Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Consent Decree Performance and Quality Improvement Standards: 5 i [i gh2016

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 3^{rd} quarter data in the 4^{th} quarter).

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

Definitions: What the standard is intending to measure. Standard Title: How the standard is being measured.

Measure Method: 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.

Compliance and Performance Standards: Summary Sheet 5 df] -> i bY 2016

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

Consent Decree Performance and Quality Improvement Standards: November 2015

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.
- 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

Compliance and Performance Standards: Summary Sheet 5 df] -> i bY 2016

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.

Compliance and Performance Standards: Summary Sheet 5 df] -> i bY 2016

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

- 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.
- 2a. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 3. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 3a. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 4. No longer reported per amendment dated May 8, 2014. Report available upon request.
- 4a. 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.

Compliance and Performance Standards: Summary Sheet 5 df] -> i bY 2016

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

- 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.

Compliance and Performance Standards: Summary Sheet 5 df] -> i bY 2016

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.

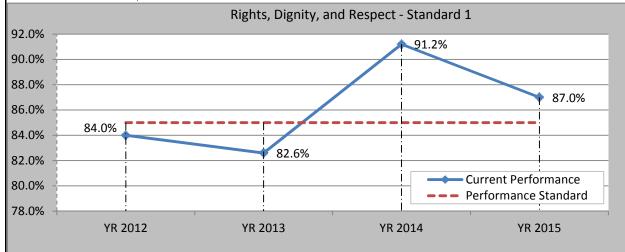
Standard 34. Public Education

- 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.

Rights, Dignity, and Respect

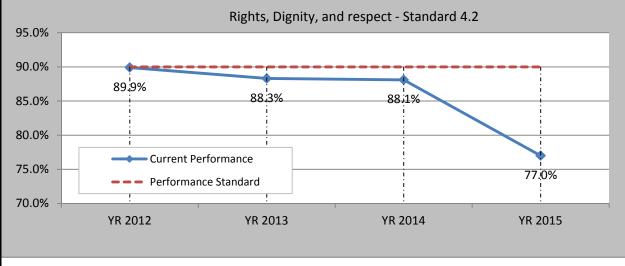
Standard 1 - Treated with respect for their individuality

Standard 1		
	Domain average of positive responses to the statements in the quality and appropriateness	
Measurement	domain.	
Standard	Performance: at or above 85%	
Data Source	Adult Mental Health and Well Being Survey	
Current Level	87.9% (1068 out of 1215)	



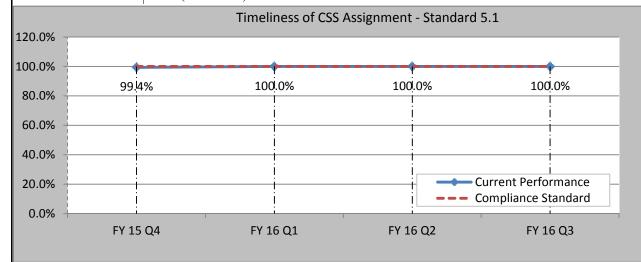
Standard 4 - Class Members are informed of their rights

Standard 4.2	
Measurement	Percent of consumers reporting they were given information about their rights.
Standard	Performance: 90%
Data Source	Adult Mental Health and Well Being Survey Q4
Current Level	77% (935 out of 1215)

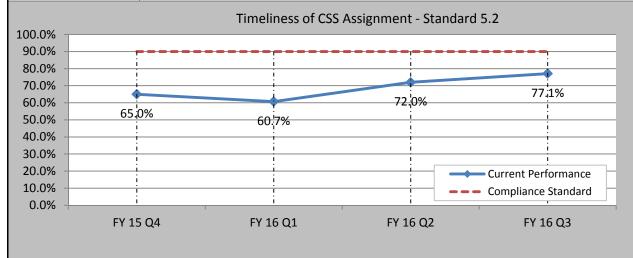


Community Support Services: Community Integration, Community Rehabilitation Services, Assertive Community Treatment and Adult Behavioral Health Homes Individualized Support Planning

Standard 5.1		
Measurement	Percentage of Class Members requesting a worker who were assigned one.	
Standard	Performance: 100%	
Data Source	ISP RDS Data	
Current Level	100% (256 of 256)	

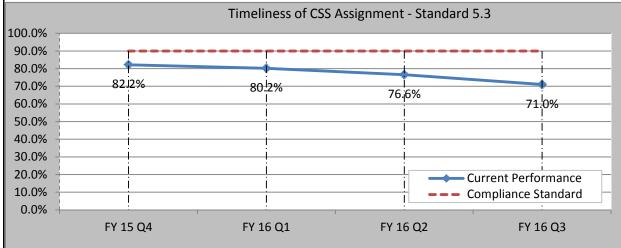


Standard 5.2			
Measurement Percentage of all hospitalized Class Members assigned a worker within 2 working days of			
	referral		
	Performance: 90%		
Standard	Compliance: 90% (3 out of 4 quarters)		
Data Source	ISP RDS Data (APS Healthcare)		
Current Level	77.1% (27 out of 35)		

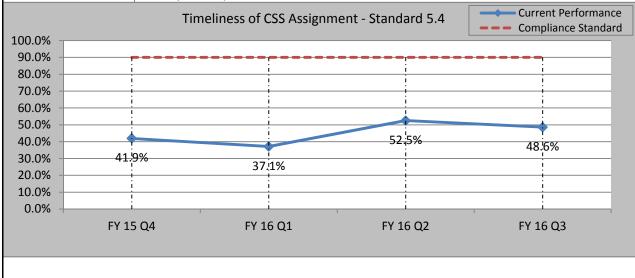


Community Support Services: Community Integration, Community Rehabilitation Services, Assertive Community Treatment and Adult Behavioral Health Homes Individualized Support Planning

