DHHS Office of Substance Abuse and Mental Health Services



Consent Decree Performance and Quality Improvement Standards: February 2015

The attached compliance and performance standards are primarily for use in monitoring, evaluation and quality assurance of the areas covered by the Consent Decree pertaining to the community mental health system. The standards are intended to offer the parties and the court master a means of measuring system function and improvement over time and the Department's work towards compliance. If the percentage is within .5% of standard, the standard is considered met.

All standards utilizing RDS/enrollment data, inclusive of unmet need data, are reported one quarter behind (for example, reporting 3rd quarter data in the 4th quarter).

Reporting includes, where pertinent, discussion of the data and recommendations.

Standards no longer reported per amendment dated May 8, 2014, can be found at that following link. <u>http://www.maine.gov/dhhs/samhs/mentalhealth/consent_decree/amendments/Amendment%20to%20Plan%20</u> <u>16%20May%208,%202014.pdf</u>

Reports containing these standards may be obtained at any time by contacting SAMHS.

Definitions:

Standard Title:	What the standard is intending to measure.
Measure Method:	How the standard is being measured.
Standard has been me	The most recent data available for the Standard.
Performance Standard	: Standard set as a component of the Department's approved Adult Mental Health
	Services Plan dated October 13, 2006.
Compliance Standard:	Standard set as a component of the Department's approved standards for defining
	substantial compliance approved October 29, 2007.

Calendar and Fiscal Year Definitions:

CY: Calendar Year - January 1 - December 31. FY: Fiscal Year - State Fiscal Year July 1 - June 30.

Standard 1. Rights Dignity and Respect

Average of positive responses in the Adult Mental Health and Well Being Survey Quality and Appropriateness domain

Standard 2. Rights Dignity and Respect

No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 3. Rights Dignity and Respect

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 4. Rights Dignity and Respect

- 1. Deleted: Amendment request to delete approved 01/19/2011
- 1a. Deleted: Amendment request to delete approved 01/19/2011
- 1b. Deleted: Amendment request to delete approved 01/19/2011
- 2. Consumers given information about their rights

Standard 5. Timeliness of ISP and CI/CSS Assignment

- 1. Class members requesting a worker who were assigned one.
- 2. Hospitalized class members assigned a worker in 2 days.
- 3. Non-hospitalized class members assigned a worker in 3 days.
- 4. Class members not assigned on time, but within 1-7 extra days.
- 5. ISP completed within 30 days of service request.
- 6. 90 day ISP review completed within specified time frame
- 7. Initial ISPs not developed w/in 30 days, but within 60 days.
- 8. ISPs not reviewed within 90 days, but within 120 days.

Standard 7. CI/CSS/ Individualized Support Planning

- 1a. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 1b. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 1c. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 1d. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 8. CI/CSS Individualized Support Planning

- 1. ISP team reconvened after an unmet need was identified
- 2. ISPs reviewed with unmet needs with established interim plans.

Standard 9. ISP Service Agreements

ISPs that require Service Agreements that have current Service Agreements

Standard 10. Case Load Ratios

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 3. Intensive Community Integration Statewide Case Load Ratio deleted: ICI is no longer a service offered by MaineCare.
- 4. Intensive Case Management Statewide Case Load Ratio
- 5. OES Public Ward Case Management Case Load Ratio

Standard 11. CI/CSS Individualized Support Planning

No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 12. Housing & Residential Support Services

- 1. Class Members with ISPs, with unmet Residential Support Needs
- 2. Lack of Residential Support impedes Riverview discharge within 7 days of determination of readiness for discharge.
- 3. Lack of Residential Support impedes discharge within 30 days of determination.
- 4. Lack of Residential Support impedes discharge within 45 days of determination.

Standard 13. Housing & Residential Support Services

1. Average of positive responses in the Adult Mental Health and Well Being

- Survey Perception of Outcomes domain
- 2. Deleted: Amendment request to delete approved 01/19/2011

Standard 14. Housing & Residential Support Services

- 1. Class members with unmet housing resource needs.
- 2. Respondents who were homeless over 12 month period.
- 3. Deleted: Amendment request to delete approved 01/19/2011
- 4. Lack of housing impedes Riverview discharge within 7 days of determination of readiness for discharge
- 5. Lack of housing impedes Riverview discharge within 30 days of determination
- 6. Lack of housing impedes Riverview discharge within 45 days of determination

Standard 15. Housing & Residential Services

No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 16. Acute Inpatient Services (Class Member Involuntary Admissions)

Inpatient admissions reasonably near community residence.

Standard 17. Acute Inpatient Services (Class Member Involuntary Admissions)

No longer reported per amendment dated May 8, 2014. Report available upon request.
 No longer reported per amendment dated May 8, 2014. Report available upon request.
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 No longer reported per amendment dated May 8, 2014. Report available upon request.
 No longer reported per amendment dated May 8, 2014. Report available upon request.

5. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 18. Acute Inpatient Services (Class Member Involuntary Admissions)

- 1. Admissions for whom hospital obtained ISP
- 2. Treatment and Discharge plans consistent with ISP
- 3. CI/ICM/ACT worker participated in treatment and discharge planning

Standard 19. Crisis intervention Services

- 1. Face to face crisis contacts that result in hospitalizations.
- 2. Face to face crisis contacts resulting in follow up and/or referral to community services
- 3. Face to face crisis contacts using pre-developed crisis plan.
- 4. Face to face crisis contacts in which CI worker was notified of crisis.

Standard 20. Crisis Intervention Services

- 1. Deleted: Amendment request to delete approved 01/19/2011
- 2. Deleted: Amendment request to delete approved 01/19/2011

Standard 21. Treatment Services

- 1. Class Members with unmet mental health treatment needs.
- 2. Lack of MH Tx impedes Riverview discharge within 7 days of determination of readiness for discharge
- 3. Lack of MH Tx impedes Riverview discharge within 30 days of determination.
- 4. Lack of MH Tx impedes Riverview discharge within 45 days of determination
- 5. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 22. Treatment Services

1. Average of positive responses in the Adult Mental Health and Well Being Survey Perception of Access domain

2. Average of positive responses in the Adult Mental Health and Well Being survey General Satisfaction domain

Standard 23. Family Support Services

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 24. Family Support Services

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 3. Deleted: Family participants reporting satisfaction with respite services in the community NAMI closed its respite programs as of January 2010

Standard 25. Family Support Services

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 26. Vocational Employment Services

- 1. Class members with ISPs Unmet vocational/employment Needs.
- 2. Class Members in competitive employment in the community.
- 3. Consumers in supported or competitive employment in the community.

