Metric Category	Metric Number		Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
ACT*	1a	OHA will increase the number of individuals with	1,050 individuals will be served by the end of year one (June 30, 2017).	815	1,050			1,098	1,120	1,140	1,170
	1b	SPMI served by ACT teams.	2,000 individuals will be served by the end of year two (June 30, 2018).			2,000		1,280	1,260	1,226	1,248
	1c		# of individuals served by ACT Teams				2,000	1,288	1,297	1,301	
Crisis	7a	mobile crisis services, as follows:	During year one (July 1, 2016 to June 30, 2017), 3,500 people will be served by mobile crisis.	3,150	3,500			3,587	3,472	3,564	3,832
	7 b		During year two (July 1, 2017 to June 30, 2018), 3,700 people will be served by mobile crisis.			3,700		4,208	5,027	6,983	7,270
	7c		# of individuals served by Mobile Crisis				3,700	8,134	8,633	8,573	
Crisis*	8c	OHA will track and report the number of	By the end of year two (June 30, 2018), Oregon will report the number of								
		individuals receiving a mobile crisis contact.	individuals whose dispositions after contact with mobile crisis result in:								
		-	stabilization in a community setting rather than arrest (FY2)					n/a	2,401	2,041	2,021
			presentation to an emergency department (FY2)					n/a	349	270	454
			admission to an acute care psychiatric facility (FY2)					n/a	169	205	105
			stabilization in a community setting rather than arrest (FY3)					2,498	2,232	2,262	
			presentation to an emergency department (FY3)					414	458	480	
			admission to an acute care psychiatric facility (FY3)					124	97	36	
SH*	14a	_	In year one (July 1, 2016 to June 30, 2017), at least 835 individuals will live in supported housing.	442	835			767	834	876	966
	14b	housing, as follows:	In year two (July 1, 2017 to June 30, 2018), at least 1,355 individuals will live in supported housing.			1,355		1,008	1,002	1,026	1,036
	14c		In year three (July 1, 2018 to June 30, 2019), at least 2,000 individuals will live in supported housing.				2,000	1,021	1,073	1,137	
PDS	16a	OHA will increase the availability of peer-delivered	By the end of year one (June 30, 2017), OHA will increase the number of individuals who are receiving peer-delivered services by 20%.	2,156	2,587			2,434	2,461	2,538	2,880
	16b		By the end of year two (June 30, 2018), OHA will increase the number of individuals who are receiving peer-delivered services by an additional			3,456		3,022	3,289	3,522	3,775
	16c		# of individuals receiving peer-delivered services				3,456	3,895	3,975	4,049	

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Metric Category	Metric Number		Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
OSH	20a	Discharge from OSH will occur as soon as an individual is ready to return to the community, as follows:	By the end of year one (June 30, 2017), 75% of individuals who are Ready to Place/Ready to Transition will be discharged within 30 calendar days of placement on that list.	51.7%	75.0%			55.4%	59.6%	61.6%	61.3%
	20b		By the end of year two (June 30, 2018), 85% of individuals who are Ready to Place/Ready to Transition will be discharged within 25 calendar days of placement on that list.	41.6%	n/a	85.0%		53.9%	49.0%	47.1%	48.4%
	20c		By the end of year three (June 30, 2019), 90% of individuals who are Ready to Place/Ready to Transition will be discharged within 20 calendar days of placement on that list.	30.1%			90.0%	45.3%	46.4%	46.4%	
	20e		OSH will track and report discharges that are extended to and occur on the business day following a weekend day or holiday. (FY1)	Baseline Not Applicable	Measure without Target			0	1	1	1
			OSH will track and report discharges that are extended to and occur on the business day following a weekend day or holiday. (FY2)					5	2	3	3
			OSH will track and report discharges that are extended to and occur on the business day following a weekend day or holiday. (FY3)					1	1	2	
OSH	24		At the end of year one (June 30, 2017), OSH will discharge 90% of individuals within 120 days of admission. (FY1)	37.8%	90.0%			41.5%	41.7%	46.4%	46.9%
			At the end of year one (June 30, 2017), OSH will discharge 90% of individuals within 120 days of admission. (FY2)			90.0%		46.5%	47.8%	48.6%	54.1%
			The percentage of individuals discharged withing 120 days of admission				90.0%	58.0%	60.4%	61.1%	
ACUTE*	29a		By the end of year one, (June 30, 2017), 60% of individuals discharged from an acute care psychiatric facility will receive a warm handoff to a community case manager, peer bridger, or other community provider.	Baseline Not Applicable	60%				Not Av	vailable	
	29b		By the end of year two, (June 30, 2018), 75% of individuals discharged from an acute care psychiatric facility will receive a warm handoff to a community case manager, peer bridger, or other community provider.			75.0%		21.4%	27.7%	29.6%	27.7%
	29c		By the end of year three, (June 30, 2019), 85% of individuals discharged from an acute care psychiatric facility will receive a warm handoff to a community case manager, peer bridger, or other community provider.				85.0%	26.0%	30.0%	36.9%	