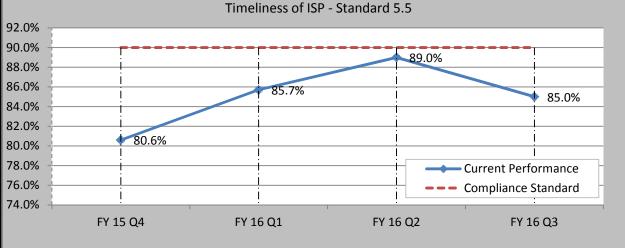
Standard 5.3		
	Percentage of all non-hospitalized Class Members assigned a worker within 3 working days	
Measurement	of referral.	
	Performance: 100%	
Standard	Compliance: 90% (3 out of 4 quarters)	
Data Source	ISP RDS Data	
Current Level	71.0% (157 of 221)	



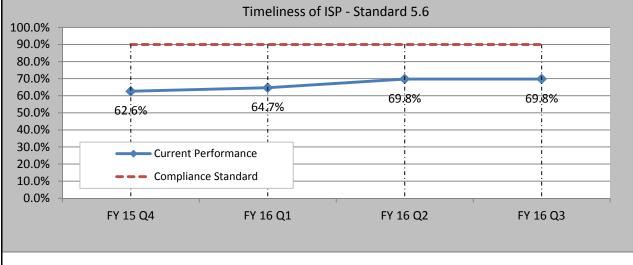
	Standard 5.4			
Measurement	surement Of the Class Members who were not assigned on time, percentage of these clients who were			
	assigned a community support worker within 7 working days.			
	Performance: 100%			
Standard	Compliance: 95%			
Data Source	ISP RDS Data (APS Healthcare)			
Current Level	48.6% (35 of 72)			



DHHS Office of Substance Abuse and Mental Health Services Community Integration / Community Support Services / Individualized Support Planning Standard 5.5 Measurement 90 day class member Isp reviews completed within specified timeframe. Performance: 90% Standard Compliance: 90% (3 out of 4 quarters) Data Source ISP RDS Data (APS Healthcare) Current Level 85.0% (51 out of 60)



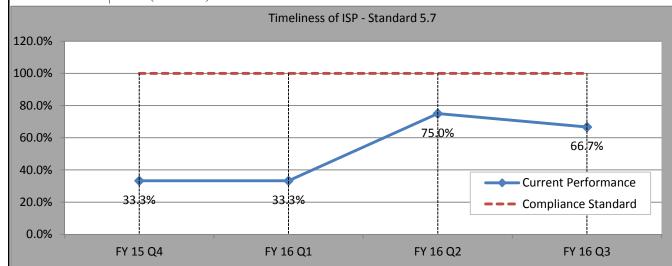
	Standard 5.6		
Measurement 90 day class member Isp reviews completed within specified timeframe.			
	Performance: 90%		
Standard	Compliance: 90% (3 out of 4 quarters)		
Data Source	ISP RDS Data (APS Healthcare)		
Current Level	69.8% (630 out of 903)		



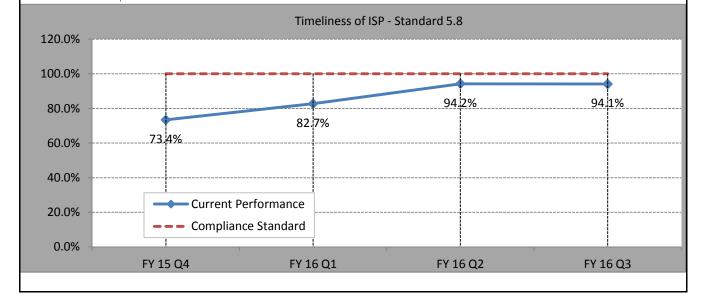
DHHS Office of Substance Abuse and Mental Health Services Community Integration / Community Support Services / Individualized Support Planning Standard 5.7 Measurement Initial class member ISPs not developed within 30 days, but were developed within 60 working days. Standard Performance: 100%

Data Source ISP RDS Data (APS Healthcare)

Current Level 66.7% (6 out of 9)



Standard 5.8	
Measurement	Initial class member ISPs not developed within 90 days, but were developed within 120 working days.
Standard	Performance: 100%
Data Source	ISP RDS Data (APS Healthcare)
Current Level	94.1% (257 out of 273)



DHHS Office of Substance Abuse and Mental Health Services Community Integration / Community Support Services / Individualized Support Planning Standard 8 - Services based on needs of class member rather than only available services. Standard 8.1 ISPs reviewed in which there is evidence that the ISP team reconvened after an unmet need was identified Measurement Standard Performance: 90% ISP RDS Data (Class Member Treatment Plan Review) Data Source 75.0% (6 out of 8) Current Level Timeliness of ISP - Standard 8.1 100.0% 90.0% 90.9% 80.0% 70.0% 75.0% 75.0% 60.0% 62.5% 50.0% 40.0% 30.0% - Current Performance 20.0% 10.0% — — Compliance Standard 0.0% FY 15 Q4 FY 16 Q1 FY 16 Q2 FY 16 Q3 Standard 8.2 ISPs reviewed with identified unmet needs in which interim plans are established. Measurement Performance: 95% Compliance: 90% (3 out of 4 quarters) Standard ISP RDS Data Data Source Current Level 71.4% (5 out of 7) Timeliness of ISP - Standard 8.2 100.0% 90.0% 90.9% 80.0% 70.0% 71.4% 60.0% 50.0% 40.0% 50.0% 30.0% - Current Performance 20.0% 10.0% - Compliance Standard 0.0% FY 15 Q4 FY 16 Q1 FY 16 Q2 FY 16 Q3

			t Services / Individualized Suppo	
	Standard 9 - Services to	be delivered by a	n agency funded or licensed by th	ie state
		Standa	rd 9	
Measurement	ISPs with services identified and wit	h a treatment plan	signed by each provider.**	
	Performance: 90%			
Standard	Compliance: 90% (3 out of 4 quarter	<u>s)</u>		
Data Source	ISP RDS Data (Class Member Treats	ment Planning Rev	riew)	
Current Level	45.5% (15 out of 33)			
		ISP Service Agree	ments - Standard 9	
100.0%				
90.0%				
80.0%				
70.0%				
60.0%		68.2%		
50.0%				
40.0%	52.2%			45.5%
30.0%			42.4%	43.570
20.0%	Current Performance			
20.070	Compliance Standard			
10.0%		1 1		į.
	compliance standard			i