Standard 27. Vocational Employment Services

- 1. Deleted: Amendment request to delete approved 01/19/2011
- 2. Deleted: Amendment request to delete approved 01/19/2011

Standard 28. Transportation

Class Members with ISPs - Unmet transportation needs.

Standard 29. Transportation

- 1. Deleted: Amendment request to delete approved 01/19/2011
- 2. Deleted: Amendment request to delete approved 01/19/2011

Standard 30. Rec/Soc/Avocational/Spiritual Opportunities

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.

Standard 31. Rec/Soc/Avoc/Spirtual

- 1. ISP identified class member unmet needs in recreational/social/avocational/spiritual areas Social Connectedness domain
- 3. Deleted: Amendment request to delete approved 01/19/2011

Standard 32. Individual Outcomes

- 1. Consumers with improvement in LOCUS (Baseline to Follow-up)
- 2. Consumers who have maintained functioning (Baseline to Follow-up)
- 3. Consumers reporting positively on functional outcomes.

Standard 33. Recovery

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. Consumers reporting staff believed they could grow, change, recover
- 3. Consumers reporting staff supported their recovery efforts
- 4. Deleted: Consumers reporting that providers offered learning opportunities: questions eliminated with 2007 Adult Mental Health and Well Being Survey
- 5. Consumers reporting providers stressed natural supports/friendships
- 6. Consumers reporting providers offered peer recovery groups.

Standard 34. Public Education

- 1. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 2. No longer reported per amendment dated May 8, 2014. Report available upon request.

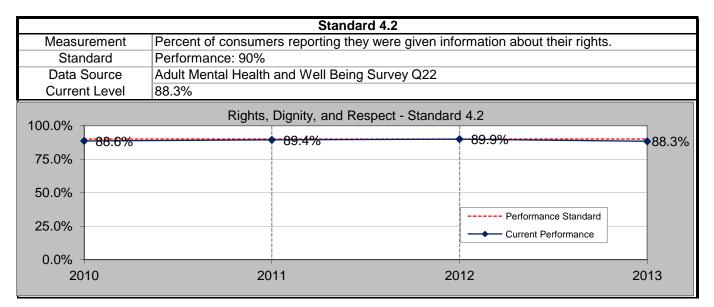
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Rights, Dignity, and Respect

Standard 1 - Treated with respect for their individuality

		Standard 1				
Measurement	Domain average of domain	Domain average of positive responses to the statements in the quality and appropriateness domain				
Standard	Performance: at or a	above 85%				
Data Source	Adult Mental Health	and Well Being Survey				
Current Level	82.6 %					
100.0%	Rights,	Dignity, and Respect - Standar	rd 1			
75.0% 81.6%		81.6%	84.0% 82.6%			
50.0%						
25.0%			Current Performance Performance Standard			
2010	20)11 2	2012 2013			

Standard 4 - Class Members are informed of their rights



Standard 5 - Prompt Assignment of CI/ACT Workers, ISP Timeframes/Attendees at ISP Meetings

		Standard 5.1			
Measurement	asurement Percentage of class members requesting a worker who were assigned one.				
Standard	Performance: 100%	6			
Data Source	APS Healthcare				
Current Level	100.0% (157 out of	157)			
100.0% + 100.0%	Timeliness of CSS Assignment - Standard 5.1				
100.0%		100.0%	98.4%	100.0%	
75.0%					
50.0%					
	 Current Performance 				
25.0% —	Performance Standard				
0.0%					
FY 14 Q2	FY 1	4 Q3 FY 1	4 Q4	FY 15 Q1	

	Star	ndard 5.2	
Measurement	Percentage of hospitalized clas	s members who were a assigned a work	ker within 2 working
WedSurement	days.		
Standard	Performance: 90%		
Standard	Compliance: 90% (3 out of 4 qu	uarters)	
Data Source	APS Healthcare		
Current Level	70.0% (14 out of 20)		
100.0%	Timeliness of CSS A	ssignment - Standard 5.2	
75.0%			70.0%
10.070 11.070		75.0%	•
50.0%	61.5%		
		Current Performance	e
25.0%		Compliance Standar	d
0.0%			u
FY14 Q2	FY14 Q3	FY14 Q4	FY15 Q1

	Standard 5.3
Measurement	Percent of non-hospitalized class members assigned a worker within 3 working days.
Standard	Performance: 90% Compliance: 90% (3 out of 4 quarters)
Data Source	APS Healthcare
Current Level	77.4% (106 out of 137)
100.0%	Timeliness of CSS Assignment - Standard 5.3
75.0% 77.4% 50.0%	79.0% 77.4%
25.0%	Current Performance Compliance Standard
FY14 Q2	FY14 Q3 FY14 Q4 FY15 Q1

	Standard 5.4
Measurement	Percent of class members in hospital or community not assigned on time but were
measurement	assigned within an additional 7 working days.
Standard	Performance: 100%
Otandard	Compliance: 95%
Data Source	APS Healthcare
Current Level	27.0% (10 out of 37)
	Timeliness of CSS Assignment - Standard 5.4
100.0%	
75.0% -	- Current Performance
	Compliance Standard
50.0%	27.0%
25.0% 30.4%	40.9% 39.0%
0.0%	
0.0% + FY14 Q2	FY14 Q3 FY14 Q4 FY15 Q1
111102	

Standards 5.1 -5.4 – Calculations are now based on days from Contact for Service Notification to date of assignment.

Starting with Fiscal Year 2015 Quarter 1, Standard 5.1 - 5.4 will now be calculated using CI, ACT, CRS and BHH data. Prior to this quarter, only CI was used in calculations for these standards.

