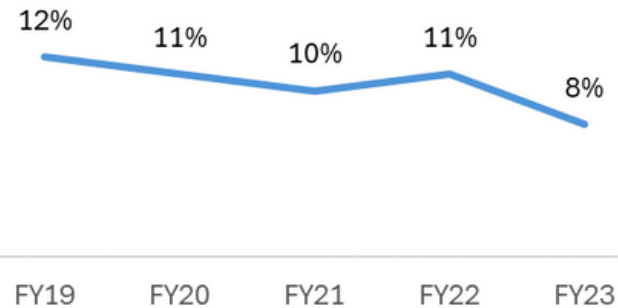
Data Highlights

Overall data indicates that the region's initial engagement of clients in SUD treatment is going well. The rate of admissions with only one visit improved achieving a low of 8% in FY23. Service categories with the highest rate of only one visit were Outpatient (14.9%) and Intensive Outpatient (10%), followed by medication assisted treatment (5.7%) and detox (4.9%).

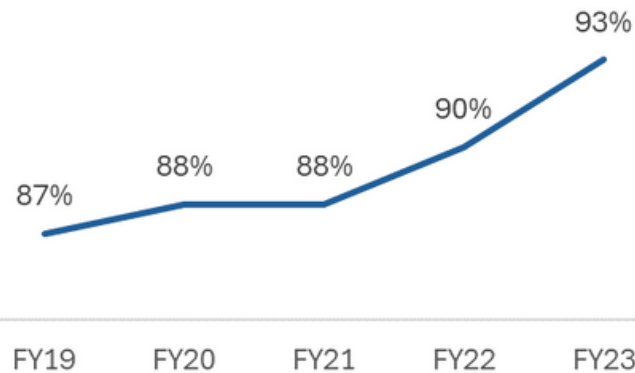
The percent of treatment episodes with the second visit occurring within 14 days of the first has been improving and achieved a high of 93% in FY23.



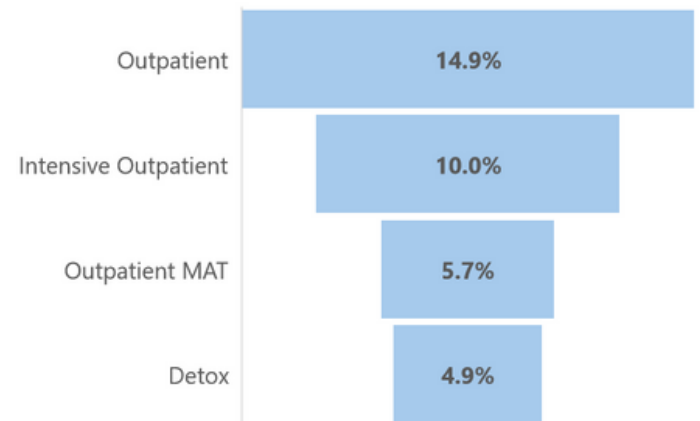
Percent of Treatment Episodes with Only One Encounter, LRE Region
Overall (All Service Categories)



Percent of Treatment Episodes Where the 2nd Visit Occurred Within 14 days of 1st Encounter, LRE Region



Percent of Treatment Episodes with Only One Encounter, LRE Region FY23
By Service Category



Responding to Methamphetamine (MA)

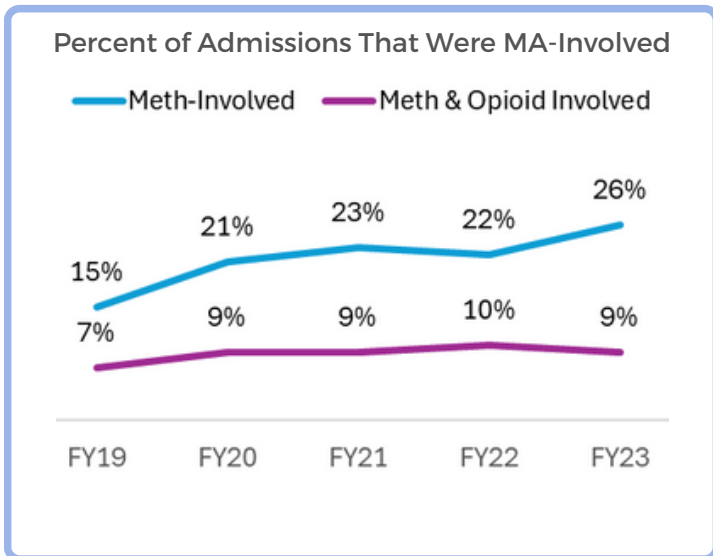
Methamphetamine emerged as a growing problem with treatment admissions for individuals reporting MA use increasing 400% between FY17 and FY21.

DATA HIGHLIGHTS

MA-involved admissions increased again in FY23 with 1-in-4 admissions involving MA (26%). Admissions involving both MA and an opioid has remained relatively stable at 9-10% of admissions.

Counties with the highest rate of MA-involved admissions were Allegan (48%), Lake (45%), and Oceana (40%); and the lowest was Kent (17%).

Counties with the highest rate of admissions involving both MA and an opioid were Oceana (18%), Muskegon (16%) and Lake (16%).

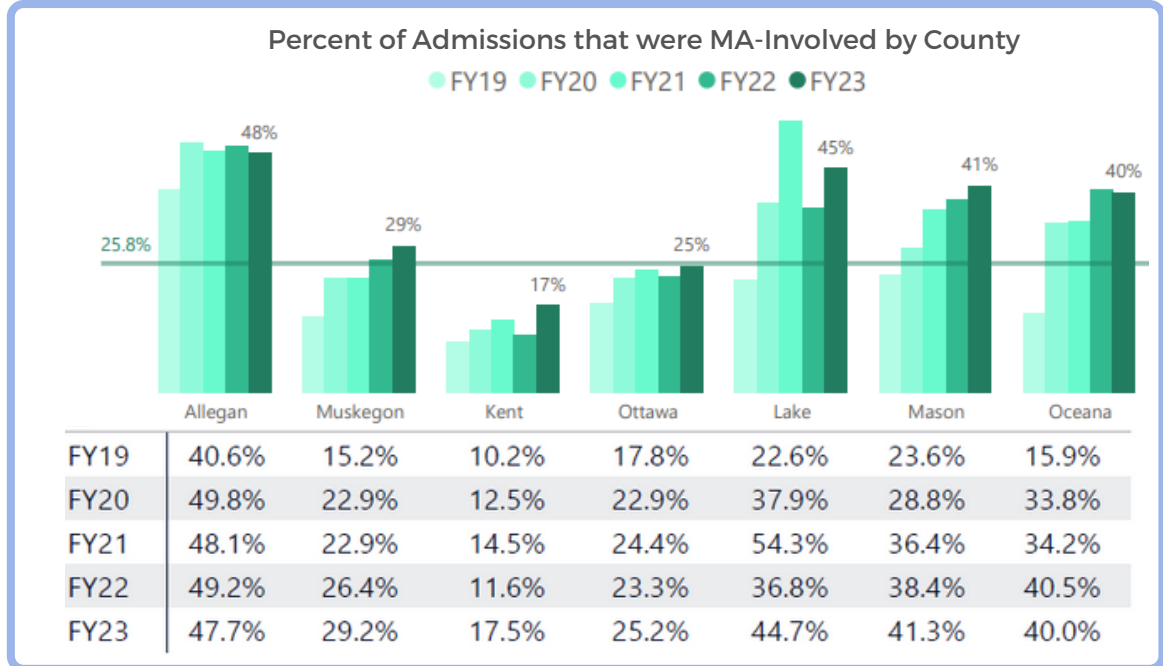


IMPROVEMENT EFFORTS

To address this issue, the LRE partnered with the Allegan Substance Abuse Prevention Task Force to commission a needs assessment for the region. In Feb. 2021, findings were presented followed by discussion to identify opportunities for action. This report is available [here](#).

