

Quarter 2 - 2022



MILWAUKEE COUNTY  
DEPARTMENT OF HEALTH  
& HUMAN SERVICES

**BEHAVIORAL  
HEALTH SERVICES**

**CARS Quarterly  
Report**

# CARS Quality Report Summary – Q2 2022

## POPULATION HEALTH

Among the key findings, our quality of life (QOL) data suggested that although our Black clients entered services with lower QOL relative to white clients (31.28% vs. 36.56.63%, respectively), their greater rate of improvement (64.71% relative to white clients (57.28%)) resulted in a greater proportion of Black clients experiencing “Good” or “Very Good” quality of life as of their last assessment.

We are continuing to focus our population health efforts on the high needs zip codes we identified in our prior report. The proportion of consumers in these five zip codes remains similar this quarter to what it has been over the past 7 quarters.

Finally, we hope to have a new assessment implemented by the end of 2022 that expands upon our existing, State-mandated data collection requirements (PPS) to include measures related to population health and social determinants of health. We believe this data will be invaluable to engage in better risk stratification, outcome measurement, and help us to more effectively meet the needs of our clients.

## CLIENT EXPERIENCE

We have moved forward with our focus group study to meet with providers and consumers of some of our contracted CBRFs. We first had a group call with the providers, and received a lot of encouraging feedback regarding what makes these programs run as smoothly as they do. The staff took a lot of pride in how they treat the consumers as individuals and in the priority they put in making the consumers feel like they are part of a family. We will be wrapping up meeting with the consumers this month, and are looking forward to hearing first hand what the participants are finding helpful within our CBRFs, along with identifying areas we can work on to improve their overall experiences.

Our CSP program has moved into full incentivization of their client experience scores, making it our fourth program to do so (with Crisis Case Management and 75.07-Residential withdrawal management service and 75.09-Residential intoxication monitoring service being the first three).

## COST OF CARE

We note a small increase (.029%) in the cost per client per month from the prior quarter. We are also currently focusing our efforts on analyzing the deployment of our TANF funds. In particular, we are looking to explore alternate or enhanced ways of meeting the TANF AODA population needs and finding different ways to spend the TANF dollars to address the social determinants of health (such as housing and IPS services).

## STAFF QUALITY OF LIFE

While our turnover rate is up this quarter from the prior quarter, we are still below the national average. We are also happy to note that there has been a fair amount of positive movement within CARS, with three employees accepting promotions within CARS over the last quarter. CARS staff also engaged in Part 1 of their DiSC assessment review as a team, in which we learned how our work styles and emotional intelligence could impact how we work with each other. Part 2 of this review will occur later this year.

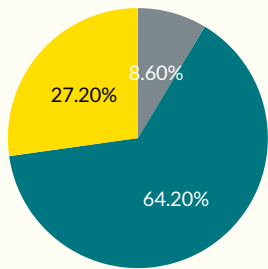
## NEXT STEPS

Future iterations of this Quarterly Report will include several changes, the first of which will be a transition to a new data visualization and analysis platform (PowerBI) that will allow for more efficient generation and manipulation of this report. It is our hope that we expand the use of this tool throughout BHS over the course of the next year. As noted above, please look for the implementation of our new PPS assessment module by the end of 2022.

# Demographic Information of the Population We Serve

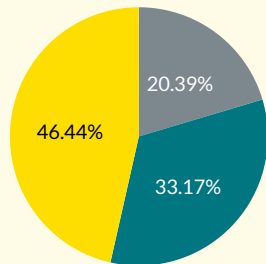
This section outlines demographics of the consumers CARS served last quarter compared to the County population.

### Race (Milwaukee County)\*



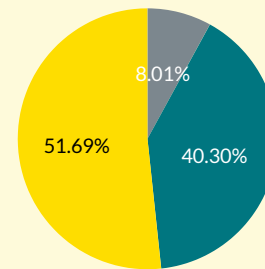
Other\*\* (8.6%) White (64.2%)  
Black (27.2%)

### Race of MKE County at or Below 100% Poverty Level



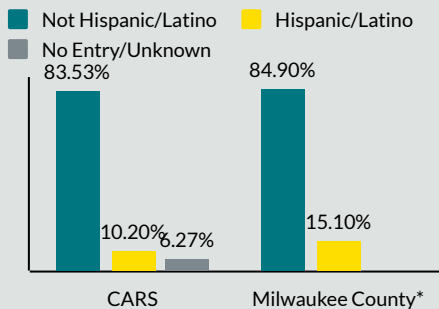
Other\*\* (20.39%) White (33.17%)  
Black (46.44%)

### Race (CARS)

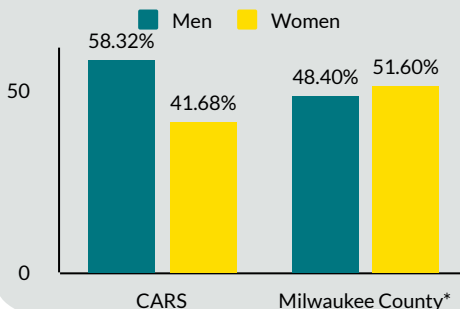


Other\*\* (8.01%) White (40.3%)  
Black (51.69%)

