

Oregon Performance Plan
April 2017 Data Report

Metric Category	Metric Number	Performance Outcome		Baseline 2015	Target Year 1 6/30/2017	Quarter 1 ending 3/31/2016	Quarter 2 ending 6/30/2016	Quarter 3 ending 9/30/2016
ACT*	1a	OHA will increase the number of individuals with SPMI served by ACT teams.	1,050 individuals will be served by the end of year one (June 30, 2017).	815	1,050	987	1,074	1,098
	1b		2,000 individuals will be served by the end of year one (June 30, 2018).	<i>Year Two Deliverable</i>				
Crisis	7a	OHA will increase the number of individuals with mobile crisis services, as follows:	During year one (July 1, 2016 to June 30, 2017), 3,500 people will be served by mobile crisis.	3,732	3,500	4,022	4,293	4,383
	7b		During year two (July 1, 2017 to June 30, 2018), 3,700 people will be served by mobile crisis.	<i>Year Two Deliverable</i>				
Crisis*	8c	OHA will track and report the number of individuals receiving a mobile crisis contact.	By the end of year two (June 30, 2018), Oregon will report the number of individuals whose dispositions after contact with mobile crisis result in:	<i>Year Two Deliverable</i>				
			stabilization in a community setting rather than arrest					
			presentation to an emergency department					
		admission to an acute care psychiatric facility						
SH*	14a	OHA's housing efforts will include an increase in the number of individuals with SPMI in supported housing, as follows:	In year one (July 1, 2016 to June 30, 2017), at least 835 individuals will live in supported housing.	442	835	476	666	767
	14b		In year two (July 1, 2017 to June 30, 2018), at least 1,355 individuals will live in supported housing.	<i>Year Two Deliverable</i>				
	14c		In year three (July 1, 2018 to June 30, 2019), at least 2,000 individuals will live in supported housing.	<i>Year Three Deliverable</i>				
PDS	16a	OHA will increase the availability of peer-delivered services, as follows:	By the end of year one (June 30, 2017), OHA will increase the number of individuals who are receiving peer-delivered services by 20%.	2,790	3,348	2,718	2,719	2,797
	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	<i>Year Two Deliverable</i>				
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%	<i>Data Not Available</i>		52.8%
	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.	<i>Year Two Deliverable</i>				
	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.	<i>Year Three Deliverable</i>				
	20e		OSH will track and report discharges that are extended to and occur on the business day following a weekend day or holiday.	<i>Baseline Not Applicable</i>	<i>Measure without Target</i>	<i>Data Not Available</i>		0
OSH	24		At the end of year one (June 30, 2017), OSH will discharge 90% of individuals within 120 days of admission.	37.9%	90.0%	41.0%	41.7%	41.5%
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 bridge, or other community provider.	<i>Data Not Available</i>				

* Quarterly data for metrics marked with a "*" reflect 3 months of data for a given quarter. Quarterly data for other metrics is based on the past year's worth of data, reported on a rolling basis through the end of a given quarter.

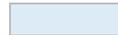
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	29b	By the end of year two, (June 30, 2018), 75% of individuals discharged from an acute care psychiatric facility will receive a warm handoff to a community case manager, peer bridger, or other community provider.	<i>Year Two Deliverable</i>				
	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.	<i>Year Three Deliverable</i>				
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.	79.4%	60.0%	70.7%	70.1%	71.5%
ACUTE	31a	OHA will monitor and report the 30 day rates of readmission, by acute care psychiatric facility.	9.2%	<i>Measure without Target</i>	10.7%	10.6%	10.9%
		OHA will monitor and report the 180 day rates of readmission, by acute care psychiatric facility.	21.3%	<i>Measure without Target</i>	23.5%	23.3%	22.6%
ACUTE	31b 32	Two or more readmissions to acute care psychiatric hospital in a six month period.	<i>Baseline Not Applicable</i>	<i>Data for Process Measure</i>	<i>Data Not Available</i>		
ACUTE	35	OHA will measure the average length of stay of individuals with SPMI in acute care psychiatric facilities, by hospital.	8.9	<i>Measure without Target</i>	9.2	9.2	9.6
	35	OHA will also report the number of individuals with SPMI in each facility whose length of stay exceeds 20 days.	385	<i>Measure without Target</i>	443	426	435
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 hospital.	1,067	<i>Measure without Target</i>	1,226	1,374	1,459
ED	41a	OHA will reduce the rate of visits to general emergency departments by individuals with SPMI for mental health reasons, as follows:	1.54	1.39	1.81	1.92	2.03
	41b	By the end of year two (June 30, 2018), there will be a 20% reduction from the baseline.	<i>Year Two Deliverable</i>				
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.	<i>Year Two Deliverable</i>				
SE*	45a	The number of individuals with SPMI who receive supported employment services who are employed in competitive integrated employment...	1,534	<i>Measure without Target</i>	1,572	1,500	1,517