In addition, the LRE promoted state training for providers on evidence-based treatment for MA, including training on Contingency Management and the Matrix Model.




Throughout the region, many providers unsuccessfully attempted to establish Contingency Management for clients using MA in outpatient settings.



Connection to Community Supports

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to connecting clients to community supports as identified in the Strategic Plan.

Targeted Metrics: Community Supports		FY19	FY20	FY21	FY22	FY23	Trend* FY19-23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	18%	23%	19%	21%	29%	
Women's Specialty Services	↑ # of pregnant women served	102	80	61	52	64	
	↑ # of pregnant women served by a Women's Specialty Provider	45	39	22	25	24	

*  Improving  Worsening  Relatively stable

Support Groups

To assist individuals in sustaining recovery following discharge from services, providers encourage individuals to attend community support groups such as Alcoholics Anonymous, Narcotics Anonymous, or SMART Recovery.

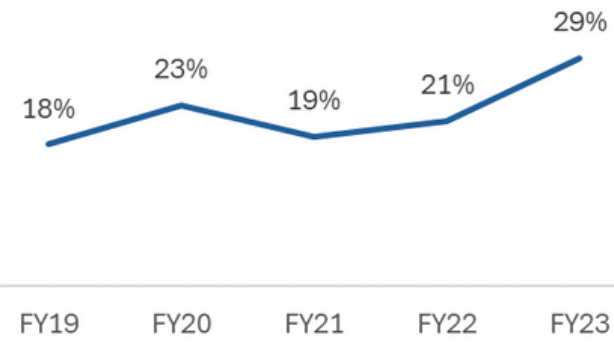
Planned efforts in the LRE region include expanding SMART recovery, and other support groups and strategies throughout the region.

Data Highlights

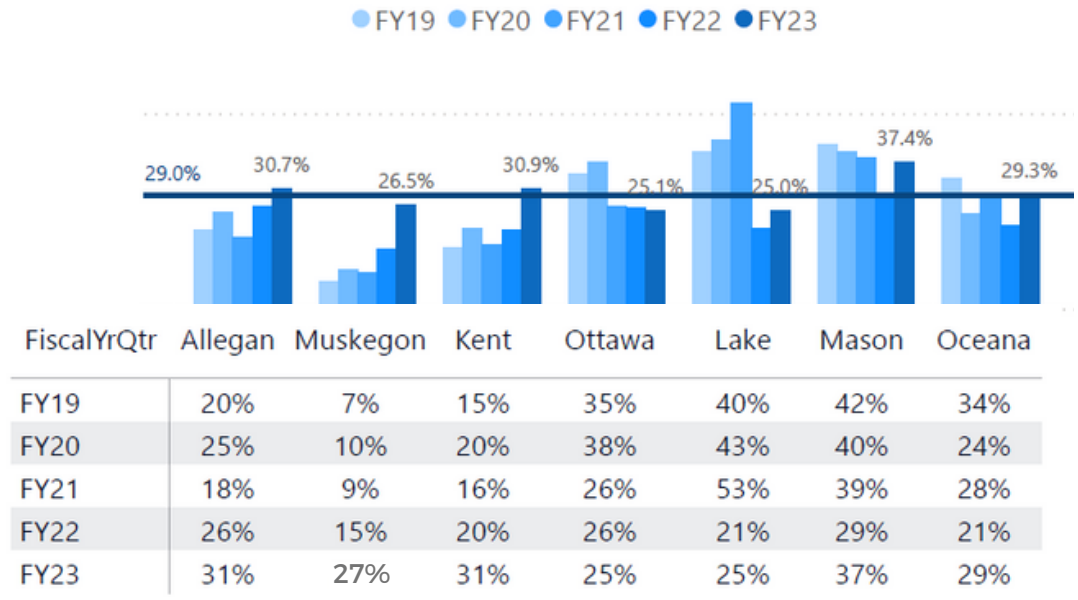
The rate of discharges with the client reporting they had attended a support group have varied since FY20 and improved in FY23 to a high of 29%.

The highest rates of reported support group involvement at discharge were in Mason (37%) and Allegan (31%) and Kent (31%), Oceana (29%). In FY23 rates improved substantially in Muskegon, Kent, Mason, and Oceana counties.

Percent of Discharges With Support Group Attendance in Past 30 Days



Percent of Discharges With Support Group Attendance in Past 30 Days by CMHSP



Women's Specialty Services

In Michigan, women who are pregnant and parenting are given priority for admission to treatment services and Substance Abuse Prevention and Treatment Block Grant requires states to spend a minimum amount each year for treatment and ancillary services for eligible women. To reduce barriers to treatment engagement, Women's Specialty Services (WSS) providers offer gender-responsive services and supports to address the unique needs of pregnant and parenting women. Ancillary services can include childcare, transportation, case management, therapeutic interventions for children, and primary medical and pediatric care.

IMPROVEMENT EFFORTS

To support WSS providers, the LRE established a regional workgroup for WSS providers in FY21. In FY22, it was decided to add Women's Specialty Services to the SUD ROAT for monthly discussion.

During FY21, COVID caused special challenges for mothers. In response, WSS providers implemented the following:

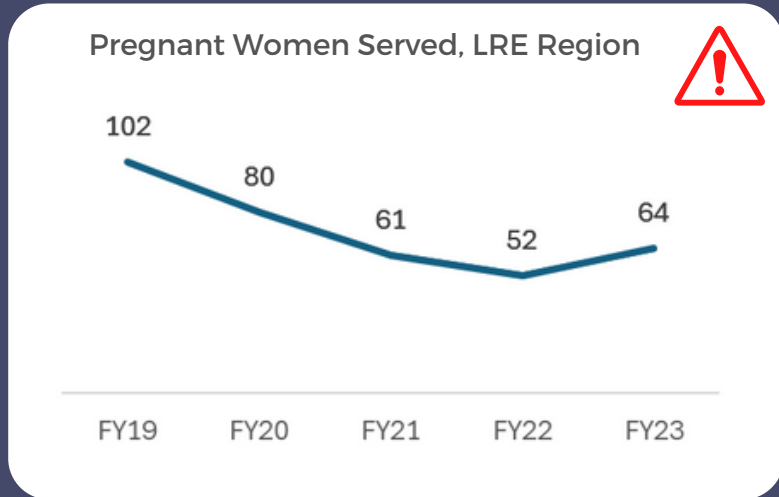
- Contingency Management child-based incentives.
- Creative solutions to ensure confidentiality during telehealth visits.
- Outreach through primary care providers, health clinics, and Dept. of Human Services. One physician began referring all pregnant women with a positive drug-screen to the WSS provider.
- Added swings and sandboxes for children to use while mother is in treatment.