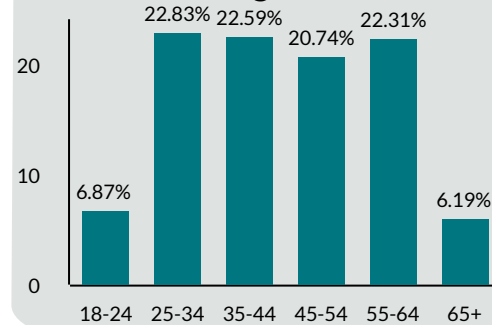
### Ethnicity



### Gender



### Age



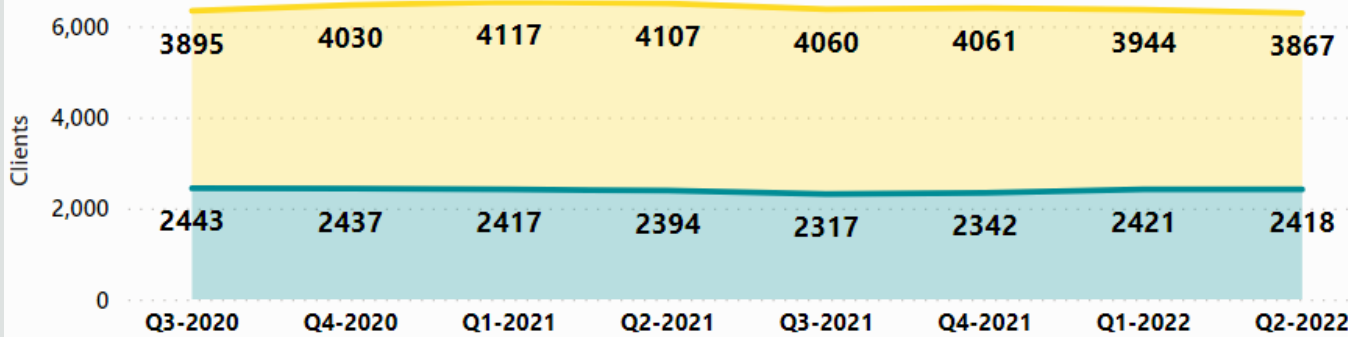
Note, there are instances where a person may have moved from one age category to another during the course of the quarter, resulting in them being double counted and the sum of the percentages adding up to slightly over 100%.

## CARS Focus on High Need Zip Codes

The Focused Zip Codes include 53215, 53205, 53206, 53204, 53233, 53209 and 53218. These zip codes were selected by CARS because of their significant social and economic needs, and because they have a significant portion of their population in the category of less than 200% of the poverty level. Identifying these high need areas is the first step in our efforts to target and concentrate our community outreach and investment initiatives.

### High Need

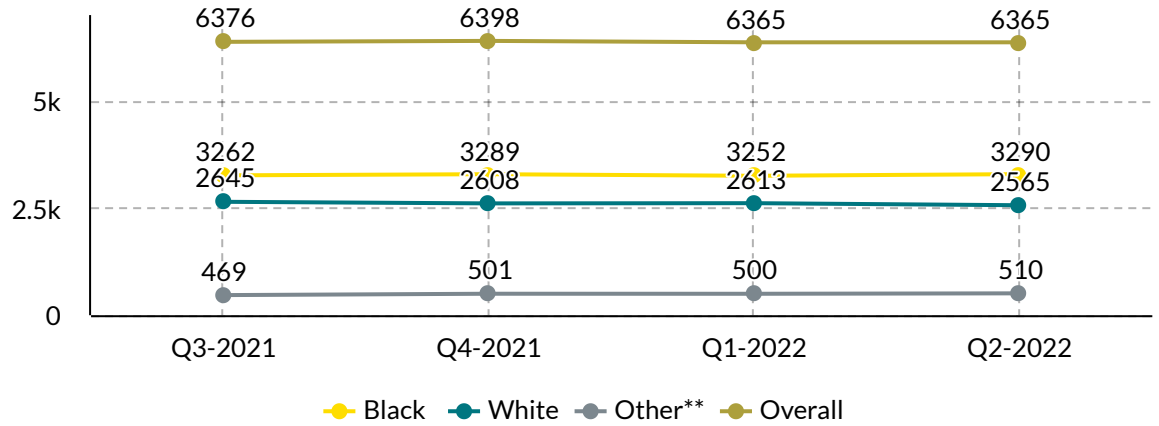
● Focused Zips ● Other Zips



\*Comparable data from United States Census Bureau, which can be found at: <https://www.census.gov/quickfacts/fact/table/milwaukeecountywisconsin/PST045217#qf-flag-Z>  
 \*\*\*"Other" encompasses small percentages of indicated racial identity including "Alaskan Native/American Indian", "Asian", "Biracial", "Native Hawaiian/Pacific Islander", and "Other"