			OHHS Office of Substance Abuse		
			gration / Community Support		
		Standard 9 -	Services to be delivered by an	agency funded or licensed b	y the state
			Standard 10.	4 - ICM	
Measure	ement	Intensive Case M	anagers with average caseloads of	of 16 or fewer.	
		a			
Standard			6 of all ICM Workers with Class		. 12. 1 1 1 7 1
					earry traditional caseloads. In the
		future, if iCMs ca	arry caseloads, OAMHS will resu	ime reporting caseload ratios.	
			Standard 10.5	- OADS	
Measur	ement		and Disability Services Case Man		
Stand		•	of all OADS Case Managers wi		ds
Data So			ounts for Workers with Class Me	mbers Public Wards	
Current	Level	100% (26 out of	26)		
			Case Load Ra	atio - Standard 10.5	
101.0%		100.0%	100.0%	100.0%	100.0%
100.0%		•	•	•	
99.0%					
98.0%					
97.0%					
96.0%					
95.0%					
94.0%	_				
		Current	Performance		
93.0%		Complia	nce Standard		
92.0%		FY 15 Q4	FY 16 Q1	FY 16 Q2	FY 16 Q3
		1113 Q4	111001	1110 Q2	1110Q3

Community Resources and treatment Services Housing and Residential

Standard 12 - Residental Support Services adequate to meet ISP needs of those ready for discharge.

Standard 12.1

Measurement	ment Class members in community with ISPs with unmet residential support needs.	
Standard	Compliance: 5% or fewer (3 out of 4 quarters)	
Data Source	ISP RDS Data and Quality Improvement	
G + I 1	2.10//10 / 6.025	

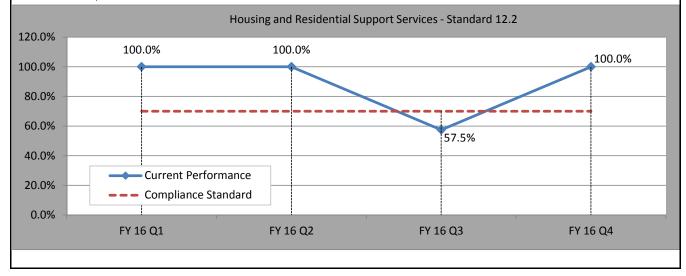
Current Level |2.1% (18 out of 825)

Housing and residential Support Services - Standard 12.1 100.0% 90.0% 80.0% Current Performance 70.0% --- Compliance Standard 60.0% 50.0% 40.0% 30.0% 20.0% 2.9% 2.9% 3.1% 10.0% 2.1% 0.0% FY 15 Q4 FY 16 Q1 FY 16 Q2 FY 16 Q3

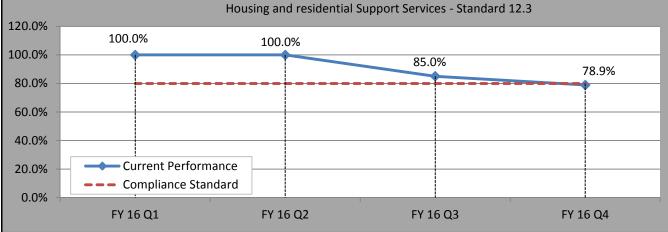
Standard 12.2

Measurement	Percentage of patients at Riverview determined to be ready for discharge who are discharged within 7 days of tha	
	determination. (discharge is not impeded due to lack of residential support services)	
	Performance: Performance: 75% (within 7 days of that determination5%)	
Standard	Compliance: 70% (within 7 days of that determination)	
Data Source	Riverview Psychiatric Center Discharge Data	
Current Level	100.0% FY16.04 (Lack of residential supports did not impede discharge for 33 out of 33 nationts within 7 days)	

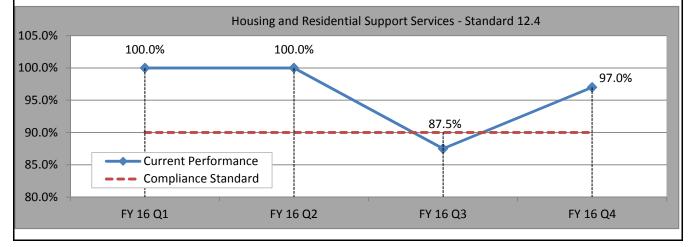
100.0% FY16 Q4 (Lack of residential supports did not impede discharge for 33 out of 33 patients within 7 days)

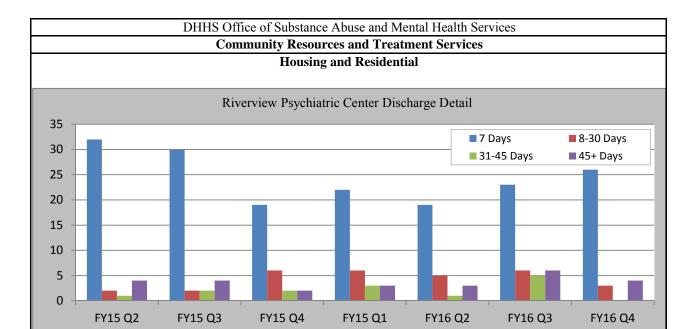


DHHS Office of Substance Abuse and Mental Health Services		
	Community Resources and treatment Services Housing and Residential	
	Standard 12.3	
Measurement	Percentage of patients at Riverview determined to be ready for discharge who are discharged within 30	
	Performance: Performance: 96% (within 30 days of that determination5%)	
Standard	Compliance: 80% (within 30 days of that determination)	
Data Source	Riverview Psychiatric Center Discharge Data	
	78.9% (26 out of 33) FY16 Q4 (Lack of residential supports did not impede discharge for any patients	
Current Level	within 30 days)	