IPost-COVID, WSS providers reported the following efforts to support pregnant and parenting women in treatment:

- Onsite childcare so women can focus on just themselves during services.
- Parenting skills programming such as Parenting Wisely, Safe Sleeping, and Love and Logic.
- Trauma programs such as Seeking Safety and Beyond Trauma.
- Collaboration with MDHHS to help women to access community resources such as food assistance more easily.
- Working with the public defender's office to coordinate on shared cases.
- Celebrating recovery anniversary dates and client milestones.
- Partnering with the YMCA to provide holistic health programming.
- Providing a Mentor program for young sons of moms in treatment to support positive family dynamic and involve fathers.
- Assisted moms in getting Christmas presents for their children and back to school shopping in the fall.

Data Highlights

The number of pregnant women served in the region has declined consistently and substantially since FY19, with a slight increase in FY23 to 64 pregnant women served. Of these women, 38% received services at a Women's Specialty Services Provider.



Pregnant Women Served by CMHSP

	FY19	FY20	FY21	FY22	FY23
Allegan	6	4	6	4	4
Muskegon	34	23	15	26	19
Kent	40	43	26	18	28
Ottawa	16	8	6	5	8
West MI	6	2	7	2	5
Out of Region	0	1	2	0	0
TOTAL	102	80	61	52	64

Total Number of Pregnant Women Served by Women's Specialty Providers

Women's Specialty Provider	FY 21	FY 22	FY 23
Arbor Circle	10	8	4
Family Outreach Center	3	4	2
Mercy Health Life Counseling	2	2	3
OAR - Harbor House	2	4	5
OAR - Women's Services (Grand Haven)	0	0	0
OAR - Women's Services (Holland)	2	3	6
Our Hope Association	3	2	4
Wedgwood	0	2	0
TOTAL	22	25	24



Performance Indicators

MDHHS compiles and reports treatment performance measures to the federal government. The following pages provide an overview of results for these measures for the LRE region during fiscal years 21 - 23.

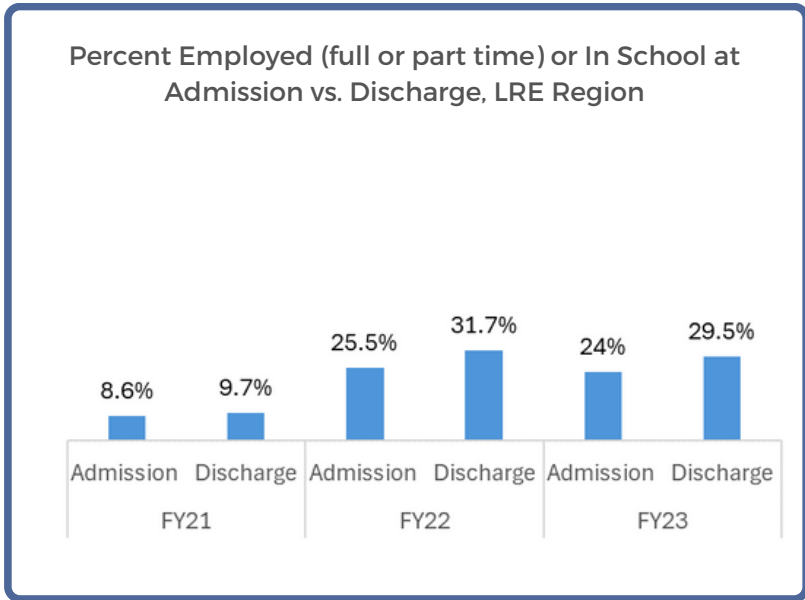


Employment/Education Status

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program.

Region-wide during FY22 and FY23, clients were more likely to report they were employed or in school than in FY21. In addition, the region achieved a substantial improvement in FY22 (↑ 24%) and FY23 (↑ 23%) between admission and discharge, compared to 12% improvement in FY21.

Every CMHSP in the region achieved improvement between admission and discharge in FY22 and FY23.



Percent Employed (full or part time) or In School at Admission vs. Discharge

FY21	Admission	Discharge	Relative Change	Absolute Change
Allegan	11.6%	11.6%	0.0%	0.0%
Muskegon	9.0%	9.5%	5.6%	0.5%
Kent	5.2%	9.5%	8.3%	4.3%
Ottawa	9.3%	9.9%	5.9%	0.5%
West MI	7.0%	8.5%	20.0%	1.4%
REGION	8.6%	9.7%	12.2%	1.0%

FY22	Admission	Discharge	Relative Change	Absolute Change
Allegan	28.0%	36.0%	28.6%	8.0%
Muskegon	27.0%	29.1%	7.5%	2.0%
Kent	19.7%	25.4%	28.8%	5.7%
Ottawa	34.3%	44.8%	30.4%	10.4%
West MI	29.2%	33.8%	15.8%	4.6%
REGION	25.5%	31.7%	24.0%	6.1%

FY23	Admission	Discharge	Relative Change	Absolute Change
Allegan	27.5%	31.4%	14.1%	3.9%
Muskegon	20.6%	21.5%	4.36%	0.9%
Kent	19.2%	24.4%	27.0%	5.2%
Ottawa	31.7%	41.9%	32.1%	10.2%
West MI	35.4%	40.7%	14.9%	5.3%
REGION	24.1%	29.5%	18.3%	5.4%

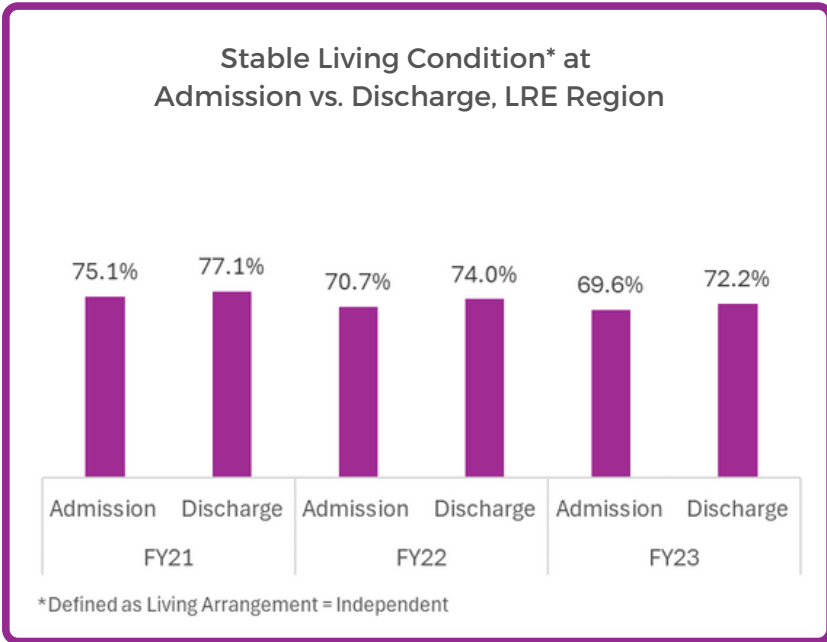


Stability of Housing

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program. Stable is defined as independent.

Region-wide, clients achieved the greatest improvement from admission to discharge in FY22 with a 4.7% improvement compared to a 2.0% improvement in FY21 and 3.7% in FY23.