	Standard 5.5					
Measurement	Class member ISPs of	completed within 30 days of s	ervice request			
Standard	Performance: 90%					
Stanuaru	Compliance: 90% (3 d	out of 4 quarters)				
Data Source	ISP RDS Data					
Current Level	86.9% (53 out of 61)					
100.0%	Timeliness of ISP - Standard 5.5					
75.0% 88.7%	8	1.0% 76	86.9%	6		
50.0%						
25.0%	Current Performance					
0.0%						
FY14 Q2	FY14 C	23 FY14	4 Q4 FY1	5 Q1		

	Standard 5.6						
Measu	rement	90 day class memb	per ISP reviews completed	within specified timeframe.			
Stan	dord	Performance: 90%	Performance: 90%				
Stari	uaru	Compliance: 90% ((3 out of 4 quarters)				
Data S	Source	ISP RDS Data					
Curren	t Level	66.1% (654 out of 9	990)				
100.0% ⊤		Т	imeliness of ISP - Standard	d 5.6	_		
75.0%							
50.0% -	69.3%		69.3%	62.4% 66.1	%		
25.0% -				Current Performance			
0.0%							
FY14	Q2	FY1	4 Q3	FY14 Q4 F	Y15 Q1		

		Standard 5.7				
Measurement	Initial class member IS	nitial class member ISPs not developed within 30 days, but were developed within 60 working				
Standard	Performance: 100%					
Data Source	ISP RDS Data					
Current Level	50.0% (4 out of 8)					
100.0%	Tin	neliness of ISP - Standard 5.7				
75.0%						
	-	62.5%				
50.0%			<u>_46.2%</u>	• 50.0%		
0 - 00/			Performance			
25.0%		Performa	nce Standard			
0.0%		L				
FY14 Q2	FY14	Q3 FY14	4 Q4	FY15 Q1		

		Standard 5.8		
Measurement	Class member ISPs that v	were not reviewed within 90 c	days but were reviewed within 12	20 working
Standard	Performance: 100%			
Data Source	ISP RDS Data			
Current Level	76.8% (258 out of 336)			
100.0%	Timeli	iness of ISP - Standard 5.8		_
75.0% 80.3%		Z.4%		◆ 76.8%
50.0%			44.3%	-
25.0%	Performance Standard			
	 Current Performance 		4 8 8	
	i		1	-
FY14 Q2	FY14 Q3	3 FY14	4 Q4 FY	15 Q1
25.0% 0.0% FY14 Q2		3 FY1	4 Q4 FY'	15 Q1

Discussion:

Standards 5.1 - 5.8: Field Quality Managers have completed additional agency trainings around assignment times. Assignment time performance measures are now included in Rider E of agency contracts. Data Quality Management Team will identify outliers for follow up by the treatment team and provider agencies driving these numbers. NIATx has also been deployed within seven agencies to collaberate around resolution to these issues.

Standard 8 - Services based on needs of class member rather than only available services

	Standard 8	.1			
Measurement	ISPs reviewed in which there is evidence that the ISP team reconvened after an unmet				
Measurement	need was identified.				
Standard	Performance: 90%				
Data Source	Class Member Treatment Planning Rev	view			
Current Level	50.0% (1 out of 2)				
100.0%	Individualized Support Plan	nning Standard 8.1			
100.0%					
75.0%	75.0%				
50.0%	13.078				
50.0%		50.0%	50.0%		
25.0%	Current Performance				
	Performance Standard				
0.0%					
FY14 Q3	FY14 Q4	FY15 Q1	FY15 Q2		

		St	andard 8.2				
Measuren	nent	ISPs reviewed with identified	unmet needs in whic	h interim plans are	established.		
Standa	rd	Performance: 95%	Performance: 95%				
Stanual	iu	Compliance: 90% (3 out of 4 of	quarters)				
Data Sou	urce	Class Member Treatment Pla	Inning Review				
Current L	evel.	50.0% (1 out of 2)					
100.0%		Individualized Su	upport Planning- Star	ndard 8.2			
75.0%	5.0%	75.0%		66.7%			
25.0%		Current Performance Compliance Standard			50.0%		
0.0%	23	FY14 Q4	FY1:	5 Q1	FY15 Q2		

Standard 9 - Services to be delivered by an agency funded or licensed by the state

	Stan	dard 9			
Measurement	ISPs with services identified and with a treatment plan signed by each provider.**				
Standard	Performance: 90%				
Stanuaru	Compliance: 90% (3 out of 4 qua	arters)			
Data Source	Class Member Treatment Planni	ng Review			
Current Level	53.3% (8 out of 15)				
	ISP Service Agree	ements - Standard 9			
100.0%					
75.0%		80.0%			
50.0% 57.7%			53.3%		
25.0%	36.0%	Current Performance			
201070		Compliance Standard			
0.0%					
FY14 Q3	FY14 Q4	FY15 Q1	FY15 Q2		
-					

Discussion:

Standards 8.1, 8.2 and 9 - Field Quality Managers continue to perform document reviews and work with the agencies around unmet needs and service agreements.

Standard 10.4 - ICM			
Measurement	Intensive Case Managers with average caseloads of 16 or fewer.		
Standard	Compliance: 90% of all ICM Workers with Class Member caseloads		
	ICMs focus on outreach with individuals in forensic facilities. ICMs no longer carry traditional caseloads. In the future, if ICMs carry caseloads, OAMHS will resume reporting		
	caseload ratios.		