Standard 12.4		
	Percentage of patients at Riverview determined to be ready for discharge who are discharged within 45	
Measurement	days of that determination. (discharge is not impeded due to lack of residential support services)	
	Performance: Performance: 100% (within 45 days of that determination5%)	
Standard	Compliance: 90% (within 45 days of that determination)	
Data Source	Riverview Psychiatric Center Discharge Data	
Current Level	97.0% (32 out of 33) FY16 Q4 (Lack of residential supports did not impede discharge for any patients	
	within 45 days)	





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

33 Civil Patients discharged in quarter

26 discharged at 7 days (78.8%)

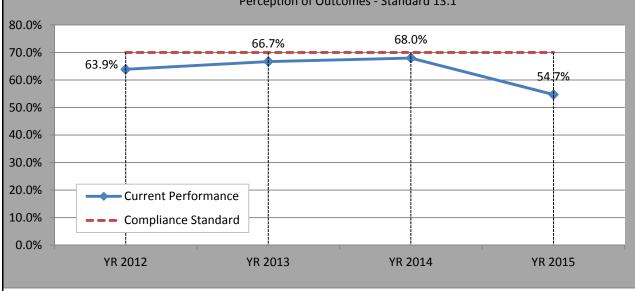
3 discharged 8-30 days (9.1%)

0 discharged 31-45 days (0.0%)

4 discharged post 45 days (12.1%)

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

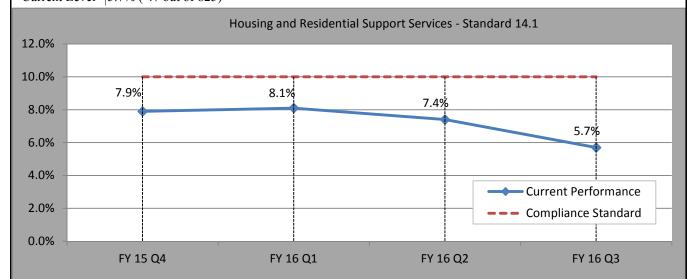
Standard 13.1 Measuremen Domain average of positive responses to the questions in the Perception of Outcomes domain Standard Performance: at or above 70% Data Source Adult Mental health and Well Being Survey Current Leve 54.7% (664 of 1215) Perception of Outcomes - Standard 13.1 80.0%



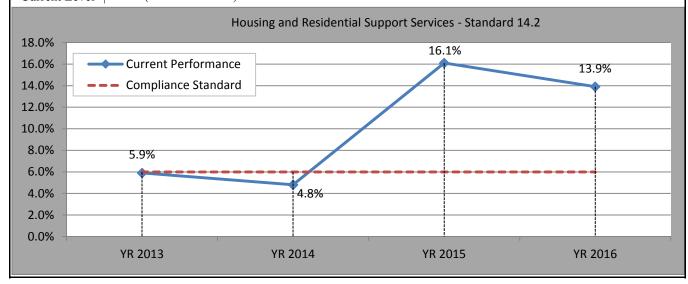
Community Resources and treatment Services Housing and Residential

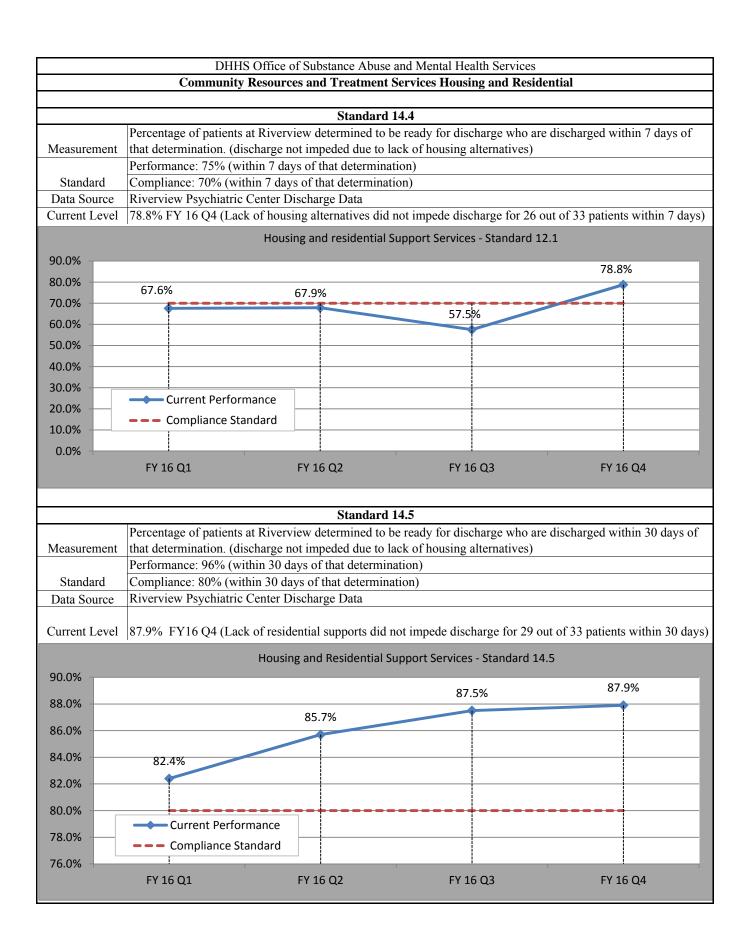
Standard 14 - Demonstrate an array of housing alternatives available to meet class member needs.