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Metric Category	Metric Number	Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
ACUTE	30	OHA will continue to require that individuals receive a follow up visit with a community mental health provider within 7 days of discharge, and OHA will report this data. (FY1)	79.4%	Measure without Target			71.5%	72.0%	73.0%	74.20%
		OHA will continue to require that individuals receive a follow up visit with a community mental health provider within 7 days of discharge, and OHA will report this data. (FY2)			Measure without Target		75.7%	77.8%	77.2%	76.7%
		% of individuals receiving a follow up visit with community mental health provider within 7 days of discharge.				Measure without Target	75.7%	74.1%	74.2%	
ACUTE	31a	OHA will monitor and report the 30 day rates of readmission, by acute care psychiatric facility. (FY1)	9.2%	Measure without Target			10.9%	11.1%	10.3%	10.60%
		OHA will monitor and report the 30 day rates of readmission, by acute care psychiatric facility. (FY2)			Measure without Target		11.0%	10.8%	11.8%	12.2%
		30 day rates of readmission.				Measure without Target	12.0%	11.6%	11.2%	
		OHA will monitor and report the 180 day rates of readmission, by acute care psychiatric facility. (FY1)	21.3%	Measure without Target			22.6%	22.6%	22.7%	22.80%
		OHA will monitor and report the 180 day rates of readmission, by acute care psychiatric facility. (FY2)			Measure without Target		23.8%	22.9%	23.4%	24.0%
		180 day rates of readmission.				Measure without Target	23.5%	23.5%	22.4%	

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Metric Category	Metric Number	Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
ACUTE	31b 32	Two or more readmissions to acute care psychiatric hospital in a six month period. (FY1)	Baseline Not Applicable	Data for Process Measure			n/a	346	280	284
		Two or more readmissions to acute care psychiatric hospital in a six month period. (FY2)			Data for Process Measure		305	314	291	302
		Two or more readmissions to acute care psychiatric hospital in a six month period. (FY3)				Data for Process Measure	315	302	277	
ACUTE	35	OHA will measure the average length of stay of individuals with SPMI in acute care psychiatric facilities, by hospital. (FY1)	8.9	Measure without Target			9.6	9.6	11.0	11.24
		OHA will measure the average length of stay of individuals with SPMI in acute care psychiatric facilities, by hospital. (FY2)	n/a	n/a	Measure without Target		11.5	11.4	11.2	11.16
		OHA will measure the average length of stay of individuals with SPMI in acute care psychiatric facilities, by hospital. (FY3)				Measure without Target	10.8	10.8	10.5	
	35	OHA will also report the number of individuals with SPMI in each facility whose length of stay exceeds 20 days. (FY1)	385	Measure without Target			435	423	459	475
		OHA will also report the number of individuals with SPMI in each facility whose length of stay exceeds 20 days. (FY2)			Measure without Target		534	529	509	518
		OHA will also report the number of individuals with SPMI in each facility whose length of stay exceeds 20 days. (FY3)				Measure without Target	470	464	423	