		Standard 10.5 - OADS		
Measurement Office of Aging ar		Disability Services Case Manag	gers with average caseload of 40 or	
	fewer.			
Standard	Compliance: 90% of	f all OADS Case Managers with	Class Member Public Wards	
Data Source	MAPSIS Case Cour	nts for Workers with Class Mem	bers Public Wards	
Current Level	100% (26 out of 26)			
100.0% -	Ca	ase Load Ratio - Standard 10.5		
100.0 %			100.0%	
75.0%			10010 //	
		72.0%	74.1%	
50.0%				
25.0%	 Current Performance 			
0.0%	Compliance Standard			
FY14 Q3	FY14	4 Q4 FY1	I5 Q1 FY15 Q2	

Discussion:

Standard 10.5 - Per amendment dated December 10, 2014 average case load was changed from 25 to 40. Amendment can be found here:

http://www.maine.gov/dhhs/samhs/mentalhealth/consent_decree/amend_rule/Order%20amending%20para%202 7%20and%20257%20%20Dec%2010%202014.pdf

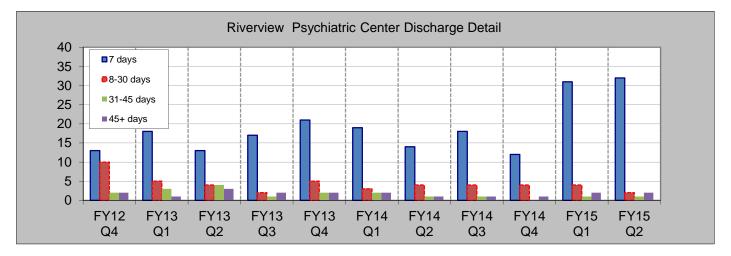
Standard 12 - Residential Support services adequate to meet ISP needs of those ready for discharge

			Standard 12.1		
Measurem	nent	Class members	in community with ISPs wit	h unmet residential support	needs.
Standar	ď	Compliance: 5%	or fewer (3 out of 4 quarte	rs)	
Data Sou	rce	ISP RDS Data			
Current Le	evel	3.0% (35 out of	1169)		
Housing and Residential Support Services - Standard 12.1					
100.0%					
75.0%				Current Performance	_
				Compliance Standard	
50.0%					
25.0%	0/		2.5%		3.0%
	70		2.3%	2.9%	3.0 /
0.0%					
FY14 Q2		FY14	4 Q3 F	Y14 Q4	FY15 Q1

Standard 12.2						
		U U U	atients at Riverview det		•	•
Measurem	ent	discharged within	n 7 days of that determ	ination.	(discharge is not im	peded due to
	lack of residential support services)					
Standard	h	Performance: 75	% (within 7 days of tha	it deterr	mination)	
Otaridare	u	Compliance: 70%	% (within 7 days of that	determ	ination)	
Data Sour	ce		iatric Center Discharge			
Current Le	امريدا	100.0% FY15 Q2	2 (Lack of residential s	upports	s did not impede disc	charge for any
		patients within 7	days)			
100.0%		Housing and F	Residential Support Se	rvices -	Standard 12.2	
	70/		100.0%		100.0%	100.0%
75.0% 91.7	1%	I	 		 	
		1				
50.0%		- Current Performance	<u></u>			
	- •				1	
25.0%		- Compliance Standard			 	
0.00/						
0.0%			101		F 04	
FY14 Q3		FY14	4 Q4	FY1	5 Q1	FY15 Q2

	Standard 12.3					
	Percentage of patients at Riverview determined to be ready for discharge who are					
Measurement discharged within 30 days of that determination. (discharge is not imp				npeded due to lack of		
		residential support services)				
Stan	dard	Performance: 96% (within 30		,		
Otar		Compliance: 80% (within 30 c	•	ation)		
Data S	Source	Riverview Psychiatric Center	v			
Curren	nt Level	100.0% FY15 Q2 (Lack of re	sidential supports dic	l not impede discl	harge for any patients	
Carron		within 30 days)				
		Housing and Residential	Support Services - S	Standard 12.3		
100.0%	95.8%	100.0%				
75.0% -	95.0%			100.070		
10.070						
50.0% -		Current Performance		 		
05.00/	Compliance Standard					
25.0% -	j.0% +					
0.0% -						
FY14	4 Q3	FY14 Q4	FY1	5 Q1	FY15 Q2	

	Standard 12	2.4			
Measurement	Percentage of patients at Riverview determined to be ready for discharge who are discharged within 45 days of that determination. (discharge is not impeded due to lack of residential support services)				
Standard	Perfomance: 100% (within 45 days of that determination) Compliance: 90% (within 45 days of that determination with certain clients excepted by agreement of the parties and the Court Master)				
Data Source	Riverview Psychiatric Center Discharge	Data			
Current Level	100.0% FY15 Q2 (Lack of residential supports did not impede discharge any patients within 45 days)				
100.0%	Housing and Residential Support S	Services - Standard 12.4			
-100.0%-	1-00.0%				
75.0%					
50.0%	Current Performance				
25.0%	Compliance Standard				
0.0%					
FY14 Q3	FY14 Q4	FY15 Q1	FY15 Q2		



Riverview Psychiatric Center Discharge Detail to amplify data presented in Standards 12.2, 12.3, 12.4:

37 Civil Patients discharged in quarter

- 32 discharged at 7 days (86.5%)
- 2 discharged 8-30 days (5.4%)
- 1 discharged 31-45 days (2.7%)
- 4 discharged post 45 days (10.8%)

Residential Supports did not impede discharge for any patients post clinical readiness for discharge.

		Standard 13.1				
Measurement	Domain average of pos	Domain average of positive responses to the questions in the Perception of Outcomes domain				
Standard	Performance: at or abo	ove 70%				
Data Source	Adult Mental Health an	d Well Being Survey				
Current Level	66.7%					
100.0% 75.0% 50.0% 25.0%		tion of Outcomes - Standard 13. 61.8% 63.9%	66.	7%		
2010	201	11 20	012 2013	3		

Standard 14 - Demonstrate an array of housing alternatives available to meet class member needs.