Standard 14.1 Measurement Class members in community with ISPs with unmet housing needs. Standard Compliance: 10% or fewer (3 out of 4 quarters) Data Source ISP RDS Data Current Level 5.7% (47 out of 825)

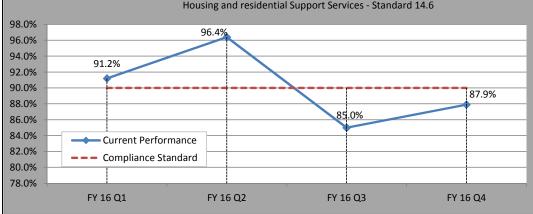


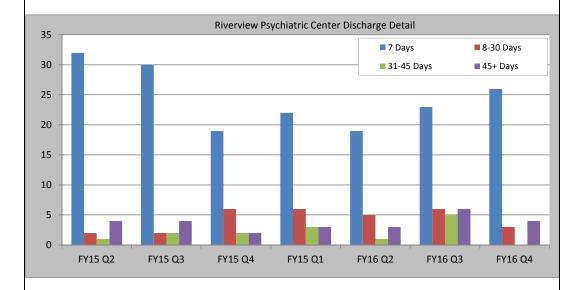
Standard 14.2		
Measurement	Percentage of respondents who experienced homelessness over 12-month period.	
Standard	Performance: 6% or fewer	
Data Source	Adult Mental Health and Well Being Survey, living situation data	
Current Level	13.9% (169 out of 1215)	





	DHHS Office of Substance Abuse and Mental Health Services		
	Community Resources and Treatment Services		
	Housing and Residential		
	Standard 14.6		
Í	Percentage of patients at Riverview determined to be ready for discharge who are discharged within 45		
Measurement	days of that determination. (discharge not impeded due to lack of housing alternatives)		
	Performance: 100% (within 45 days of that determination)		
	Compliance: 90% (within 45 days of that determination with certain clients excepted by agreement of th		
Standard	parties and the Court Master)		
Data Source	Riverview Psychiatric Center Discharge Data		
	87.9% FY 16 Q4 (Lacck of housing alternatives did not impede discharge for 29 out of 33 patients		
Current Level	within 45 days)		
	Housing and residential Support Services - Standard 14 6		





33 Civil Patients discharged in quarter

- 26 discharged at 7 days (78.8%)
- 3 discharged 8-30 days (9.1%)
- 0 discharged 31-45 days (0.0%)
- 4 discharged post 45 days (12.1%)

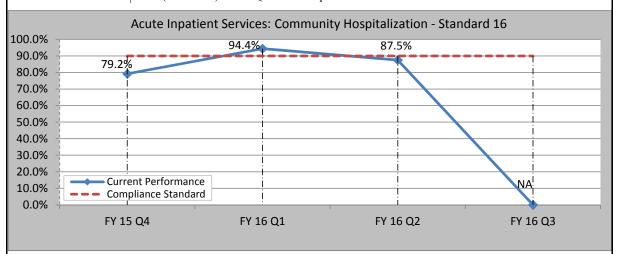
Housing Alternatives impeded discharge for 7 patients (21%)

- 3 patients discharged within 8-30 days post clinical readiness for discharge
- 0 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.

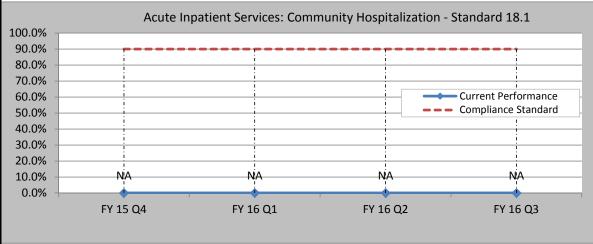
Standard 16		
	Class Member admissions determined to be reasonably near an individual's local community	
Measurement	of residence.	
Standard	Compliance: 90%	
Data Source	UR Database/EIS	
Current Level	0.0% (0 out of 0) FY16 Q3 Not Completed due to UR Nurse line vacant.	



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

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

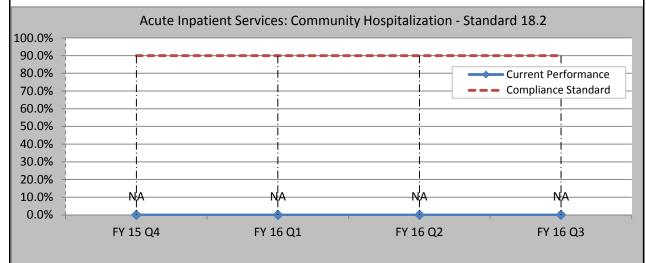
Standard 18.1		
Measurement	Class members admitted with ISPs for whom hospital obtained ISP.	
Standard	Compliance: 90%	
Data Source	UR Database/EIS	
Current Level	0.0% (0 out of 0) FY16 Q3 Not Completed due to UR Nurse line vacant.	



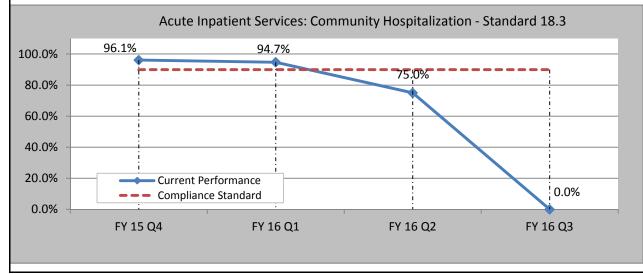
Community Resources and treatment Services Acute Inpatient Services: Involuntary Community Hospitalization

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

Standard 18.2		
	Treatment and discharge plan were determined to be consistent with ISP goals and	
Measurement	objectives.	
Standard	Compliance: 90%	
Data Source	UR Database/EIS	
Current Level	NA	



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	0.0% (0 out of 0) FY16 Q3 Not Completed due to UR Nurse line vacant.	