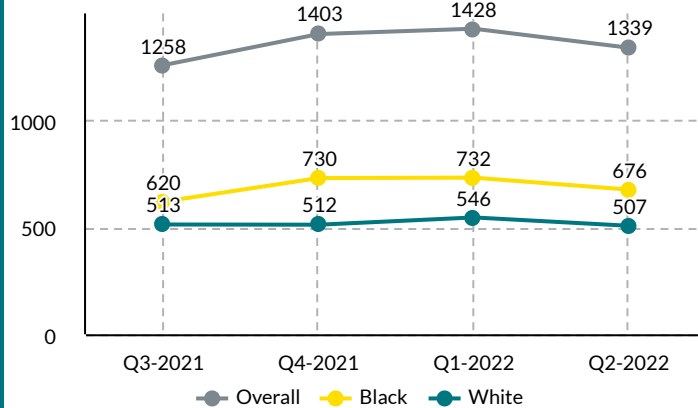
Volume Served

Volume Served by Race



Referrals

Referrals



Access to Service

**28.78%** **-12.55%**

Increase from previous quarter

Percentage\* of clients who began their enrollment at a CARS Access Point who received a CARS community service within the first 30 days (179/622)

\* Please note that not all clients who are assessed need or are eligible to receive CARS community services, therefore the expectation is not 100%. CARS R&E Team is working to develop access targets for future reports.

Time to First Service

Average Consumer Satisfaction Score (Range from 1-5)

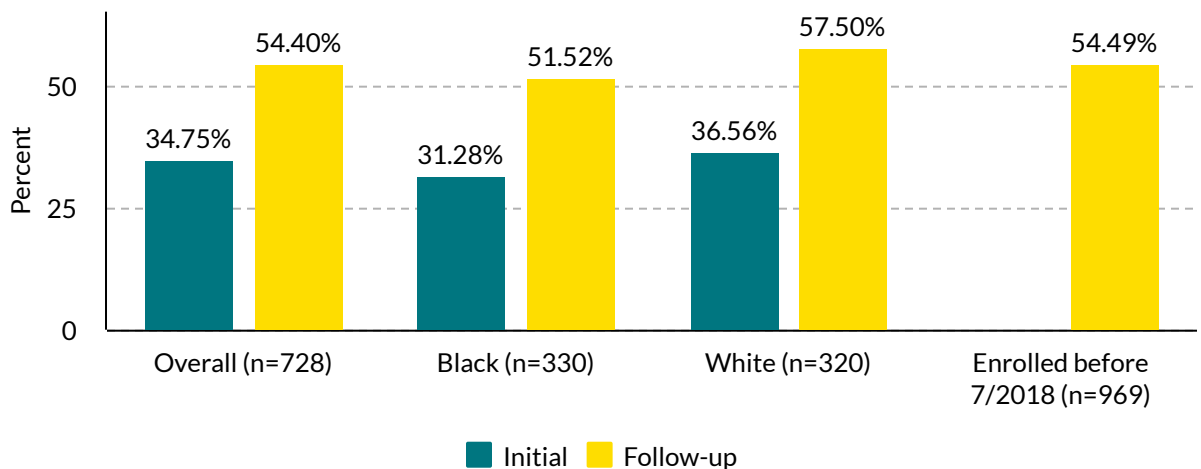
<b>4.45</b> average for all consumers (n=911)	<b>4.49</b> average for Black consumers (n=516)	<b>4.38</b> average for White consumers (n=252)	<b>4.44</b> average for "other" consumers (n=143)
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Population Health

Change Over Time - Client Enrollment

Percent of clients selecting "Good" or "Very Good" Quality of Life Overall and by Race

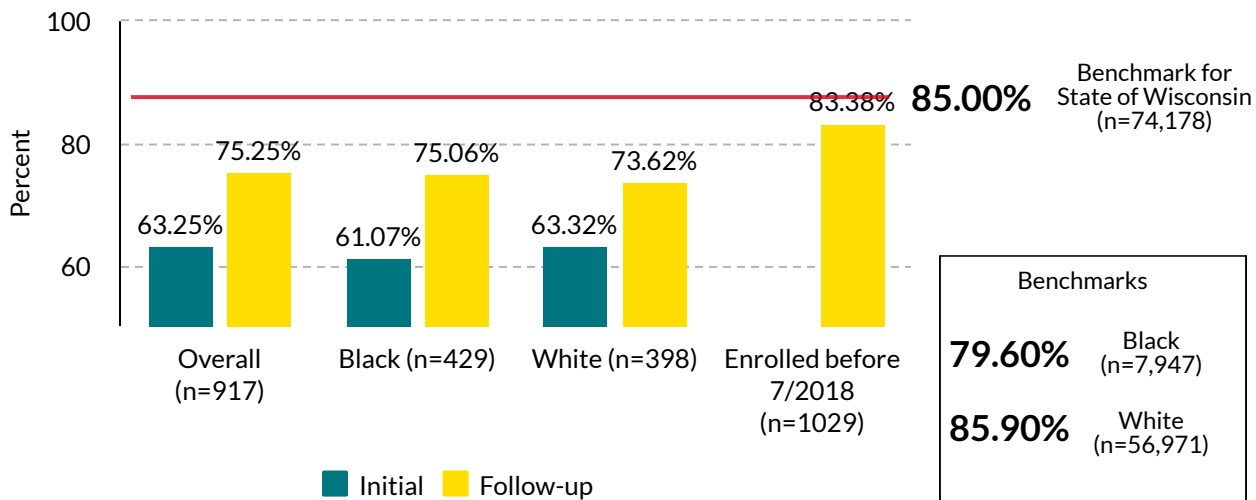
Average duration of enrollment: 522.85 days