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	45b		The number of individuals with SPMI who no longer receive supported employment services and are employed without currently receiving supportive services from a supported employment specialist (but who may rely upon natural and other supports).	<i>Baseline Not Applicable</i>	<i>Measure without Target</i>	86	83	114
SRTF	49b (i)	OHA will seek to reduce the length of stay of civilly committed individuals in secure residential treatment facilities, as follows:	By the end of year one (June 30, 2017), there will be a 10% reduction from the baseline. (Mean)	638	574.2	386.7	422.7	409.1
	49b (ii)		By the end of year two (June 30, 2018), there will be a 20% reduction from the baseline.	<i>Year Two Deliverable</i>				
SRTF	49c	OHA will regularly report on the number of civilly committed individuals in SRTFs, their lengths of stay, and the number of individuals who are discharged.	Starting with year two of this Plan (July 1, 2017), OHA will collect data identifying the type of, and the placement to which they are discharged.	<i>Year Two Deliverable</i>				
CJD*	52a	OHA will work to decrease the number of individuals with serious and persistent mental illness who are arrested or admitted to jail based on a mental health reason, by engaging in the following strategies:	OHA will continue to report the number of individuals with SPMI receiving jail diversion services.	<i>Baseline Not Applicable</i>	<i>Measure without Target</i>	1,332	1,387	1,553
	52a		OHA will continue to report the number of reported diversions. (Pre-Arrest)	<i>Baseline Not Applicable</i>	<i>Measure without Target</i>	386	258	284
	52a		OHA will continue to report the number of reported diversions. (Post-Arrest)	<i>Baseline Not Applicable</i>	<i>Measure without Target</i>	895	978	1269
	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.	<i>Baseline Not Applicable</i>	<i>Data Not Available</i>			



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Rates of Readmission by Acute Care Facility (31a)

2016 Q1 (April 1, 2015 – March 31, 2016)

Acute Care Psychiatric Hospital	Location	30-day	180-day
Asante Rogue Regional Medical Center (Rogue Valley)	Medford	10.2%	21.9%
Bay Area Hospital	Coos Bay	13.4%	25.2%
Good Samaritan Regional Medical Center	Corvallis	9.0%	20.8%
*Legacy Emmanuel Medical Center	Portland	12.3%	27.5%
*Legacy Good Samaritan Medical Center	Portland	13.4%	27.9%
*Oregon Health Sciences University	Portland	9.4%	21.6%
Peace Health - Sacred Heart Medical Center	Eugene	6.7%	17.6%
*Portland Adventist Medical Center	Portland	14.0%	27.3%
Providence Portland Medical Center	Portland	11.9%	28.0%
Providence St. Vincent Medical Center	Portland	10.4%	24.5%
Salem Hospital	Salem	10.8%	21.3%
St Charles Health System Sage View	Bend	6.5%	14.9%

*Acute Care Psychiatric Facilities noted above will be closing their psychiatric units and transferring that capacity to Unity Center for Behavioral Health, effective January 1, 2017.