Allegan achieved the greatest relative improvement in both FY22 (10%) and FY23 (13.7%).



Among Clients Discharged During FY21, the Percent Reporting A Stable Living Condition at Admission vs. Discharge*

FY21	Admission	Discharge	Relative Change	Absolute Change
Allegan	82.6%	86.0%	4.2%	3.5%
Muskegon	67.0%	70.0%	4.5%	3.0%
Kent	75.9%	81.9%	8.0%	6.0%
Ottawa	89.0%	88.5%	-0.6%	-0.5%
West MI	76.1%	69.0%	-9.3%	-7.0%
REGION	75.1%	77.1%	2.6%	2.0%

FY22	Admission	Discharge	Relative Change	Absolute Change
Allegan	80.0%	88.0%	10.0%	8.0%
Muskegon	77.7%	79.7%	2.6%	2.0%
Kent	64.1%	67.8%	5.9%	3.8%
Ottawa	80.6%	83.6%	3.7%	3.0%
West MI	63.1%	67.7%	7.3%	4.6%
REGION	70.7%	74.0%	4.7%	3.3%

FY23	Admission	Discharge	Relative Change	Absolute Change
Allegan	56.9%	64.7%	13.7%	7.8%
Muskegon	75.6%	77.5%	2.5%	1.9%
Kent	60.9%	63.5%	4.2%	2.6%
Ottawa	77.4%	80.1%	3.4%	2.7%
West MI	80.5%	82.3%	2.2%	1.8%
REGION	69.6%	72.2%	3.7%	2.6%



Housing Efforts to Date

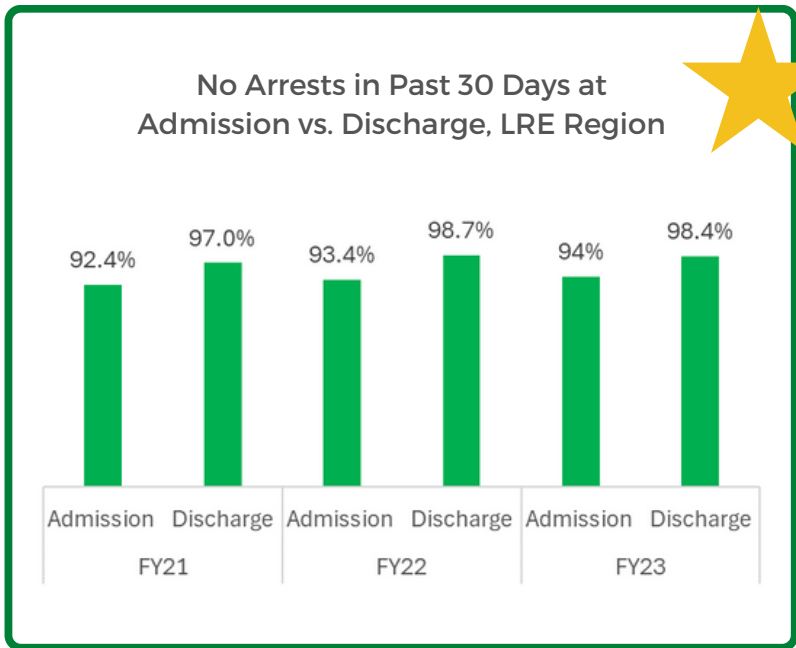
- Network 180 partnered with Mel Trotter (who provides services to individuals who are experiencing homelessness) to have two Recovery Coaches engage with guests at Mel Trotter's Engagement Center.
- Community Mental Health of Ottawa County has begun to provide outreach and services with Refresh (a shower program for individuals experiencing homelessness).
- Network 180 is working with Pine Rest and Grand Rapids Housing Commission to place a Clinician and a Recovery Coach on-site at Adam's Park Apartments.



Criminal Justice Involvement

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program.

Region-wide, the percent of clients with no recent arrest was relatively high at admission but improved each fiscal year.



Percent with No Arrest in Prior 30 Days at Admission vs. Discharge

FY21	Percent with No Arrest		Relative Change	Absolute Change
	Admission	Discharge		
Allegan	90.7%	90.7%	0.0%	0.0%
Muskegon	95.0%	98.8%	3.9%	3.8%
Kent	92.2%	95.7%	3.7%	3.4%
Ottawa	91.8%	97.3%	6.0%	5.5%
West MI	81.7%	95.8%	17.2%	14.1%
REGION	92.4%	97.0%	4.9%	4.5%

FY22	Percent with No Arrest		Relative Change	Absolute Change
	Admission	Discharge		
Allegan	100%	100%	0.0%	0.0%
Muskegon	95.3%	100%	5.0%	4.7%
Kent	95.4%	98.4%	3.1%	3.0%
Ottawa	93.0%	98.0%	5.3%	5.0%
West MI	81.5%	98.5%	20.8%	16.9%
REGION	93.4%	98.7%	5.7%	5.3%

FY23	Percent with No Arrest		Relative Change	Absolute Change
	Admission	Discharge		
Allegan	94.1%	96.1%	2.1%	2.0%
Muskegon	97.1%	98.1%	1.0%	1.0%
Kent	95.5%	97.9%	2.5%	2.4%
Ottawa	90.3%	100.0%	10.7%	9.7%
West MI	90.3%	99.1%	9.7%	8.8%
REGION	94.2%	98.4%	4.4%	4.2%