# Domain: Population Health (cont.)

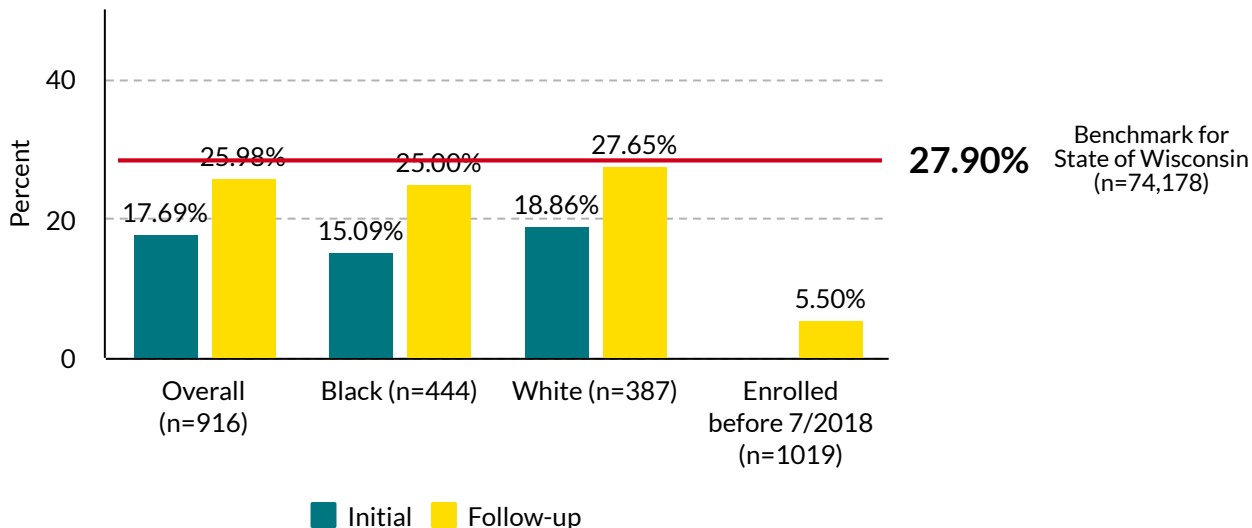
Percent with a Private Residence Overall and by Race

Average duration of enrollment: 503.73 days



Percent Employed Overall and by Race

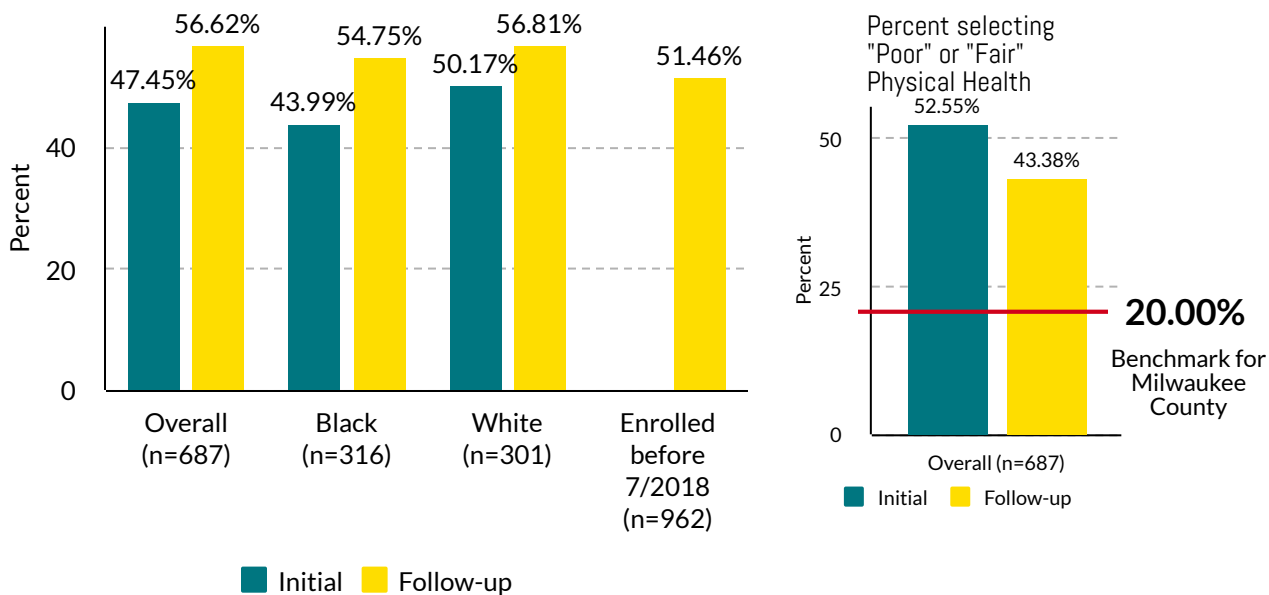
Average duration of enrollment: 487.49 days