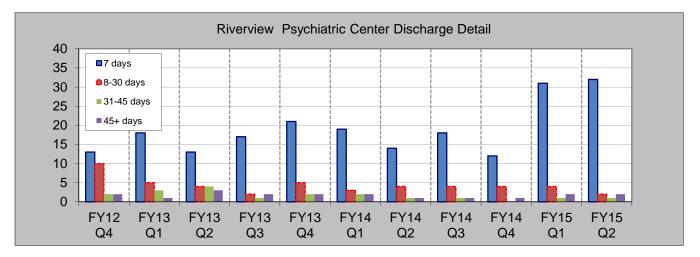
Standard 14.1				
Measurement	Class members with ISPs with unmet housin	g needs.		
Standard	Compliance: 10% or fewer (3 out of 4 quarter	rs)		
Data Source	ISP RDS Data			
Current Level	7.8% (91 out of 1169)			
100.0% -	Housing and Residential Support Service	es - Standard 14.1		
75.0%		Current Performance		
50.0%				
25.0% 7.1%	8.0%	7.8% 8.5%		
0.0%				
FY14 Q2	FY14 Q3	FY14 Q4 FY15 Q1		

	Standard 14.2				
Measurement	Percentage of respondents who experienced homelessness over 12-month period.				
Standard	Performance: 6% or fewer				
Data Source	Adult Mental Health and Well Being Survey, living situation data				
Current Level	4.8%				
100.0% -	Housing and Residential Support Services - Standard 14.2				
75.0%	Current Performance Performance Standard				
50.0%					
25.0%	5.6% 5.9%				
0.0% ◆ 0.7% 2010	4.8% 2011 2012 2013				

	Standard	14.4			
	Percentage of patients at Riverview determined to be ready for discharge who are				
Measurement					
	housing alternatives)				
Standard	Performance: 75% (within 7 days of the	,			
	Compliance: 70% (within 7 days of the	,			
Data Source	Riverview Psychiatric Center Discharg				
Current Level	82.1% FY15 Q2 (Lack of housing alte	rnatives did not impede discharg	ge for 32 out of 37		
	patients within 7 days)				
400.000	Housing and Residential Support	t Services - Standard 14.4			
100.0%					
75.0% 87.5%	82.4%	0.4.00/	•		
70.070		81-6%	82.1%		
50.0% -					
25.0%					
	Compliance Standard				
0.0%					
FY14 Q3	FY14 Q4	FY15 Q1	FY15 Q2		

	Standard	14.5			
	Percentage of patients at Riverview determined to be ready for discharge who are				
Measurement	discharged within 30 days of that dete	ermination. (discharge not imped	ed due to lack of		
housing alternatives)					
Standard	Performance: 96% (within 30 days of	,			
	Compliance: 80% (within 30 days of t	,			
Data Source	Riverview Psychiatric Center Dischar	•			
Current Level	89.7% FY15 Q2 (Lack of housing alternatives did not impede discharge for 35 out of 37				
	patients within 30 days)				
400.00/	Housing and Residential Suppo	ort Services - Standard 14.5			
100.0%	• • • • • • •	•			
75.0%	94.1%		89.7%		
75.070		92.1%	00.770		
50.0%					
	Current Performance				
25.0%	Compliance Standard				
0.00/	i				
0.0%	FY14 04				
FY14 Q3	FY14 Q4	FY15 Q1	FY15 Q2		

	Standard 14.6					
Percentage of			ents at Riverview determined to be ready for discharge who are			
Measu	rement	U U U	5 days of that determination. (discharge not impeded d	ue to lack of	
		housing alternatives	,			
01	11		(within 45 days of that detern			
Stan	dard		within 45 days of that determin	ation with certain clients	excepted by	
Data 6	Course	v 1	arties and the Court Master)			
Dala	Source		ic Center Discharge Data	Loot impodo diophorao fe	or 25 out of 29	
Curren	nt Level	patients within 45 da	ack of housing alternatives dic	i not impede discharge it	01 33 OUL 01 36	
1			* /	o		
100.0% ¬		Housing and Re	esidential Support Services -	Standard 14.6		
	91.7%		94.1%	94.7%	89.7%	
75.0% -	31.770				09.7 /0	
50.00/						
50.0% -						
25.0% -	25.0%					
20.070						
0.0% -	0.0%					
FY14	4 Q3	FY14	4 Q4 FY	′15 Q1	FY15 Q2	



37 Civil Patients discharged in quarter

32 discharged at 7 days (86.5%)

2 discharged 8-30 days (5.4%)

1 discharged 31-45 days (2.7%)

4 discharged post 45 days (10.8%)

Housing Alternatives impeded discharge for 7 patients (44.7%)

2 patients discharged within 8-30 days post clinical readiness for discharge

1 patient discharged 31- 45 days post clinical readiness for discharge

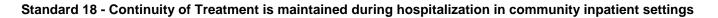
4 patient discharged greater than 45 days post clinical readiness for discharge

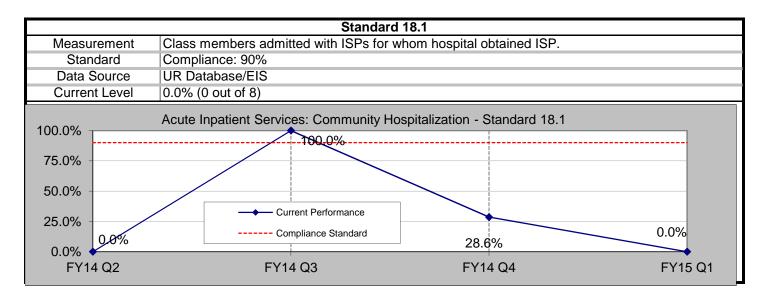
Community Resources and Treatment Services Acute Inpatient Services: Involuntary Community Hospitalization

Standard 16 - Psychiatric Hospitalization reasonably near an individual's local community

Standard 16					
Measureme	nt Class Member admiss residence.	sions determined to be	e reasonably near an individual's lo	cal community of	
Standard	Compliance: 90% (3 o	out of 4 quarters)			
Data Sourc	e UR Database/EIS				
Current Lev	el 77.8% (14 out of 18)				
100.0% 75.0% 76.9	·	84.6%	bitalization - Standard 16	77.8%	
50.0%		 		11.070	
25.0%			Current Performance		
0.0% + FY14 Q2	FY14	4 Q3	FY14 Q4	FY15 Q1	

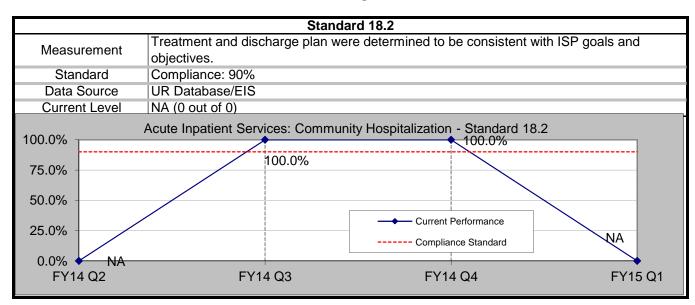
Reasonably Near is defined by Attachment C to the October 29, 2007 approved Compliance Standards.





