

Oregon Health Authority – Office of Health Analytics  
 Accountability Metrics for County Financial Assistance Agreements 2013/2015 (10/30/12)

Measure	Domain	Numerator/Denominator	Notes
Access- Number of individuals served	SA, MH, PG	An expected number of served individuals with CFAA funds. For MH, SA, and PG.	Number is TBD
Treatment Service Initiation –Timely follow up after assessments	SA, MH, PG	Number of individuals served within 14 days of index date/Number of individuals with an index service date.	Index is a start date with no services in the prior 60 days.
Treatment Service Engagement – Minimum frequency of contact within 30 days of initiation	SA, MH, PG	Number of individuals who receive two or more services within 30 days of initiation date/ Number of individuals with an index service date.	Index is a start date with no services in the prior 60 days
Facility-based care follow-up- % of individuals with follow-up visit within 7 days after: (1) hospitalization for mental illness; or (2) any facility-based service defined as residential	SA, MH, PG	Number of individuals with a follow up service that starts within seven days of discharge (from hospital or facility based service)/total number of discharges.	Measured separately for hospital and facility based services.  Will be attributed to county of responsibility at discharge.
Readmission rates 30 and 180 day: (1) hospitalization for mental illness; or (2) any facility-based service defined as residential	SA, MH, PG	Number of individuals returning to same of higher level of care within 30 and 180 days/total number of discharges.	Measured separately for hospital and facility based services.
Percent of participants in ITRS reunited with child in DHS custody	SA		Clarify whether or not this is incentivized separately.

Oregon Health Authority – Office of Health Analytics  
 Accountability Metrics for County Financial Assistance Agreements 2013/2015 (10/30/12)

<b>Measure</b>	<b>Domain</b>	<b>Numerator/Denominator</b>	<b>Notes</b>
Functional outcomes – % individuals who report the same or better housing status than 1 year ago	SA, MH, PG	<p>Establish that improved housing is a goal of treatment and/or that the person is homeless or in licensed base facility care.</p> <p>Number of clients who improved housing as indicated by a change from homelessness or licensed facility based care to private housing/total number of individuals looking to improve housing.</p>	Will require a note in COMPASS that indicates housing improvement is a treatment goal.
Functional outcomes – % individuals who report the same or better employment status than 1 year ago	SA, MH, PG	<p>Establish that employment is a goal of treatment.</p> <p>Number of clients who become employed as indicated by a change in employment status/total number of individuals with a goal of becoming employed.</p>	Will require a note in COMPASS that indicates employment is a treatment goal.
Functional outcomes – % individuals who report the same or better school performance status than 1 year ago	SA, MH, PG	<p>Establish that improved school attendance is a goal.</p> <p>Number of clients who improve attendance while in active treatment/total number of</p>	Will require a note in COMPASS that indicates improved attendance is a treatment goal.

Oregon Health Authority – Office of Health Analytics  
 Accountability Metrics for County Financial Assistance Agreements 2013/2015 (10/30/12)

Measure	Domain	Numerator/Denominator	Notes
		individuals with a goal of improved attendance.	
Functional outcomes – % individuals who report decrease in criminal justice involvement	SA, MH, PG	# of individuals who were not arrested after a period of active treatment or two consecutive quarters (whichever comes first) /#of individuals who were referred to treatment from a criminal justice authority.	
Stay at or below a target ADP of individuals for which the county is responsible in the state hospital psychiatric recovery program	MH	Based on a rolling three year share of county civil commitments and share of adult population.	Need clarification about the continuation of AMHI
Maintain an average length of stay on the OSH ready to transition list at or below a pre-determined target	MH	# of people who exceed target LOS/ # of people placed on ready to discharge list of state hospitals.	Need to set target for LOS on ready to place list.
Each LMHA will complete a minimum of 80% of approved prevention goals and objectives	SA, MH, PG	TBD	