Percent selecting "Good", "Very Good" or "Excellent" Physical Health Overall and by Race

Average duration of enrollment: 518.10 days

Percent selecting "Poor" or "Fair" Physical Health

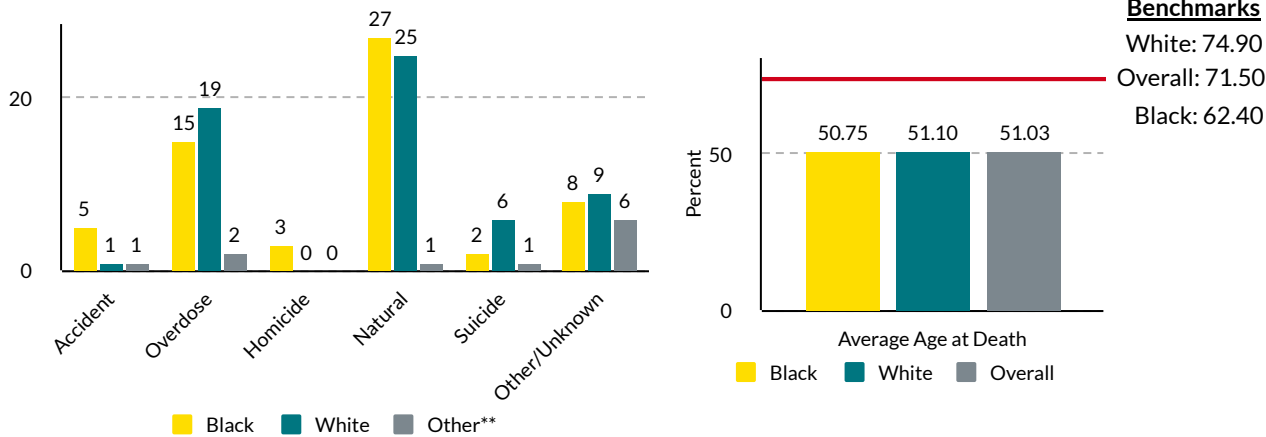


# Domain: Population Health (cont.)

## Cause of Death by Race

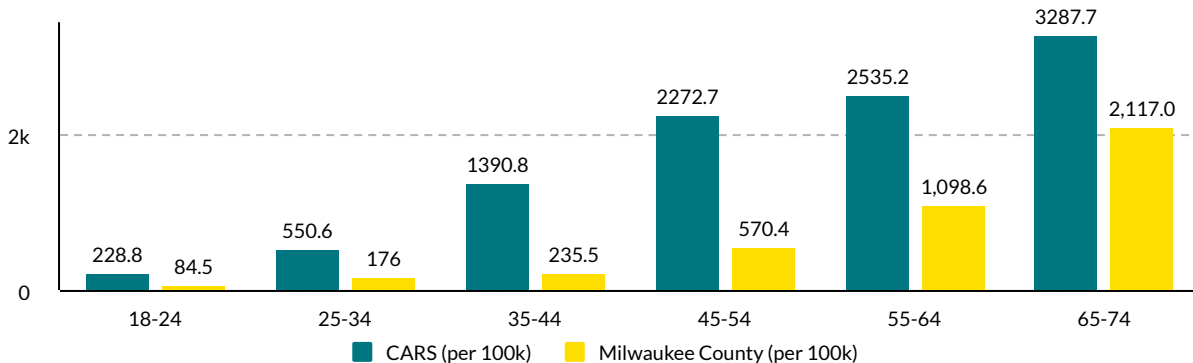
One quarter lag in reporting. For deaths between Q2-2021 and Q1-2022