Community Resources and Treatment Services Acute Inpatient Services: Involuntary Community Hospitalization

Standard 18 - Continuity of Treatment is maintained during hospitalization in community inpatient settings



	Standard 18.3					
Measurement CI/ICI/ICM/ACT worker participated in hospital treatment and discharge planning.						
Standard	Compliance: 90%					
Data Source	UR Database/EIS					
Current Level	100.0% (8 out of 8)					
100.0% 🔶	Acute Inpatient Services: Community Hospitalization - Standard 18.3					
75.0%	100.0% 100.0% 100.0%					
50.0%						
25.0%	Current Performance Compliance Standard					
0.0% + FY14 Q2	FY14 Q3 FY14 Q4 FY15 Q1					

Community Resources and Treatment Services Crisis Intervention Services

Standard 19 - Crisis services are effective and meet Settlement Agreement Standards

	Standard 19.1					
Meas	Measurement Face to face crisis contacts that result in hospitalizations.					
Standard Performance: No more than 20 - 25% are hospitalized as result of crisis intervention.						tervention.
Data	a Source	Quarterly Crisis Co	ontract Performance Data	a		
Curre	ent Level	25.6% (1004 out o	f 3921)			
50.0% ¬		Crisis Ir	ntervention Standards - S	Standar	d 19.1	
50.076 -						
	23.8%		26.1%		24.5%	25.6%
					Current Performance	
0.0%						
FY14					FY15 Q2	

	Standard 19.2					
Measurement	Face to face crisis c	Face to face crisis contacts that result in follow-up and/or referral to community based				
weasurement	services.					
Standard	To Be Established					
Data Source	Quarterly Crisis Con	tract Performance Data				
Current Level	51.2 % (2006 out of	3921)				
	Crisis Int	ervention Standards - Standard	192			
100.0%	011010 111	orverhein etandarde etandare	. 10.2			
75.0%						
50.0%		51.9%	53.5%	51.2%		
53.2%				51.2%		
25.0% — Current Performance						
0.0%						
FY14 Q3	FY14	Q4 FY1	5 Q1	FY15 Q2		

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Community Resources and Treatment Services Crisis Intervention Services

	Standard 19.3					
Measu	Measurement Face to face crisis of used.		contacts in which a previous	ly developed cri	sis plan was available and	
Star	ndard	To Be Established				
Data S	Source	Quarterly Crisis Co	ntract Performance Data			
Currer	nt Level	2.8% (110 out of 39	21)			
100.0% - 75.0% - 50.0% -	C	Crisis In	tervention Standards - Stan	dard 19.3		
25.0% -	2.3%		2.6%	2.0%	2.8%	
	0.0% F Y14 Q3 FY1		4 Q4	FY15 Q1	FY15 Q2	

		Standa	rd 19.4		
Measu	urement	Face to face crisis contacts in whi the crisis.	ch client has a Cl	worker and work	er was notified about
Star	ndard	Compliance: 90% (3 out of 4 quar	ters)		
Data	Source	Quarterly Crisis Contract Performa	ance Data		
Currer	nt Level	92.5% (984 out of 1064)			
100.0% -		Crisis Intervention Star	ndards - Standard		
75.0%	81.1%	85.4%		95.8%	92.5%
50.0% -					
25.0% - 0.0% -		Current Performance Compliance Standard			
0.0% FY14	4 Q3	FY14 Q4	FY1	5 Q1	FY15 Q2

Discussion:

Standard 19.4: The department recently modified the reporting tool and process for capturing this data and is currently working with providers to collect more accurate data. Continue to monitor.

Community Resources and Treatment Services Treatment Services

Standard 21 - An array of mental health treatment services are available and sufficient to meet ISP needs of class members and the needs of hospitalized class members ready for discharge.

Standard 21.1					
Measurement Class members with ISPs with unmet mental health treatment needs					
Standard	Standard Compliance: 5% or fewer (3 out of 4 quarters)				
Data Source	ISP RDS Data	· · ·			
Current Level	6.8% (79 out of 1169)				
100.0% -	Treatment Services - Standard 21.1				
1	- Current Performance				
75.0%	Compliance Standard				
50.0%					
25.0% 6.4%	7.0%	8.9%	6.8%		
0.0%					
FY14 Q2	FY14 Q3	FY14 Q4	FY15 Q1		

	Standard 21.2					
measurement	U	Percentage of patients at Riverview determined to be ready for discharge who are discharged				
	within 7 days of that def					
Standard		hin 7 days of that determination)				
	Compliance: 70% (with	nin 7 days of that determination)				
Data Source	Riverview Psychiatric C	Center Discharge Data				
Current Loval	100.0% FY15 Q2 (Lack	100.0% FY15 Q2 (Lack of mental health treatment did not impede discharge for any patients				
Current Level	within 7 days)					
402.0%	Trea	atment Services - Standard 21.2				
100.0%		100.0%	100.0% 100.0%			
75.0%	<u> </u>					
50.00/						
50.0%						
25.0%	Current Performance					
	Compliance Standard	i				
0.0%						
FY14 Q3	FY14	Q4 FY1	5 Q1 FY15 Q2			