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Metric Category	Metric Number		Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
ED	40a	OHA will reduce recidivism to emergency departments for the psychiatric purposes, by taking the following steps:	OHA will monitor the number of individuals with SPMI with two or more readmissions to an emergency department for psychiatric reasons in a six month period, by CCO (previously stated by hospital). (FY1)	1,067	Measure without Target			924	919	865	834
			OHA will monitor the number of individuals with SPMI with two or more readmissions to an emergency department for psychiatric reasons in a six month period, by CCO (previously stated by hospital). (FY2)			Measure without Target		828	935	838	622
			OHA will monitor the number of individuals with SPMI with two or more readmissions to an emergency department for psychiatric reasons in a six month period, by CCO (previously stated by hospital). (FY3)				Measure without Target	765	717	513	
ED	41a	OHA will reduce the rate of visits to general emergency departments by individuals with SPMI	By the end of year one (June 30, 2017), there will be a 10% reduction from the baseline.	1.5	1.4			2.0	2.1	2.0	2.0
	41b	for mental health reasons, as follows: (excludes Unity)	By the end of year two (June 30, 2018), there will be a 20% reduction from the baseline.			1.2		1.97	1.9	1.82	1.79
	41c		**Rate of visits to general emergency departments				1.2	1.61	1.37	1.36	
ED	43	OHA is working with hospitals to determine a strategy for collecting data regarding individuals with SPMI who are in emergency departments for longer than 23 hours.	OHA will begin reporting this information in July 2017, and will provide data by quarter thereafter. OHA will report this information by region. OHA will pursue efforts to encourage reporting on a hospital-by-hospital basis.				Not a	Available			
SE*	45a		The number of individuals with SPMI who receive supported employment services who are employed in competitive integrated employment (FY1)	Baseline Not Applicable	Measure without Target			680	697	628	757
			The number of individuals with SPMI who receive supported employment services who are employed in competitive integrated employment (FY2)			Measure without Target		749	756	731	762
			The number of individuals with SPMI who receive supported employment services who are employed in competitive integrated employment (FY3)				Measure without Target	791	770	730	

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Metric Category	Metric Number	1	Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
SE*	45b		The number of individuals with SPMI who no longer receive supported	Baseline	Measure			114	115	164	110
			employment services and are employed without currently receiving	Not	without						
			supportive services from a supported employment specialist (but who may	Applicable	Target						
			rely upon natural and other supports). (FY1)								
			The number of individuals with SPMI who no longer receive supported			Measure		121	127	139	137
			employment services and are employed without currently receiving			without					
			supportive services from a supported employment specialist (but who may			Target					
			rely upon natural and other supports). (FY2)								
			The number of individuals with SPMI who no longer receive supported				Measure	123	128	139	
			employment services and are employed without currently receiving				without				
			supportive services from a supported employment specialist (but who may				Target				
			rely upon natural and other supports). (FY3)								
SRTF	49b (i)	OHA will seek to reduce the length of stay of civilly	By the end of year one (June 30, 2017), there will be a 10% reduction from	638.0	574.2			409.1	552.8	543.5	553
		committed individuals in secure residential	the baseline. (Mean)								
	49b (ii)	treatment facilities, as follows:	By the end of year two (June 30, 2018), there will be a 20% reduction from			510.2		449.7	501.8	663.2	676.0
			the baseline.								
			Length of stay of civilly committed individuals in secure residential				510.2	664.8	673.6	664.7	
			treatment (FY3)								
SRTF	49c	OHA will regularly report on the number of civilly	Starting with year two of this Plan (July 1, 2017), OHA will collect data				See Att	tachment F			
		committed individuals in SRTFs, their lengths of	identifying the type of, and the placement to which they are discharged.								
		stay, and the number of individuals who are									