## Average Age at Death



## Death Rate (per 100,000) by Age Range

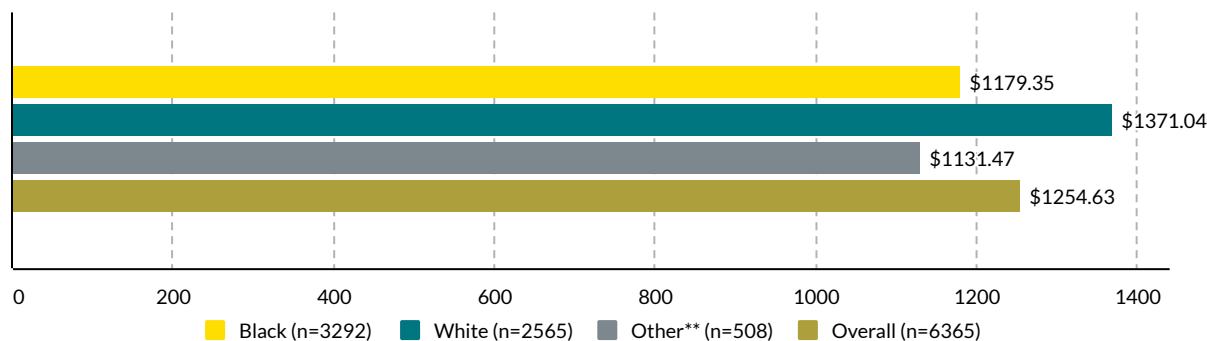
CARS number adjusted for comparison against Milwaukee County^



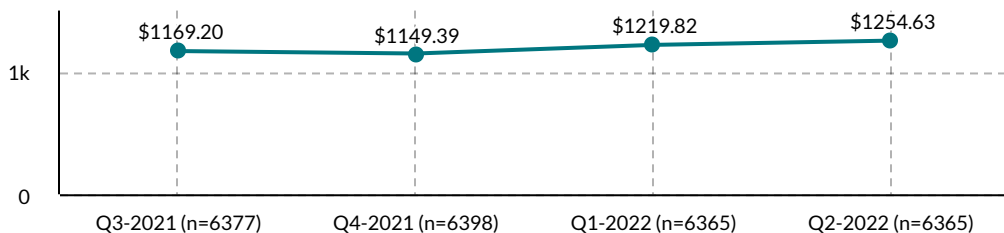
# Domain: Cost of Care

## Average Cost per Consumer per Month for Q1 by Race

"n" refers to an average of the number of unique consumers served per month for the quarter



## Average Cost per Consumer per Month by Quarter



# Domain: Staff Well-Being

## Turnover

**19.39%**

CARS turnover rate

## Staff Quality of Life

**20.00%**

Turnover rate for government employees (per year)^

It is a priority of CARS to ensure we are hiring a diverse talent pool with a focus on candidates that have a commitment to equity, diversity and inclusion. To achieve this, we are creating a bank of questions to be used in interviews to help identify candidates that best align with these goals and values.