Priority Populations

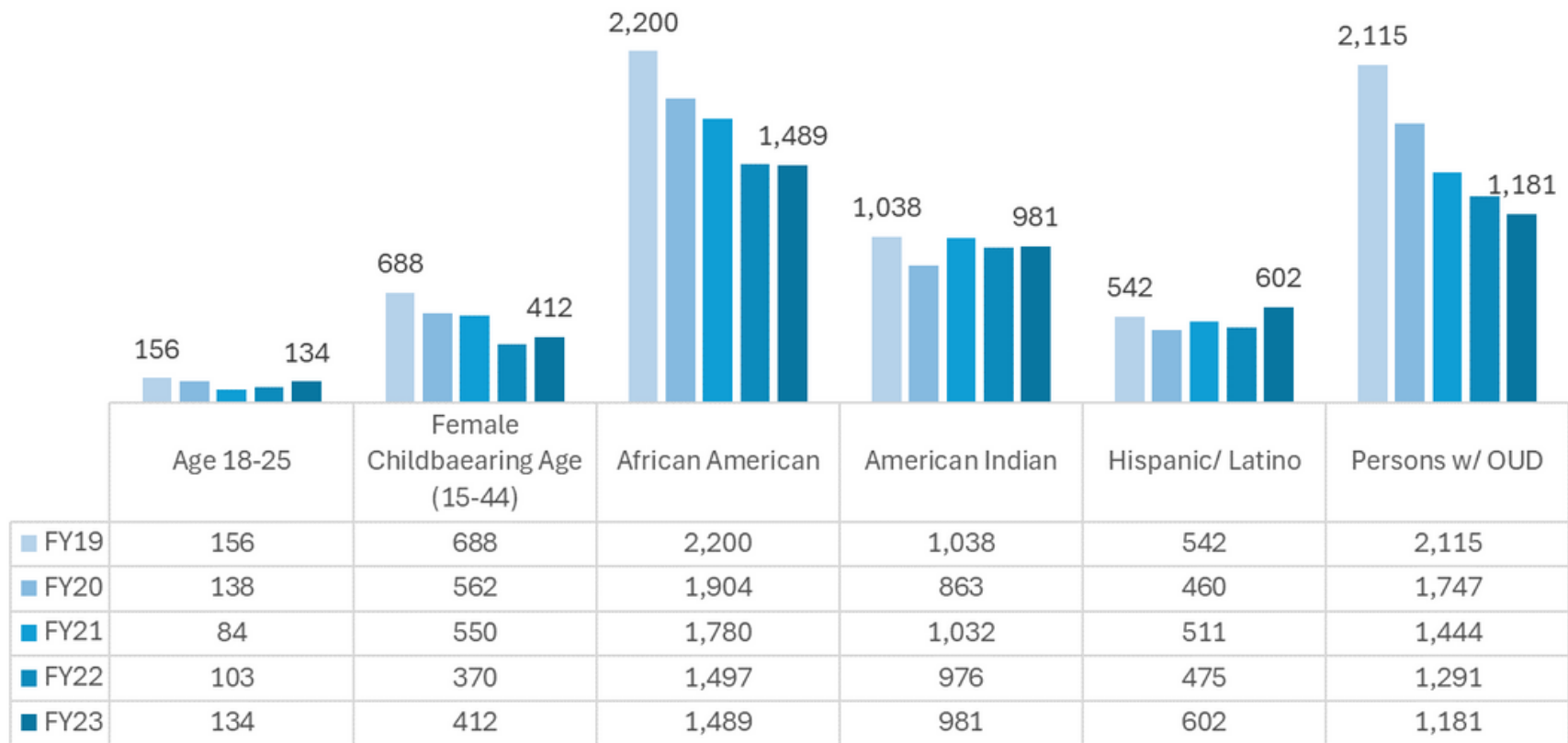
The following pages provide an overview of admissions for populations that MDHHS has identified as a priority to engage in SUD treatment. To monitor engagement, the number of admissions and percentage of total admissions for each priority population are monitored.



Priority Populations: Overview

An overview of admissions for priority populations in the region is provided below. The total number of admissions in the region decreased by 16% between FY19 and FY23 (from 6,565 to 5,496). Admissions for four of these priority populations decreased by a greater amount than can be accounted for by the overall decrease in admissions.

Number of Treatment Admissions by Priority Population, LRE Region



↓14%

↓40%

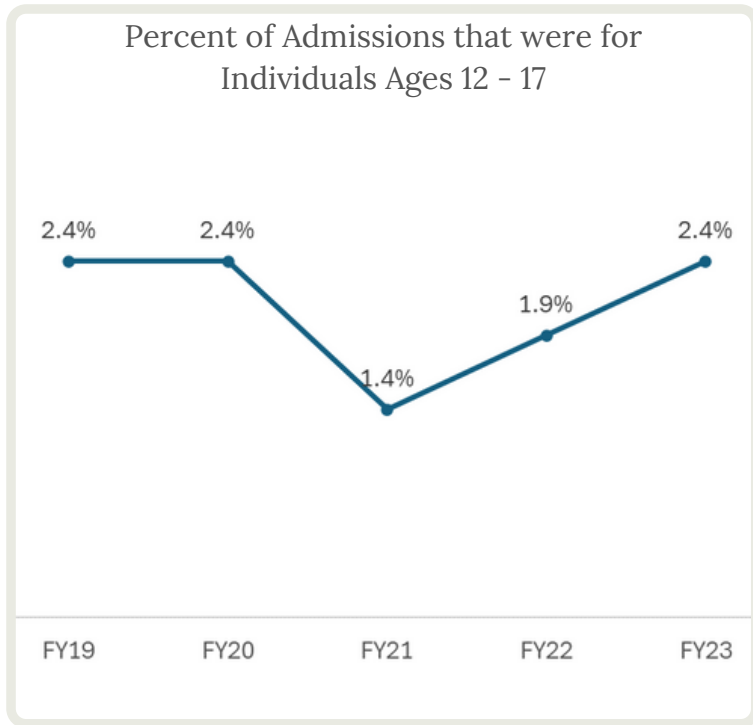
↓32%

↓5%

↓44%

Priority Population: Youth Ages 12-17

The number of admissions for youth ages 12 through 17 decreased 34% between FY19 and FY22 (from 156 to 103) but rebounded somewhat in FY23 due to an increase in Kent County. Muskegon and Ottawa counties had substantial decreases.

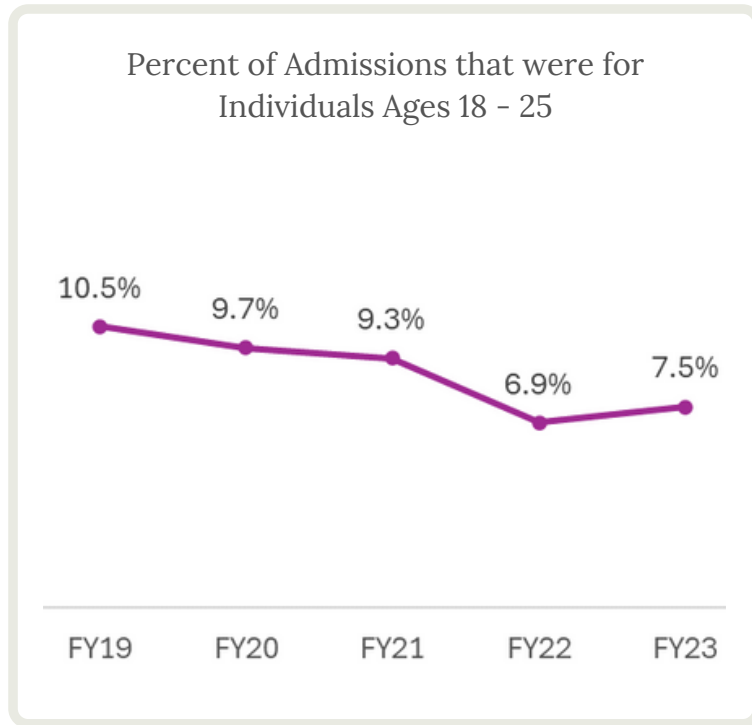


Number of Admissions for Individuals Ages 12 - 17

	FY19	FY20	FY21	FY22	FY23
Allegan	5	9	4	1	0
Muskegon	46	22	0	3	20
Kent	60	70	48	81	100
Ottawa	38	33	25	15	12
Lake	0	2	2	0	0
Mason	7	2	5	2	1
Oceana	0	0	0	1	1
Out of Region	0	0	0	0	0
REGION	156	138	84	103	134

Priority Population: Young Adults Ages 18-25

The number of admissions for young adults ages 18-25 decreased 40% between FY19 and FY23 (from 687 to 412), with substantial decreases in most counties. As a proportion of all admissions, admissions for youth ages 18-25 represented 10.5% of admissions in FY19 and 7.5% in FY23.