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Metric Category	Metric Number	Performance Outcome	Baseline 2015	Target Year 1 6/30/2017	Target Year 2 06/30/18	Target Year 3 06/30/19	Quarter Ending Sept 30 of each FY	Quarter Ending Dec 31 of each FY	Quarter Ending March 31 of each FY	Quarter Ending June 30 of each FY
CJD*	52a	OHA will continue to report the number of individuals with SPMI receiving jail diversion services. (FY1)	Baseline Not Applicable	Measure without Target			1,553	1,610	1,736	2,499
		OHA will continue to report the number of individuals with SPMI receiving jail diversion services. (FY2)	n/a	n/a	Measure without Target		1,822	1,766	1,884	2,086
		Number of individuals with SPMI receiving jail diversion services. (FY3)				Measure without Target	1,888	1,676	1,514	
	52a	OHA will continue to report the number of reported diversions. (Pre-Booking) (FY1)	Baseline Not Applicable	Measure without Target			284	385	346	515
		OHA will continue to report the number of reported diversions. (Pre-Booking) (FY2)			Measure without Target		356	350	393	502
		Number of reported diversions. (Pre-Booking) (FY3)				Measure without Target	421	398	368	
	52a	OHA will continue to report the number of reported diversions. (Post-Booking) (FY1)	Baseline Not Applicable	Measure without Target			1,269	1,225	1,390	1,984
		OHA will continue to report the number of reported diversions. (Post-Booking) (FY2)			Measure without Target		1,466	1,416	1,491	1,574
		Number of reported diversions. (Post-Booking) (FY3)				Measure without Target	1,396	1,278	1,146	
	52d	As of July 2016, OHA will track arrests of individuals with SPMI who are enrolled in services and will provide data by quarter thereafter.	Baseline Not Applicable					Data Not	Available	

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Appendix C

Rates of Readmission by Acute Care Facility (31a-b)

2019 Q1 (April 1, 2018 – March 31, 2019)

Acute Care Psychiatric Hospital	Location	30-day	180-day
Asante Rogue Regional Medical Center (Rogue Valley)	Medford	9.6%	19.8%
Bay Area Hospital	Coos Bay	11.2%	20.5%
Good Samaritan Regional Medical Center	Corvallis	8.5%	16.1%
Unity/Legacy Emmanuel Medical Center	Portland	12.9%	26.4%
Peace Health - Sacred Heart Medical Center	Eugene	12.7%	23.9%
Providence Portland Medical Center	Portland	11.0%	22.6%
Providence St. Vincent Medical Center	Portland	12.0%	20.8%
Salem Hospital	Salem	9.0%	19.8%
St Charles Health System Sage View	Bend	10.4%	21.6%
UBH of Oregon (Cedar Hills)	Portland	9.6%	22.4%
	Total:	11.2%	22.4%

Appendix D

Average Length of Stay in Acute Care Facilities, by Facility (35)

2019 Q1 (April 1, 2018 – March 31, 2019)

Acute Care Psychiatric Hospital	Location	Average Length of Stay	Number of Individuals whose Length of Stay exceeds 20 days
Asante Rogue Regional Medical Center (Rogue Valley)	Medford	9.5	33
Bay Area Hospital	Coos Bay	7.0	6
Good Samaritan Regional Medical Center	Corvallis	13.8	36
Unity/Legacy Emmanuel Medical Center	Portland	11.9	127
Peace Health - Sacred Heart Medical Center	Eugene	10.3	42
Providence Portland Medical Center	Portland	11.8	56
Providence St. Vincent Medical Center	Portland	9.3	43
Salem Hospital	Salem	10.2	23
St Charles Health System Sage View	Bend	8.5	19
UBH of Oregon (Cedar Hills)	Portland	10.6	38
	Total:	10.54	423

Appendix E

Count of Individuals with 2+ Readmissions to ED in 6 Months (40a)

2019 Q1 (April 1, 2018 – March 31, 2019)

Coordinated Care Organization	2+ Readmissions within a Six Month Period
Advanced Health	7
AllCare CCO Inc	11
Cascade Health Alliance LLC	3
Columbia Pacific CCO LLC	3
Eastern Oregon CCO LLC	3
Health Share of Oregon	209
Intercommunity Health Network	14
Jackson Care Connect	8
PacificSource Community Solutions Gorge	7
PacificSource Community Solutions Inc	20
PrimaryHealth Josephine County CCO	3
Trillium Community Health Plan	40
Umpqua Health Alliance DCIPA	10
Willamette Valley Community Health	26
Yamhill Community Care	4
Fee-for-Service	145
Total	513

Appendix F Secure Residential Treatment Facility Discharge Disposition Quarter 1: January – March 2019

Disposition	Count
Acute psychiatric hospital	1
AFH	3
AMA	0
Homeless	0
Independent living	1
Jail	0
RTF	3
RTH	1
State Hospital	0
Supported Housing	0
Supportive Housing	0
Grand Total	9

NOTE: This contains data from the first quarter only.