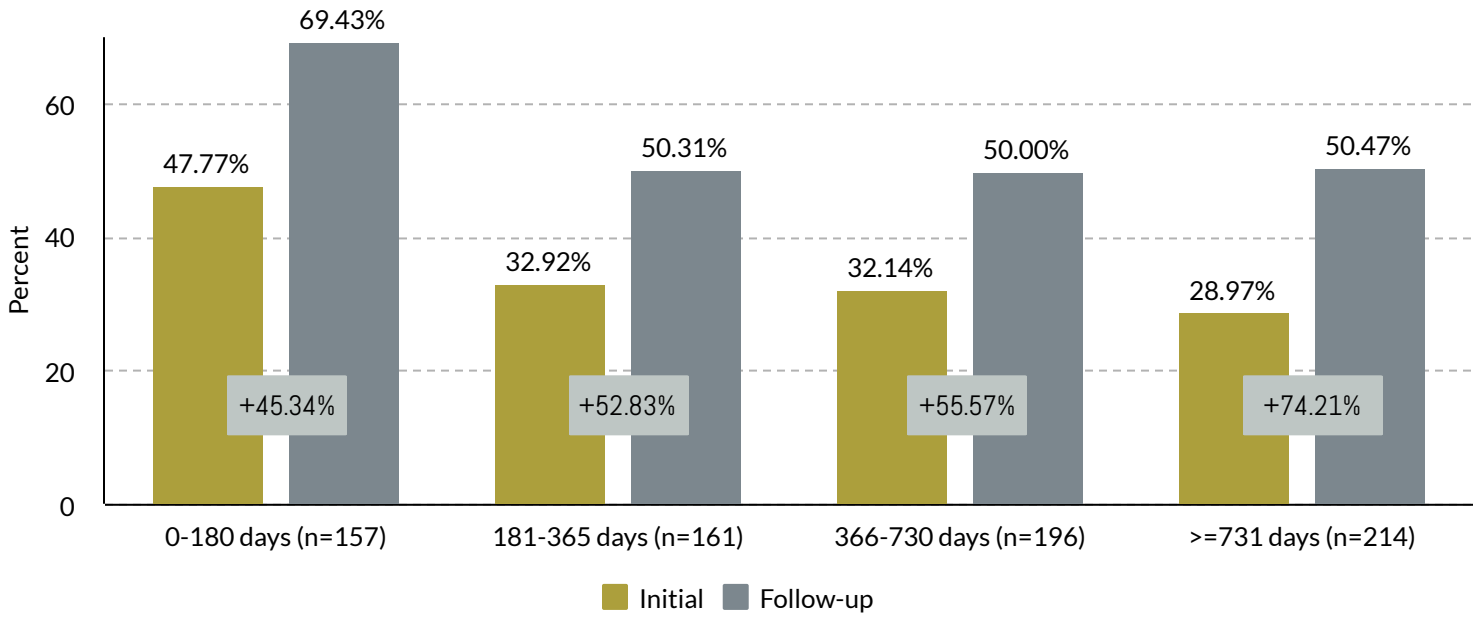
## Metric Definitions

Access to Services	This measure examines the number of clients who received their first service at a CARS Access Point and then received a CARS community service within 30 days, divided by the total clients who received their first service at a CARS Access Point.
Average Age at Death	<p>Death data is reported as an aggregate of the past four quarters, with a one-quarter lag. Average age at death for all causes of death.</p> <p>Benchmarks from 2019 Milwaukee County Mortality Data - Wisconsin Interactive Statistics on Health (WISH)</p>
Cause of Death	Death data is reported as an aggregate of the past four quarters, with a one-quarter lag. Causes reported by the Milwaukee County Examiner when available. For those without an examiner report, cause of death reported by CARS is used.
Change Over Time	Change over time, through client enrollment, looks at clients who had their initial PPS within 60 days of enrollment and their follow-up PPS during the observation quarter. Some metrics are broken down by cohorts, which are determined by length of enrollment between their initial PPS and their latest PPS during the observation quarter.
Client Experience	Implementation of the new, more succinct Client Experience has begun. The survey ranges from 4-10 questions, depending on the program, and all questions range from 1="strongly disagree" to 5="strongly agree". The survey is currently being utilized in all CARS programs with the exception of CCS, CBRF, Adult Family Home, and Medication Assisted Treatment (MAT).
Cost of Care	The average cost per consumer per month within each quarter for CARS services received by CARS consumers (not including inpatient and crisis). This is not separated out by funding stream or limited to those dollars spent by Milwaukee County on these services. The "n" is an average of the unique number of consumers served per month for the 3 months in the observation quarter.
Death Rate	<p>The CARS death rate has been adjusted to a rate per 100,000 to compare with Milwaukee County death data.</p> <p>^^Comparison death data from Wisconsin Interactive Statistics on Health (WISH) data query system, 2019 mortality data</p>
Employment	<p>Percent of current employment status of unique clients reported as "full or part time employment" or "supported competitive employment"</p> <p>^^Benchmark data from the SAMHSA Uniform Reporting System - Mental Health Community Services Block Grant 2020 State Summary Report</p>
Private Residence	<p>Percent of clients who reported their current living situation as a private residence.</p> <p>^^Benchmark data from the SAMHSA Uniform Reporting System - Mental Health Community Services Block Grant 2020 State Summary Report</p>
Quality of Life	This is a self-reported measure based on the question on the Comprehensive Assessment. Graphs shows the percentage of people that stated that their quality of life was "good" or "very good".
Referrals	Total number of referrals at community-based and internal Access Points per quarter.
Self-Rated Health	<p>This is a self-reported measure based on the question on the Comprehensive Assessment. The graph shows the percentage of people that said that their physical health was "good", "very good" or "excellent".</p> <p>Benchmark from County Health Rankings</p>
Turnover	<p>Turnover is calculated by looking at the total number of staff who have left over the previous four quarters, divided by the average number of employees per month, for the previous four quarters</p> <p>^^Source: Bureau of Labor Statistics (<a href="https://www.bls.gov/news.release/jolts.t16.htm">https://www.bls.gov/news.release/jolts.t16.htm</a>)</p>
Volume Served	Service volume has been consolidated into one category to avoid potential duplication of client counts due to involvement in both MH and AODA programs.

\*\*\*Other" encompasses small percentages of indicated racial identity including "Alaskan Native/American Indian", "Asian", "Biracial", "Native Hawaiian/Pacific Islander", and "Other"