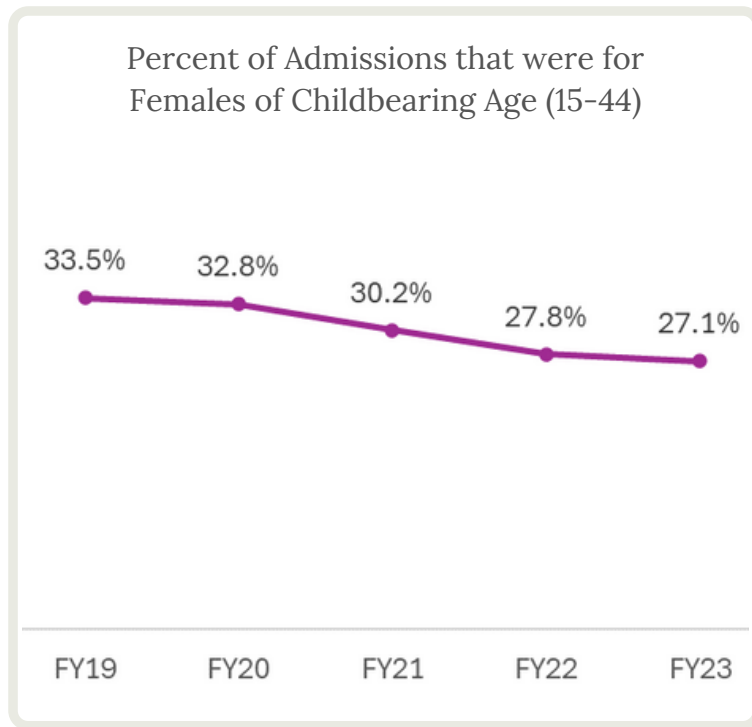


Number of Admissions for Individuals Ages 18-25

	FY19	FY20	FY21	FY22	FY23
Allegan	54	44	45	36	44
Muskegon	165	121	95	63	66
Kent	253	206	213	138	161
Ottawa	102	123	131	90	90
Lake	9	4	8	8	10
Mason	70	39	41	13	29
Oceana	30	22	13	15	12
Out of Region	5	3	4	7	0
REGION	688	562	550	370	412

Priority Population: Females of Childbearing Age (15-44)

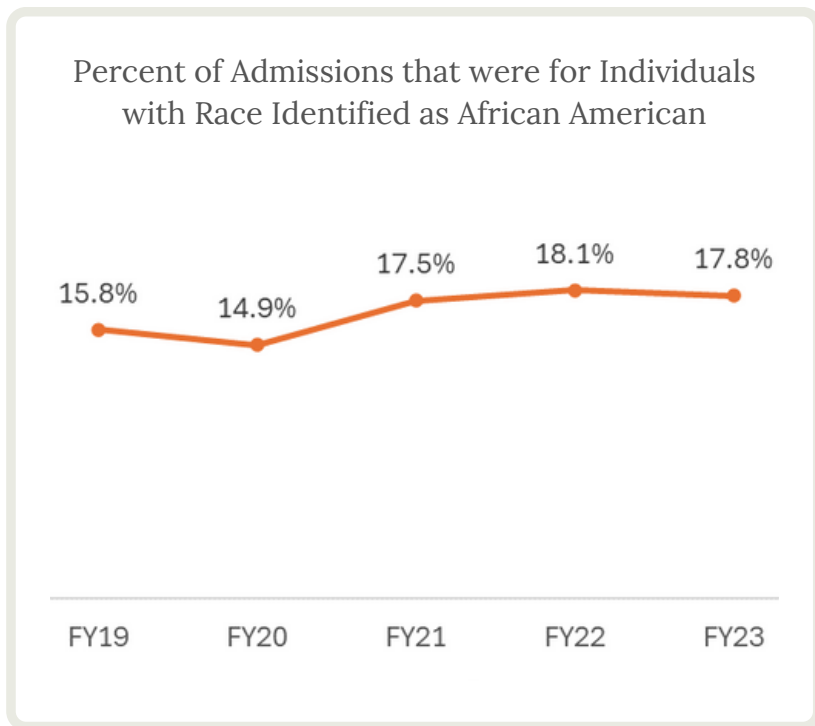
Region-wide, between FY19 and FY23 the number of admissions for females in this age range decreased 32% (from 2,200 to 1,489) with substantial decreases in most counties. As a proportion of all admissions, admissions for this population declined continually from 33.5% of admissions in FY19 to 27.0% in FY23.



	Number of Admissions for Females of Childbearing Age (15-44)				
	FY19	FY20	FY21	FY22	FY23
Allegan	158	155	130	99	115
Muskegon	601	452	404	381	362
Kent	921	835	731	577	585
Ottawa	321	325	331	269	297
Lake	23	27	33	23	14
Mason	121	59	90	85	57
Oceana	63	44	56	45	55
Out of Region	9	7	5	18	4
REGION	2,200	1,904	1,780	1,497	1,489

Priority Population: African American

Region-wide, between FY19 and FY23, the number of admissions for African American individuals decreased 5% (from 1,038 to 981) due to a substantial decrease in Muskegon County while admissions increased for all other counties. Although the number of admissions decreased, the proportion of total admissions that were representing this population has increased overall with continual increases since FY20.

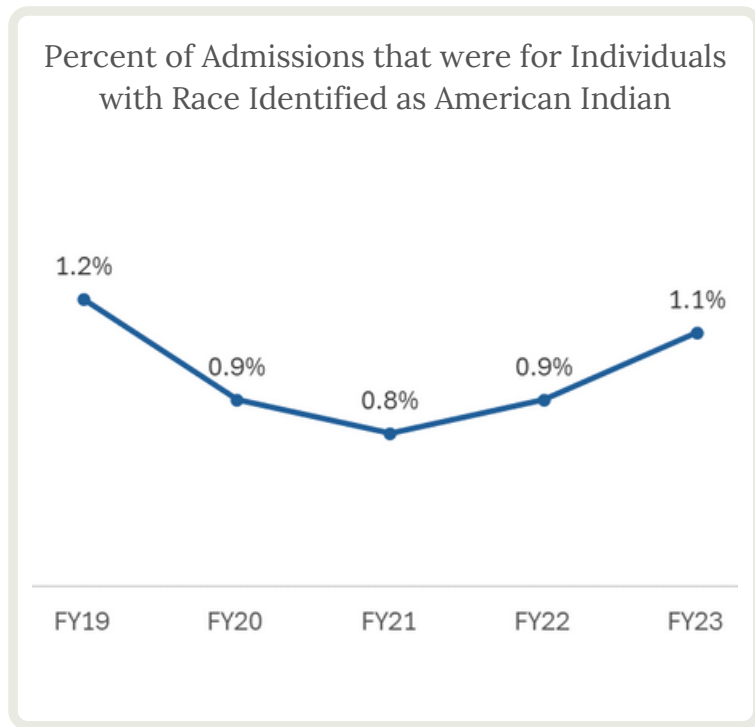


Number of Admissions with Race Identified as African American

	FY19	FY20	FY21	FY22	FY23
Allegan	8	21	17	15	9
Muskegon	373	218	245	228	241
Kent	596	561	686	626	643
Ottawa	47	56	71	93	74
Lake	6	3	8	6	3
Mason	5	3	2	3	8
Oceana	1	0	2	3	3
Out of Region	2	1	1	2	0
REGION	1,038	863	1,032	976	981

Priority Population: American Indian (non-Alaskan Native)

Region-wide, between FY19 and FY23, the number of admissions for American Indian individuals decreased 18% (from 76 to 62). The proportion of all admissions that were for this population remain very low and have decreased slightly since FY19.