Rates of Readmission by Acute Care Facility (31a)

2016 Q2 (July 1, 2015 – June 30, 2016)

Acute Care Psychiatric Hospital	Location	30-day	180-day
Asante Rogue Regional Medical Center (Rogue Valley)	Medford	12.9%	23.1%
Bay Area Hospital	Coos Bay	12.0%	27.0%
Good Samaritan Regional Medical Center	Corvallis	8.5%	21.8%
*Legacy Emmanuel Medical Center	Portland	12.8%	28.8%
*Legacy Good Samaritan Medical Center	Portland	12.7%	24.4%
*Oregon Health Sciences University	Portland	9.4%	19.9%
Peace Health - Sacred Heart Medical Center	Eugene	8.4%	20.8%
*Portland Adventist Medical Center	Portland	12.3%	26.7%
Providence Portland Medical Center	Portland	12.6%	27.8%
Providence St. Vincent Medical Center	Portland	9.7%	23.7%
Salem Hospital	Salem	9.3%	20.2%
St Charles Health System Sage View	Bend	6.4%	14.8%

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Rates of Readmission by Acute Care Facility (31a)
2016 Q3 (October 1, 2015 – September 30, 2016)

Acute Care Psychiatric Hospital	Location	30-day	180-day
Asante Rogue Regional Medical Center (Rogue Valley)	Medford	14.0%	24.7%
Bay Area Hospital	Coos Bay	10.0%	26.5%
Good Samaritan Regional Medical Center	Corvallis	9.9%	19.8%
*Legacy Emmanuel Medical Center	Portland	10.1%	21.0%
*Legacy Good Samaritan Medical Center	Portland	9.1%	21.5%
*Oregon Health Sciences University	Portland	7.8%	19.4%
Peace Health - Sacred Heart Medical Center	Eugene	9.5%	19.6%
*Portland Adventist Medical Center	Portland	13.9%	26.4%
Providence Portland Medical Center	Portland	13.1%	27.5%
Providence St. Vincent Medical Center	Portland	10.6%	22.5%
Salem Hospital	Salem	9.3%	21.5%
St Charles Health System Sage View	Bend	7.9%	14.5%

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Average Length of Stay by Acute Care Facility (35)
2016 Q1 (April 1, 2015 – March 31, 2016)

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	9.77	45
Bay Area Hospital	Coos Bay	6.19	11
Good Samaritan Regional Medical Center	Corvallis	11.15	39
*Legacy Emmanuel Medical Center	Portland	16.27	35
*Legacy Good Samaritan Medical Center	Portland	6.57	21
*Oregon Health Sciences University	Portland	9.27	32
Peace Health - Sacred Heart Medical Center	Eugene	11.88	64
*Portland Adventist Medical Center	Portland	10.70	81
Providence Portland Medical Center	Portland	9.00	43
Providence St. Vincent Medical Center	Portland	8.02	34
Salem Hospital	Salem	9.39	30
St Charles Health System Sage View	Bend	5.03	8

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Average Length of Stay by Acute Care Facility (35)
2016 Q2 (July 1, 2015 – June 30, 2016)

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	9.30	44
Bay Area Hospital	Coos Bay	5.77	8
Good Samaritan Regional Medical Center	Corvallis	10.98	37
*Legacy Emmanuel Medical Center	Portland	17.07	33
*Legacy Good Samaritan Medical Center	Portland	6.68	22
*Oregon Health Sciences University	Portland	8.41	26
Peace Health - Sacred Heart Medical Center	Eugene	11.21	54
*Portland Adventist Medical Center	Portland	10.54	77
Providence Portland Medical Center	Portland	9.43	43
Providence St. Vincent Medical Center	Portland	8.28	38
Salem Hospital	Salem	9.82	30
St Charles Health System Sage View	Bend	5.68	14

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Average Length of Stay by Acute Care Facility (35)
2016 Q3 (October 1, 2015 – September 30, 2016)

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	8.60	40
Bay Area Hospital	Coos Bay	6.07	10
Good Samaritan Regional Medical Center	Corvallis	11.02	38
*Legacy Emmanuel Medical Center	Portland	16.98	32
*Legacy Good Samaritan Medical Center	Portland	7.94	24
*Oregon Health Sciences University	Portland	8.73	23
Peace Health - Sacred Heart Medical Center	Eugene	12.15	66
*Portland Adventist Medical Center	Portland	11.14	78
Providence Portland Medical Center	Portland	10.13	47
Providence St. Vincent Medical Center	Portland	8.19	32
Salem Hospital	Salem	10.86	31
St Charles Health System Sage View	Bend	5.38	14

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