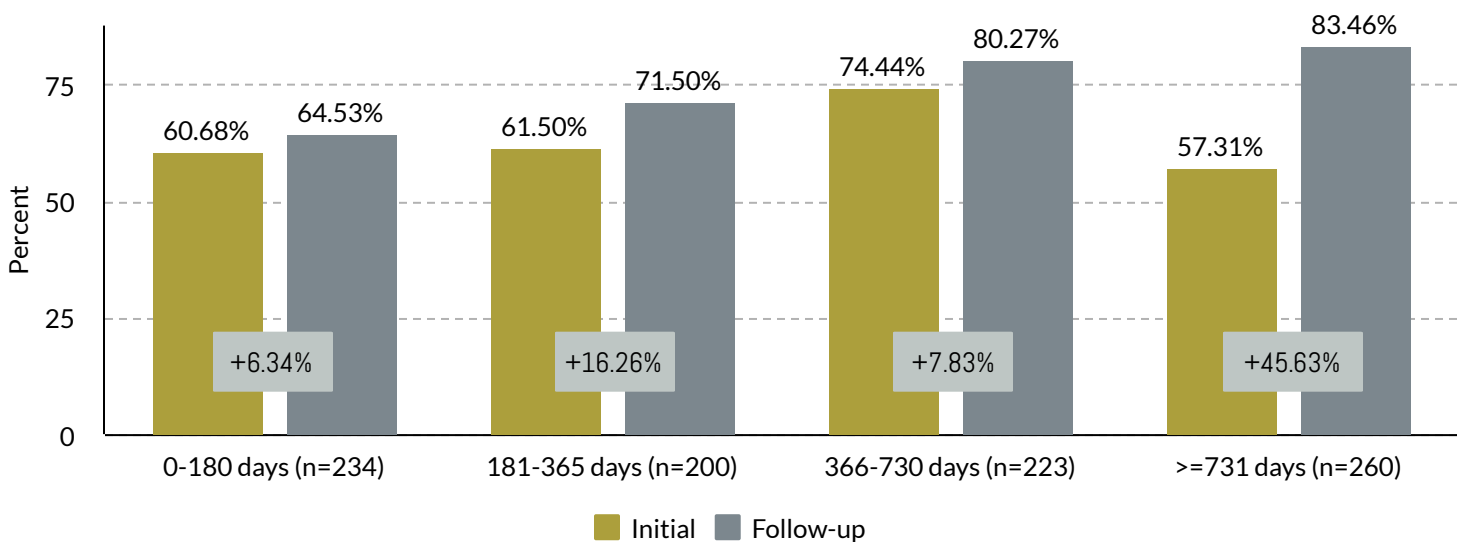
Percent of Clients selecting "Good" or "Very Good" Quality of Life by Length of Enrollment

The rates of improvement are relatively similar across the various cohorts with the exception of the longest term cohort experiencing the greatest levels of improvement.



Percent of Clients with a Private Residence

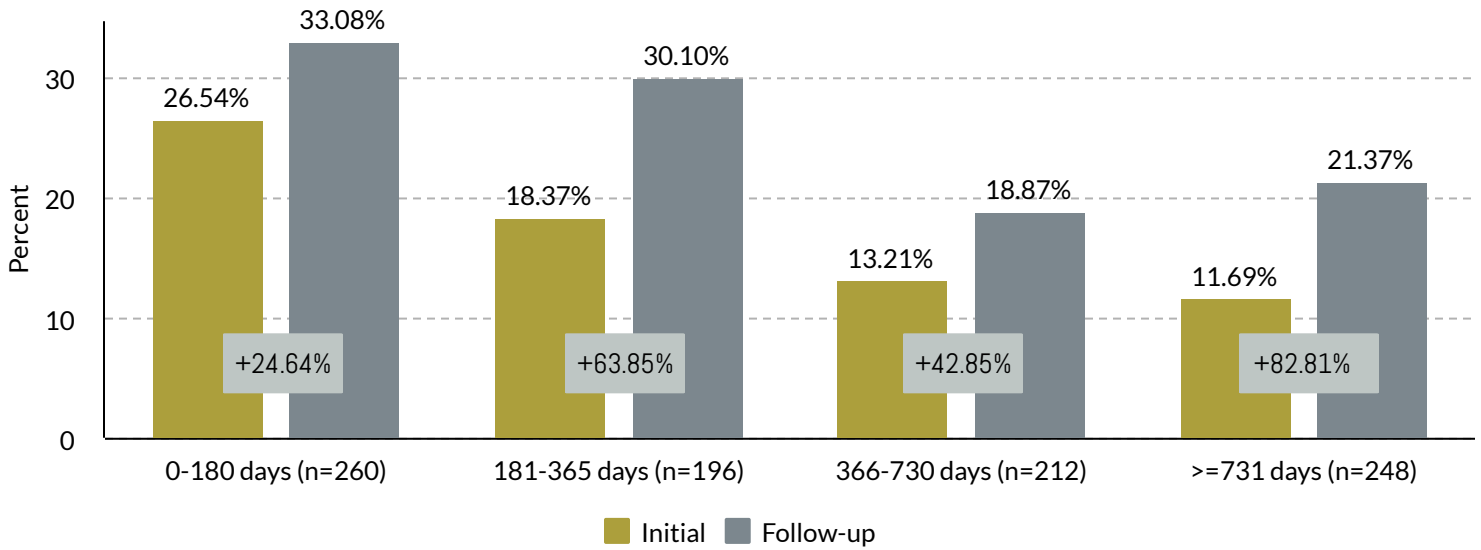
Consistent with previous reports, clients enrolled longer appear to have higher rates of private residence than clients enrolled for shorter lengths of time.





Percent of Clients Employed

Although the rates of change are higher in longer lengths of enrollment, this is likely due to a larger proportion of individuals in longer enrollment cohorts beginning their enrollments with lower rates of employment.



Percent of Clients selecting "Good", "Very Good" or "Excellent" Physical Health

This graph shows no clear trend in terms of rate of change between cohorts. Cohorts with longer enrollments did start with lower ratings of physical health, likely influencing their higher rates of change.