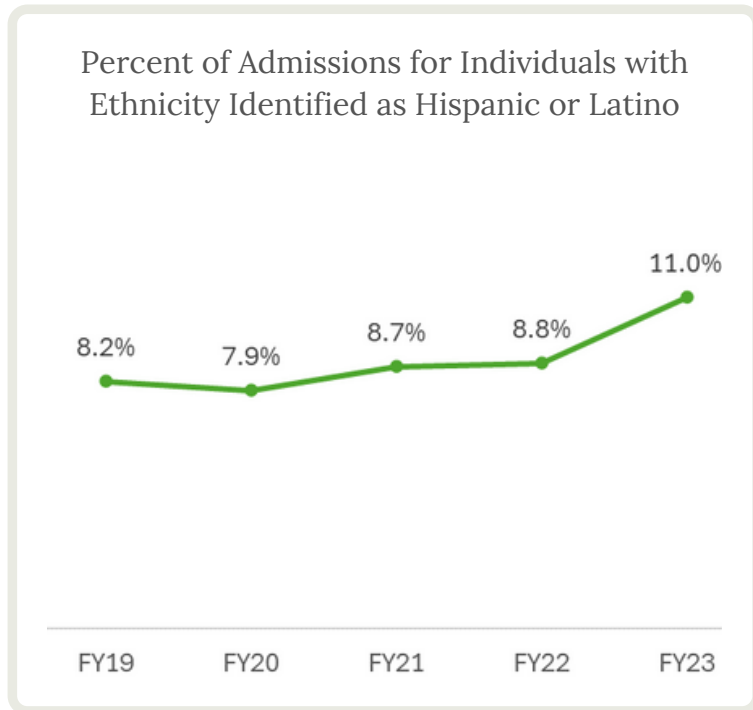


Number of Admissions for Individuals with Race Identified as American Indian

	FY19	FY20	FY21	FY22	FY23
Allegan	6	7	4	0	6
Muskegon	18	13	11	20	15
Kent	36	22	18	23	28
Ottawa	7	6	9	4	6
Lake	3	2	0	1	0
Mason	5	2	6	2	4
Oceana	1	1	2	0	2
Out of Region	0	0	0	0	1
REGION	76	53	50	50	62

Priority Population: Hispanic or Latino

Region-wide, between FY19 and FY23, the number of admissions for Hispanic or Latino individuals increased by 11% (from 542 to 602) due to a substantial increase in Ottawa County. The proportion of all admissions that were for this population increased in FY23 to a high of 11.0%.

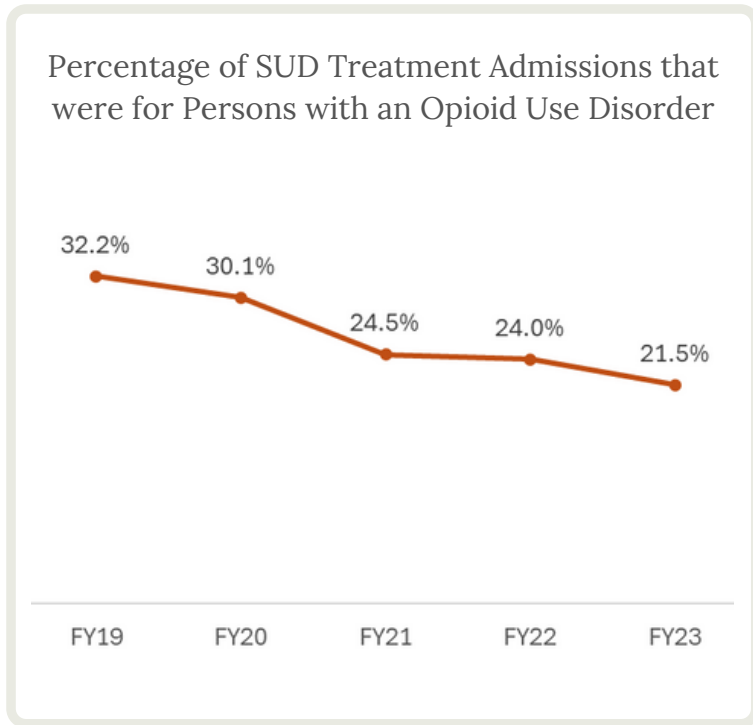


Number of Admissions for Individuals with Ethnicity Identified as Hispanic or Latino

	FY19	FY20	FY21	FY22	FY23
Allegan	32	33	31	29	33
Muskegon	63	49	37	61	68
Kent	279	206	234	194	239
Ottawa	100	123	162	153	207
Lake	3	3	4	3	5
Mason	29	16	12	7	24
Oceana	33	28	30	26	25
Out of Region	3	2	1	2	1
REGION	542	460	511	475	602

Priority Population: Persons with Opioid Use Disorder

Region-wide, between FY19 and FY23, the number of admissions for persons with an opioid use disorder decreased 44% (from 2,115 to 1,181) with substantial reductions in Allegan, Muskegon, and Kent counties. The percentage of total admissions that were for persons with an opioid use disorder also decreased between FY19 and FY23 (from 32.2% to 21.5%).



Number of SUD Treatment Admissions for Persons with an Opioid Use Disorder

	FY19	FY20	FY21	FY22	FY23
Allegan	79	66	50	37	29
Muskegon	744	533	466	493	447
Kent	810	716	543	406	338
Ottawa	237	238	200	142	225
Lake	17	25	19	28	13
Mason	148	103	108	108	67
Oceana	70	50	53	63	57
Out of Region	10	16	5	14	5
REGION	2,115	1,747	1,444	1,291	1,181

Summary of Trends



The following pages provide a snapshot of trend data for all metrics targeted in the LRE SUD Strategic Plan for each CMHSP.

OnPoint - Allegan County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions) - T1	34.8%	41.5%	39.7%	34.6%	35.9%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	n/a	0.7%	2.6%	0.3%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	12.5%	5.9%	1.4%	3.2%	0.8%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	5.15	3.26	8.84	15.46	16.10	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	3.1	3.4	6.6	9.8	14.8	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	5.72	5.37	17.6	27.55	21.54	11.4
Older Adults	↑ # of admissions for age 55-69	6.3%	7.6%	5.7%	7.1%	12.1%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attending support group in past 30 days	20.3%	24.7%	18.2%	26.1%	30.7%	28.8%
Women's Specialty	↑ # of pregnant women served	6	4	6	4	4	64

OnPoint - Allegan County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	7.1%	5.2%	5.6%	20.0%	20.9%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	40.0%	33.3%	8.6%	18.2%	22.2%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	6.2	7.6	13.4	13.5	12.8	7.1
	↓ % of discharges from ST Res with reason as 'completed treatment'	54.3%	57.5%	54.2%	68.2%	58.7%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	2.2%	5.0%	0.0%	9.1%	0.0%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	5.3%	0.0%	12.0%	10.0%	0.0%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	77.9%	73.8%	73.6%	61.5%	69.4%	84.2%
	↑ average # of treatment encounters per treatment episode	25.1	37.3	15.5	17.0	13.0	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	37.5%	47.9%	40.7%	60.4%	46.5%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	25.0%	23.9%	22.0%	22.9%	25.2%	26.4%