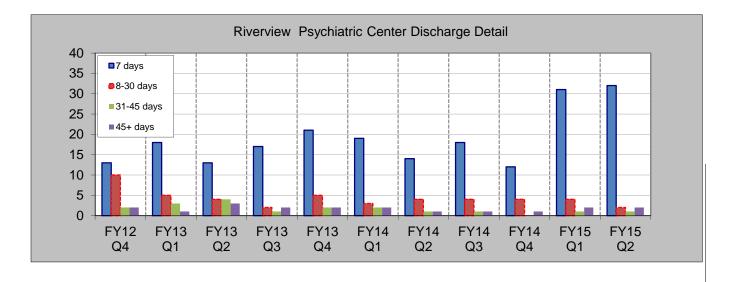
DHHS Office of Substance Abuse and Mental Health Services

Community Resources and Treatment Services Treatment Services

	Standard 21.3					
Measurement	Percentage of patients at Riverview determined to be ready for discharge who are					
Measurement		0 days of that determination				
Standard		(within 30 days of that dete				
		within 30 days of that deter	rmination)			
Data Source		ic Center Discharge Data				
Current Level	,	ack of mental health treat	ment did not imped	e discharge for any		
	patients within 30 d	ays)				
	Tre	atment Services - Standar	d 21.3			
100.0%		100.0%	100.0%	100.0%		
75.0%		100.070	100.078			
75.070						
50.0%		 				
	 Current Performance 					
25.0% Compliance Standard						
0.00/						
0.0% + FY14 Q3	FY14	1 01	FY15 Q1	FY15 Q2		
FT14 Q3	ET14	+ Q4	FTIDQI	FT15Q2		

	Standard 21.4					
Measurement	Percentage of patients at Riverview determined to be ready for discharge who are					
modouromont	discharged within 45 days of that dete					
	Performance: 100% (within 45 days of	that determination)				
Standard	Compliance: 90% (within 45 days of the	at determination with certain	clients excepted by			
	agreement of the parties and the Court	,				
Data Source	Riverview Psychiatric Center Discharg					
Current Level	100.0% FY15 Q2 (Lack of mental health treatment did not impede discharge for any					
	patients within 45 days)					
	Treatment Services -	Standard 21.4				
100.0%	•	+				
	100.0%	100.0%	100.0%			
75.0%						
50.0%						
50.0%						
25.0%	Current Performance					
Compliance Standard						
0.0%						
FY14 Q3	FY14 Q4	FY15 Q1	FY15 Q2			

Community Resources and Treatment Services Treatment Services



Riverview Psychiatric Center Discharge Detail to amplify data presented in Standards 21.2,21.3,21.4

37 Civil Patients discharged in quarter

32 discharged at 7 days (86.5%) 2 discharged 8-30 days (5.4%)

1 discharged 31-45 days (2.7%)

4 discharged post 45 days (10.8%)

Treatment services did not impede discharge for any patient post clinical readiness for discharge.

Community Resources and Treatment Services Treatment Services

Standard 22 - Class members satisfied with access and quality of MH treatment services received.

Standard 22.1						
Measurement Domain average of p			positive responses in the Perception of access domain			
Standard Performance: At or a Compliance: OAMHS			above 85% IS conducts review, takes action if results fall below defined levels.			
Data So	ource	Adult Mental Health	and Well Being	Survey		
Current	Level	77.1%				
100.0%		Tre	atment Services -	Standard 22.1		
75.0% • 50.0% •	77.6%		77.0%	77.8%		77.1%
25.0%		Current Performance Compliance Standard				
2010	C	20	D ¹¹	20	12	2013

		Standard 22.2			
Measurement	Measurement Domain average of positive responses in the General Satisfaction domain				
Standard	Performance: at or a	bove 85%			
Data Source	Adult Mental Health	and Well Being Survey			
Current Level	82.5%				
100.0%	Trea	tment Services - Standard 22.2			
75.0% 81.8%		82.9% 84.4%	6 82.5%		
50.0%					
25.0%	 Current Performance Performance Standard 				
0.0%	20	11 2	012 2013		

Community Resources and Treatment Services Vocational Employment Services

Standard 26 - Reasonable efforts to provide array of vocational opportunities to meet ISP needs.

Standard 26.1					
Measurement	Measurement Class members with ISP identified unmet vocational/employment support needs.				
Standard	Performance: 10% or f	fewer			
Data Source	ISP RDS Data				
Current Level	3.1% (36 out of 1169)				
100.0% -	Vocational Employment Services - Standard 26.1				
75.0% -	Current Performance				
50.0%					
25.0% <u>2.7%</u>		2.8%	3.1%	3.1%	
0.0% + FY14 Q2	FY14	4 Q3 FY1	4 Q4	FY15 Q1	

Standard 26.2					
Measurement	Class members younger than age 62 in competitive employment in the community.				
Standard	Standard Performance: 15% of class members employed in competitive employment.				
Stanuaru	Compliance: 13% or Baseline (10.8%).				
Data Source	ISP RDS Data				
Current Level	6.0% (59 out of 989)				
100.0% -	Vocational Employment Services - Standard 26.2				
75.0%	Current Performance				
50.0%					
25.0% 4.9%	5.3%	5.3%	6.0%		
0.0%	•	•	↑		
FY14 Q2	FY14 Q3	FY14 Q4	FY15 Q1		

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Community Resources and Treatment Services Vocational Employment Services

Standard 26.3				
Measurement	Consumers under age 62 in supported and competitive employment (part or full time)			
	Performance: 15% in either competitive or supported employment			
Standard	Compliance: If numb	er falls below 10%, Dep	artment	conducts further review and takes
	appropriate action.			
Data Source	Adult Mental Health a	and Well Being Survey		
Current Level	2.5%			
	Vocational Employment Services - Standard 26.3			
100.0%				
	Current Performance			
75.0%	Compliance Standard			
50.0%				
			0.40/	
25.0%		13.8%	9.1%	
10.0%	+			
0.0% +				2.5%
2010	201	11	20	12 2013

Discussion:

This standard factored out those persons responding to the Adult Mental Health and Well Being Survey employment questions who are 62 and older, indicated they were retired or indicated they were not looking for work

The response rate for the Adult Mental Health survey was very low in 2013. The Department is working on performance measures in contracts around employment.