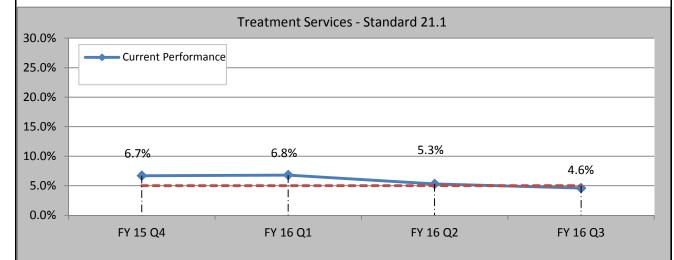
DHHS Office of Substance Abuse and Mental Health Services **Community Resources and treatment Services Acute Crisis Intervention Services** Standard 19 - Crisis services are effective an meet Settlement Agreement Standards Standard 19.1 Face to face crisis contacts that result in hospitalizations. Measurement Standard Performance: No more than 20-25% are hospitalized as result of crisis intervention. Quarterly Crisis Contract Performance Data and Quality Improvement Data Source Current Level 19.9% (784 out of 3949) Crisis Intervention Standards - Standard 19.1 30.0% 20.9% 22.6% 25.0% 2019% 19.9% 20.0% 15.0% 10.0% - Current Performance Compliance Standard 5.0% Compliance Standard 0.0% FY 16 Q1 FY 16 Q2 FY 16 Q3 FY 16 Q4 Standard 19.2 Face to face crisis contacts that result in follow-up and/or referral to community based Measurement services. To Be Established Standard Data Source Quarterly Crisis Contract Performance Data 42.3% (1671 out of 3949) Current Level Crisis Intervention Standards - Standard 19.2 60.0% 56.9% 50.0% 56:1% 40.0% 44.3% 42.3% 30.0% 20.0% 10.0% -Current Performance 0.0% FY 16 Q1 FY 16 Q2 FY 16 Q3 FY 16 Q4

DHHS Office of Substance Abuse and Mental Health Services **Community Resources and Treatment Services Crisis Intervention Services** Standard 19.3 Face to face crisis contacts in which client has a CI worker and worker was notified Measurement about the crisis. Standard To Be Established Data Source Quarterly Crisis Contract Performance Data Current Level 2.1% (69 out of 3311) Crisis Intervention Standards - Standard 19.3 30.0% Current Performance 25.0% 20.0% 15.0% 10.0% 1.8% 1.8% 1.7% 5.0% 2.1% 0.0% FY 16 Q1 FY 16 Q2 FY 16 Q3 FY 16 Q4 Standard 19.4 Face to face crisis contacts that result in follow-up and/or referral to community based Measurement services. Compliance: 90% Standard Data Source Quarterly Crisis Contract Performance Data Current Level 93.4% (768 out of 822) Crisis Intervention Standards - Standard 19.4 100.0% 90.0% 93.4% 92.9% 80.0% 70.0% 78.8% 60.0% 50.0% 40.0% 30.0% Current Performance 20.0% --- Compliance Standard 10.0% 0.0% FY 16 Q1 FY 16 Q2 FY 16 Q3 FY 16 Q4

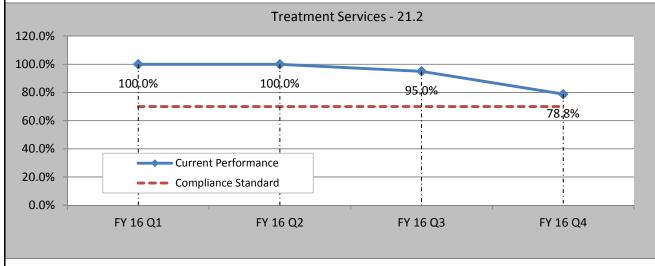
Community Resources and Treatment Services

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	Compliance: 5% or fewer (3 out of 4 quarters)	
Data Source	ISP RDS Data	
Current Level	4.6% (38 out of 825)	



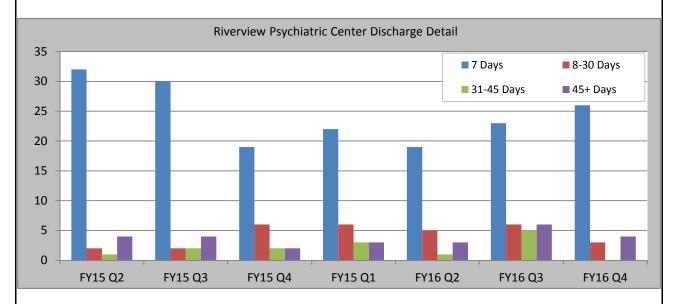
Standard 21.2		
Measurement	Percentage of patients at Riverview determined to be ready for discharge who are discharged	
	within 7 days of that determination.	
Standard	Compliance: 70% (within 7 days of that determination)	
Data Source	Riverview Psychiatric Center Discharge Data	
	78.8% FY16 Q4 (Lack of mental health treatment did not impede discharge for any patients	
Current Level	within 7 days)	



100.0% 100.0% 95.0% 87.9% 80.0% 60.0% 40.0% Current Performance 20.0% Compliance Standard 0.0% FY 16 Q1 FY 16 Q2 FY 16 Q3 FY 16 Q4 Standard 21.4 Percentage of patients at Riverview determined to be ready for discharge who are discharged within 7 days of that determination. Standard Data Source Performance: 100% (within 45 days of that determination) Compliance: 90% (within 45 days of that determination) Riverview Psychiatric Center Discharge Data 97.0% FY 16 Q4 (Lack of mental health treatment did not impede discharge for any patients within 45 days) Treatment Services - 21.4 100.0% 100.0% 97.0% 87.9% Current Performance	Car	mmunity Decourace	se and Mental Health Services	,
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		Percentage of p within 30 days Performance: 9 Compliance: 80 Riverview Psystem 87.9% FY16 Q within 30 days 100.0% Current Percentage of p within 7 days of Performance: 1 Compliance: 90 Riverview Psystem 97.0% FY16 Q within 45 days 100.0% Current P	Percentage of patients at Riverview de within 30 days of that determination. Performance: 96% (within 30 days of Compliance: 80% (within 30 days of Riverview Psychiatric Center Dischar 87.9% FY16 Q4 (Lack of mental heal within 30 days) Treatment Services 100.0% 100.0% 100.0% Standard Percentage of patients at Riverview de within 7 days of that determination. Performance: 100% (within 45 days of Riverview Psychiatric Center Dischar 97.0% FY16 Q4 (Lack of mental heal within 45 days) Treatment 9 Treatment 9	Percentage of patients at Riverview determined to be ready for disc within 30 days of that determination. Performance: 96% (within 30 days of that determination) Compliance: 80% (within 30 days of that determination) Riverview Psychiatric Center Discharge Data 87.9% FY16 Q4 (Lack of mental health treatment did not impede d within 30 days) Treatment Services - Standard 21.3 100.0% 100.0% 95.0% Standard 21.4 Percentage of patients at Riverview determined to be ready for disc within 7 days of that determination. Performance: 100% (within 45 days of that determination) Compliance: 90% (within 45 days of that determination) Riverview Psychiatric Center Discharge Data 97.0% FY16 Q4 (Lack of mental health treatment did not impede d within 45 days) Treatment Services - 21.4 100.0% 100.0% 87.9% Current Performance