HealthWest - Muskegon County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	20.1%	16.0%	18.1%	20.2%	21.8%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.4%	0.6%	0.4%	0.3%	0.2%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	16.5%	17.4%	15.6%	17.0%	14.3%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	16.6	7.37	15.98	3.9	7.0	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	27.1	9.5	28.5	4.7	7.0	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	6.64	7.02	7.11	5.92	9.59	11.4
Older Adults	↑ # of admissions for individuals aged 55-69	9.4%	6.8%	7.5%	7.0%	10.5%	11.8%
Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	7.1%	10.1%	9.1%	15.3%	26.5%	28.8%
Women's Specialty	↑ # of pregnant women served	34	23	15	26	19	64

HealthWest - Muskegon County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	8.1%	10.8%	9.4%	13.2%	20.2%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	12.2%	20.7%	25.0%	34.0%	25.9%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	11.7	7.3	8.6	8.3	10.9	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	73.2%	72.5%	73.0%	56.9%	74.0%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	0.0%	0.7%	1.5%	18.2%	2.7%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	19.3%	13.4%	13.8%	15.3%	8.0%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	73.7%	73.2%	81.9%	85.5%	87.3%	84.2%
	↑ average # of treatment encounters per treatment episode	14.6	23.3	24.4	43.0	29.2	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	31.3%	22.4%	21.6%	29.4%	30.6%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	18.0%	15.5%	11.8%	10.6%	13.2%	26.4%

Network 180 - Kent County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	15.9%	16.3%	14.4%	18.8%	18.8%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	0.3%	0.2%	0.4%	0.3%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	4.5%	3.1%	1.8%	2.9%	3.4%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	4.11	6.49	6.66	5.56	5.84	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	4.0	7.1	6.6	6.1	7.2	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	5.08	5.83	11.2	7.59	7.40	11.4
Older Adults	↑ # of admissions for individuals aged 55-69	9.5%	9.0%	12.2%	13.6%	12.8%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	15.5%	20.4%	16.4%	20.2%	30.9%	28.8%
Women's Specialty	↑ # of pregnant women served	40	43	26	18	28	64

Network 180 - Kent County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	6.5%	8.0%	11.6%	11.8%	18.3%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	27.3%	23.1%	25.2%	27.6%	36.2%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	7.8	8.9	9.6	8.5	6.7	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	63.3%	75.9%	74.1%	55.8%	78.4%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	2.1%	0.5%	1.0%	16.1%	1.8%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	8.0%	9.2%	11.6%	11.3%	10.4%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	78.8%	76.5%	78.6%	75.4%	83.9%	84.2%
	↑ average # of treatment encounters per treatment episode	24.8	25.2	21.5	16.6	20.3	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	39.1%	36.8%	26.8%	43.9%	40.2%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	30.6%	34.5%	54.5%	34.3%	31.0%	26.4%

OCCMHS - Ottawa County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	28.4%	26.1%	28.5%	28.2%	27.1%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.7%	0.1%	0.5%	0.5%	0.2%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	0.3%	2.6%	2.6%	0.5%	0.2%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	9.59	5.99	6.15	6.42	7.99	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	13.4	4.5	5.2	6.5	8.4	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	5.84	8.44	10.26	13.44	11.22	11.4
Older Adults	↑ # of admissions for individuals aged 55-69	9.3%	7.9%	10.3%	11.2%	12.1%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	34.5%	37.6%	26.4%	26.0%	25.1%	28.8%
Women's Specialty	↑ # of pregnant women served	16	8	6	5	8	64

OCCMHS - Ottawa County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	1.2%	1.6%	11.1%	16.1%	26.5%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	41.4%	24.3%	46.4%	34.5%	40.4%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	6.0	11.7	3.8	6.8	6.7	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	70.9%	69.7%	62.2%	47.9%	67.2%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	0.0%	2.0%	2.0%	22.3%	7.2%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	14.0%	16.7%	15.1%	8.8%	12.2%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	85.4%	73.7%	69.5%	72.9%	72.0%	84.2%
	↑ average # of treatment encounters per treatment episode	25.5	21.2	31.7	24.2	23.7	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	40.8%	44.1%	34.8%	36.1%	32.8%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	27.3%	27.5%	26.4%	37.0%	37.4%	26.4%

WCMHS - Lake, Mason and Oceana Counties, Summary of Trends

Treatment Access Measures		Counties	FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	Lake	17.7%	10.6%	22.2%	19.7%	15.8%	23.6%
		Mason	26.1%	26.2%	26.1%	21.0%	39.9%	
		Oceana	19.0%	20.0%	18.0%	17.3%	28.0%	
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	Lake	n/a	n/a	n/a	n/a	n/a	0.2%
		Mason	0.3%	n/a	0.7%	0.4%	0.4%	
		Oceana	n/a	n/a	n/a	0.6%	n/a	
	↑ admissions with legal status as 'in jail' (% of all admissions)	Lake	9.7%	10.6%	17.3%	26.3%	19.7%	5.6%
		Mason	16.3%	10.0%	11.3%	12.1%	8.7%	
		Oceana	10.6%	9.4%	13.0%	19.1%	14.5%	
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	Lake	5.12	3.24	3.05	5.54	6.92	7.3
		Mason	4.70	5.01	5.39	6.77	8.57	
		Oceana	13.00	4.26	4.26	6.6	10.30	
	↓ average days between request for service for Medication Assisted Treatment (MAT)	Lake	7.0	2.3	1.4	6.2	9.8	7.4
		Mason	3.8	2.0	3.5	4.9	7.2	
		Oceana	22.4	1.3	1.3	6.0	4.5	

WCMCHS - Lake, Mason and Oceana Counties, cont.

Treatment Access Measures		Counties	FY19	FY20	FY21	FY22	FY23	Region FY23
Rural Communities	↓ average days' time to service for Outpatient* services	Lake	5.97	6.28	6.97	9.94	16.26	11.4
		Mason	5.48	6.30	8.64	10.19	16.50	
		Oceana	5.31	6.75	7.4	9.6	15.75	
Older Adults	↑ # of admissions for individuals aged 55-69	All	8.1%	8.0%	4.9%	9.1%	8.9%	11.8%

Connection to Community Supports		Counties	FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	Lake	40.0%	43.1%	52.8%	20.5%	25.0%	28.8%
		Mason	42.1%	40.3%	38.8%	29.3%	37.4%	
		Oceana	33.5%	24.4%	28.5%	21.2%	29.3%	
Women's Specialty	↑ # of pregnant women served	All	6	2	7	2	5	64

WCMCHS - Lake, Mason and Oceana Counties, cont.

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	4.2%	7.3%	13.9%	14.9%	13.7%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	32.7%	30.2%	25.9%	30.8%	42.2%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	7.6	9.7	7.9	7.5	5.7	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	78.0%	74.4%	70.2%	52.0%	59.3%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	6.1%	6.1%	7.4%	22.5%	15.1%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	n/a	0.0%	0.0%	n/a	n/a	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	73.1%	79.7%	82.1%	90.3%	89.9%	84.2%
	↑ average # of treatment encounters per treatment episode	n/a	42.0	15.7	n/a	n/a	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	61.4%	69.5%	64.1%	64.6%	51.5%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	20.4%	11.5%	18.0%	10.4%	27.3%	26.4%