Community Resources and Treatment Services Transportation

Standard 28 - Reasonable efforts to identify and resolve transportation problems that may limit access to services

Standard 28.1					
Measurement					
Standard	Compliance: 10% or fewer (3 out of 4 quarters)	·			
Data Source	ISP RDS Data				
Current Level	4.2% (49 out of 1169)				
400.00/	Transportation - Standard 28.1				
100.0%					
75.0%	Current Performance				
	Compliance Standard				
50.0%					
25.0% 3.8%	3.8%	4.3% 4.2%			
0.0%					
6.0% FY14 Q2	FY14 Q3 FY14	Q4 FY15 Q1			

Standard 31 - Class member involvement in personal growth activities and community life.

	Standard 31.1				
Measurement ISP identified class member unmet needs in recreational, social, avocational and				l and spiritual	
01	11	areas.			
Stan		Performance: 10% o	or tewer		
Data S	Source	ISP RDS Data			
Curren	t Level	3.8% (45 out of 1169	9)		
100.0% - 75.0% - 50.0% -		Recreation/Social/Ave	ocational/Spiritual Opportunit	ies - Standard 31.1	
25.0% -	3.4%		3.7%	3.8%	3.8%
0.0% FY14	Q2	¢ FY14	Q3 FY	∲ ′14 Q4	FY15 Q1

	Stand	ard 31.2			
Measurement	Domain average of positive respo	Domain average of positive responses in the Social Connectedness domain			
Standard	Performance: At or above 65%				
Data Source	Adult Mental Health and Well Bei	ing Survey			
Current Level	62.8%				
100.0%	Recreation/Social/Avocational/Spin	ritual Opportunities	- Standard 31.2		
50.0%	61.3%	63.1%	62.	3%	
25.0%	Current Performance Performance Standard				
2010	2011	20	012 201	3	

System Outcomes: Supporting the Recovery of Adults with Mental Illness Recovery

Standard 32 - Functional improvements in the lives of class members receiving services

	Standard 32.1				
Measurement	Class Members demonstrating functional improvement on LOCUS between baseline an	id			
Weasurement	12 month re-certification				
Standard	Standard to be established.				
Data Source	Enrollment data (Based on overall composite score.)				
Current Level	29.1% (393 out of 1350)				
100.0% -	Individual Outcomes - Standard 32.1				
	- Current Performance				
50.0%					
25.0% 29.0%	33.7% 29.6% 29.1%				
0.0% + FY14 Q2	FY14 Q3 FY14 Q4 FY15 Q1				

	Standard 32.2				
Measurement	Class Members who have	Class Members who have maintained level of functioning between baseline and 12 month			
Measurement	re-certification.				
Standard	Standard to be established	l.			
Data Source	Enrollment data (Based on	overall composite score	.)		
Current Level	37.6% (508 out of 1350)				
Individual Outcomes - Standard 32.2					
	- Current Performance				
50.0%					
25.0% 38.2%	35.5%	6	36.2%	37.6%	
0.0%					
FY14 Q2	FY14 Q3	FY1	4 Q4	FY15 Q1	

System Outcomes: Supporting the Recovery of Adults with Mental Illness Recovery

		Standard 32.3				
Measurement	Measurement Consumers reporting positively on functional outcomes on Adult Mental Health and Well Bein					
Medealement		Survey outcome items.				
Standard	Performance: 80%					
Data Source	Adult Mental Health an	d Well Being Survey				
Current Level	63.5%					
100.0%	Indiv	idual Outcomes - Standard 32.3		_		
75.0%						
50.0%9. <mark>3%</mark>	58.	9% 60	.9% 6	3.5%		
			Current Performance			
25.0%			Performance standard			
0.00/						
0.0%	20)11 2()12 2	⊣ 2013		
2010	20	20	J12 2	013		

System Outcomes: Supporting the Recovery of Adults with Mental Illness Recovery

Standard 33 - Demonstrate that consumers are supported in their recovery process

Standard 33.2						
Measu	rement	nent Consumers reporting that agency staff believe that they can grow, change and recover				
Stan	dard	Performance: 80%				
Data S	Source	Adult Mental Health a	and Well Being Survey			
Curren	t Level	75.0%				
100.0% Recovery - Standard 33.2						
100.070						
75.0% 🗸					75.00/	
	73.0%		71.9%	76.9%	75.0%	
50.0% -				1 1 1		
		Current Performance				
25.0% -		Performance Standard				
0.0% -]			
202	10	201	11 20	12	2013	

		Standard 33.3			
Measurement	Consumers reporting the efforts and beliefs.	onsumers reporting that agency services and staff supported their recovery and wellness forts and beliefs.			
Standard	Performance: 80%				
Data Source	Adult Mental Health and	I Well Being Survey Q15			
Current Level	73.4%				
100.0% 75.0% 71.0%		ecovery - Standard 33.3 0.0%	72.7%	73.4%	
0.0%	Performance Standard				
2010	2011	20	12	2013	

System Outcomes: Supporting the Recovery of Adults with Mental Illness Recovery

Standard 33.4							
Measurement		Consumers reporting that providers offered opportunities to learn skills to strengthen and maintain wellness.					
Standard		Performance: 80%					
Data Source		Adult Mental Health and Well Being Survey Q16					
Current Level		75.3%					
100.0% Recovery - Standard 33.4							
75.0%	75.2%		72.40/	76.1% 7	75.3%		
50.0% -	7 3.2 70		73.1%				
25.0% -		Current Performance Performance Standard					
0.0% - 20	10	201	1 20	12	2013		

Standard 33.6						
Measurement	Consumers reporting the groups run by peers.	Consumers reporting that service providers offered mutual support or recovery-oriented groups run by peers.				
Standard	Performance: 80%	Performance: 80%				
Source	Adult Mental Health an	Adult Mental Health and Well Being Survey				
Current Level	61.9%	61.9%				
100.0%	R	ecovery - Standard 33.6	1			
75.0%						
50.0% 59.1%	6 6	60.4%	61.8% 61.9%			
25.0%	Current Performance Performance Standard					
0.0% 2010 20		20	012 2013			