Community Resources and Treatment Services

Treatment Services



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

33 Civil Patients discharged in quarter

26 discharged at 7 days (78.8%)

3 discharged 8-30 days (9.1%)

0 discharged 31-45 days (0.0%)

4 discharged post 45 days (12.1%)

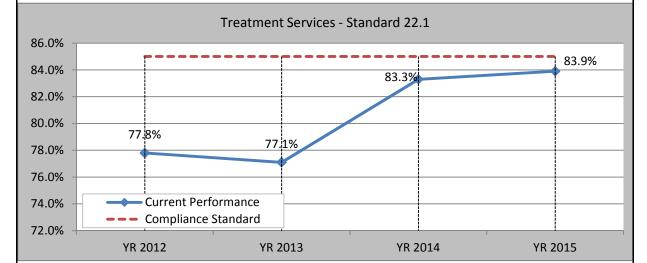
Treatment services did not impede discharge for any patient post clinical readiness for discharge.

Community Resources and Treatment Services

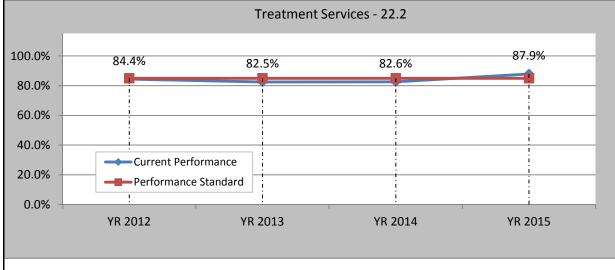
Treatment Services

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

Standard 22.1		
Measurement	Domain average of positive responses in the Perception of access domain.	
	Performance: At or above 85%	
Standard	Compliance: OAMHS conducts review, takes action if results fall below defined leavels.	
Data Source	Adult Mental Health and Well Being Survey	
Current Level	83.9% (1019 out of 1215)	



Standard 22.2		
Measurement	Domain average of positive responses in the General Satisfaction domain.	
Standard	Performance: at or above 85%	
Data Source	Adult Mental Health and Well Being Survey	
Current Level	87.9% (1068 out of 1215)	

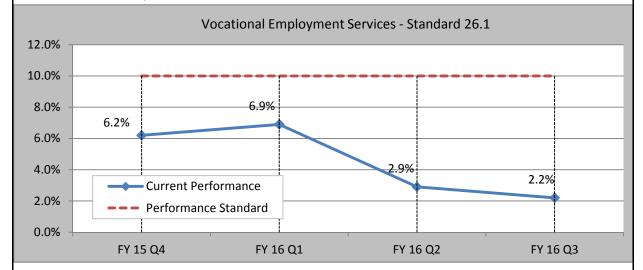


Community Resources and Treatment Services

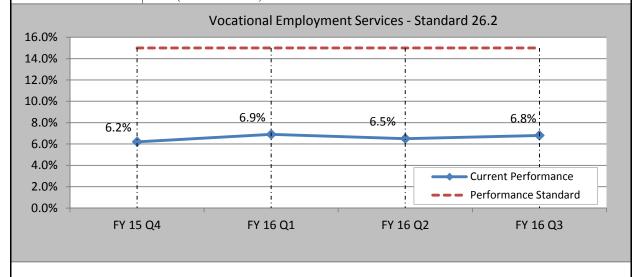
Vocational Employment Services

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

Standard 26.1		
Measurement	Class members with ISP identified unmet vocational/employment support needs.	
Standard	Performance: 10% or fewer	
Data Source	ISP RDS Data	
Current Level	2.2% (18 out of 825)	



Standard 26.2MeasurementDomain average of positive responses in the General Satisfaction domain.StandardPerformance: 15% of class members employed in competitive employment.Data SourceISP RDS DataCurrent Level6.8% (83 out of 1229)



	Commu	inity Resources and	Treatment Services	3	
Vocational Employment Services					
		Standard 2	6.3		
Measurement	Consumers under a	ge 62 in supported an	d competitive emplo	oyment (part or full time)	
Standard	Performance: 15% in either competitive or supported employment				
	Compliance: If number falls below 10%, Department conducts further review and takes				
	apporopriate action				
Data Source	Adult Mental Health and Well Being Survey				
Current Level	10% (98 out of 981	.)			
0.0%	9.1%		10.2%	10.0%	
3.0%					
5.0%					
.0%		2.5%			
			-	Current Performance	
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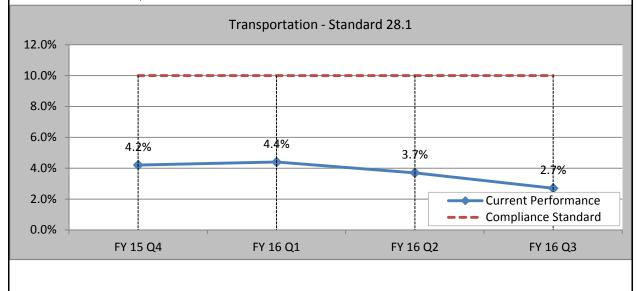
Community Resources and Treatment Services

Transportation

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

Standard 28.1

Measurement	Percentage of class members with ISP identified unmet transportation needs.
Standard	Compliance: 10% or fewer (3 out of 4 quarters)
Data Source	ISP RDS Data
Current Level	2.7% (22 out of 825)

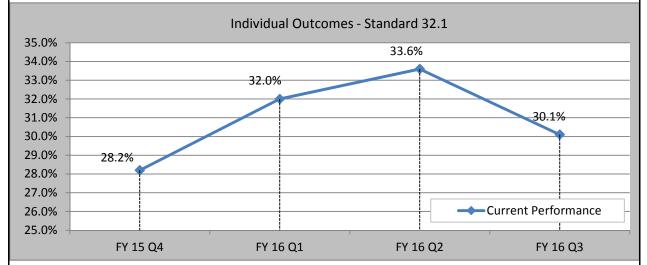


DHHS Office of Substance Abuse and Mental Health Services Standard 31 - Class member involvement in personal growth activities and community life Standard 31.1 ISP identified class member unmet needs in recreational, social, avocational, and spiritual Measurement Standard Performance: 10% or fewer Data Source ISP RDS Data 2.8% (23 out of 825) Current Level Recreation/Social/Avocational/Spiritual Opportunities - Standard 31.1 12.0% 10.0% 8.0% Current Performance Performance Standard 6.0% 3.7% 3.3% 3.4% 4.0% 2.8% 2.0% 0.0% FY 15 Q4 FY 16 Q1 FY 16 Q2 FY 16 Q3 Standard 31.2 Measurement Domain average of positive responses in the Social Connectedness domain. Standard Performance: At or above 65% Data Source Adult Mental Health and Well Being Survey Current Level 62.7% (760 out of 1215) Recreation/Social/Avocational/Spiritual Opportunities - Standard 31.1 70.0% 60.0% 64.2% 63.1% 62.8% 62.1% 50.0% 40.0% 30.0% 20.0% **Current Performance** 10.0% Performance Standard 0.0% YR 2012 YR 2013 YR 2014 YR 2015

DHHS Office of Substance Abuse and Mental Health Services System Outcomes: Supporting the Recovery of Adults with Mental Illness Recovery

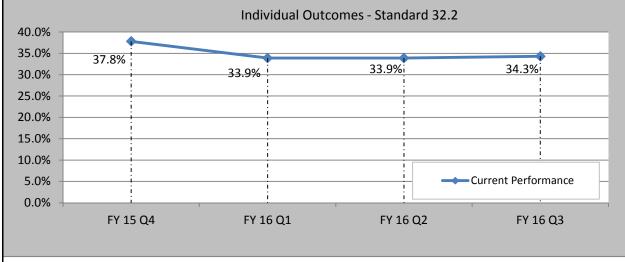
Standard 32 - Functional improvements in the lives of class members receiving services

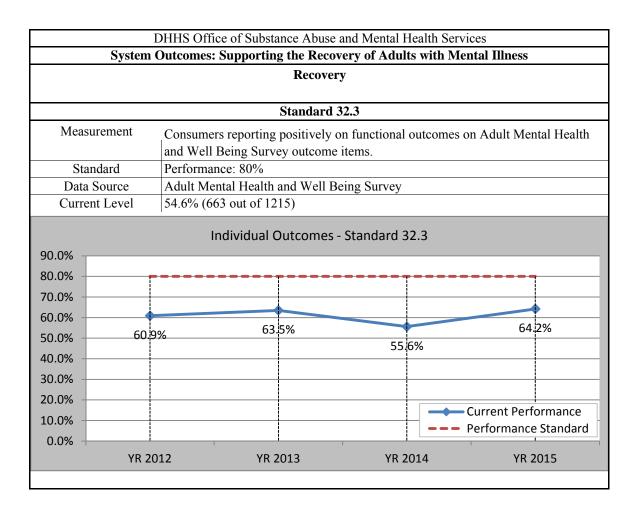
Standard 32.1		
Measurement	Class members demonstrating functional improvement on LOCUS between baseline and 12 month re-certification	
Standard	Standard to be established.	
Data Source	Enrollment data (Based on overall composite score)	
Current Level	30.1% (370 out of 1228)	



Standard 32.2

Measurement	How the standard is measured.
Standard	
Data Source	Enrollment data (Based on overall composite score)
Current Level	34.3% (421 out of 1228)





DHHS Office of Substance Abuse and Mental Health Services **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 Measurement Consumers reporting that agency staff believe that they can grow, change and recover. Standard Performance: 80% Adult Mental Health and Well Being Survey Data Source 86.7% (1054 out of 1215) Current Level Recovery - Standard 33.2 100.0% 86.7% 90.0% 75.0% 76.9% 80.0% 70.0% 60.0% 50.0% 40.0% 30.0% Current Performance 20.0% 10.0% Performance Standard 0.0% YR 2012 YR 2013 YR 2014 YR 2015 Standard 33.3 Measurement Consumers reporting that agency services and staff supported their recovery and wellness efforts and beliefs. Standard Performance: 80% Adult Mental Health and Well Being Survey Q15 Data Source Current Level 87.4% (1062 out of 1215) Recovery - Standard 33.3 100.0% 90.0% 80.0% 70.0% 73.4% 60.0% 50.0% 40.0% 30.0% 20.0% **Current Performance** 10.0% Performance Standard 0.0% YR 2012 YR 2013 YR 2014 YR 2015

DHHS Office of Substance Abuse and Mental Health Services **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. Performance: 80% Standard Data Source Adult Mental Health and Well Being Survey 83.5% (1014 out of 1215) Current Level Recovery - Standard 33.4 86.0% 84.0% 85.0% 82.0% 83.5% 80.0% 78.0% 76.0% 76.1% 74.0% 75.3% **Current Performance** 72.0% Performance Standard 70.0% YR 2013 YR 2015 YR 2012 YR 2014 Standard 33.6 Measurement Consumers reporting that service providers offered mutual support or recovery-oriented groups run by peers. Standard Performance: 80% Adult Mental Health and Well Being Survey Data Source Current Level 87.4% (1062 out of 1215) Recovery - Standard 33.6 100.0% 90.0% 87.4% 80.0% 70.0% 73.4% 60.0% 50.0% 40.0% 30.0% 20.0% **Current Performance** 10.0% Performance Standard 0.0% YR 2012 YR 2013 YR 2014 YR 2015