

**Priority:** Accountability  
**Program Offer Type:** Support  
**Related Programs:** 25050A, 25054

**Lead Agency:** County Human Services  
**Program Contact:** Joan Rice

**Program Characteristics:**

**Executive Summary**

Program audits mental health agencies, protects mentally ill adults by investigating allegations and providing protective services, monitors mental health contract performance, manages community complaints and incidents, and manages mental health and alcohol treatment records. Program serves 67,000 Verity OHP members, 52 mental health agencies, and 56 residential facilities. Responsible for processing 30,000 division clinical records annually. Program educates Oregon Health Plan members about available mental health services and ensures quality of services. Achieved highest state score for clinical performance improvement project.

**Program Description**

Quality Management protects and supports mentally ill adults and children in Multnomah County through specific services including: coordinating compliance with HIPAA Rules and Verity contracts, managing secure access to client mental health and addiction records, building client outcome measurements, supervising certification process for community mental health, children's services, and Verity programs, auditing and providing technical support to 52 community mental health agencies, coordinating residential quality and tracking approximately 4,000 reported residential incidents(reportable adverse events) annually, assisting with licensing visits and OAR-compliance audits for 56 State-funded residential treatment homes and facilities, investigating complaints about residential care and monitoring the progress of providers who were out of compliance with Oregon Administrative Rules.

**Program Justification**

The Quality Management program links to the Basic Needs and Accountability strategies by monitoring behavioral health care quality satisfaction with care. Program intervenes directly when problems or issues arise. Protective service investigators intervene directly when a mentally ill adult's safety is jeopardized by abuse. Critical incidents, including deaths, are reviewed with providers with the expectation of having outcomes that reduce client self-harm that may result in hospitalization or death.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY05-06)	Current Year Purchased (FY06-07)	Current Year Estimate (FY06-07)	Next Year Offer (FY07-08)
Output	Total clinical reviews protective service/certification/complaints/incidents. *	503	826	745	745
Outcome	Percent of certification reviews conducted within 3 year maximum OAR mandate.	100.0%	100.0%	96.0%	100.0%
Output	Total community mental health provider certification reviews per year.	20	24	33	25
Output	Total MHASD Medical Records Audited For OAR Compliance.	8,020	9,350	9,946	9,950

**Performance Measure - Description**

Total clinical reviews protective service/certification/complaints/incidents include reviews of clinical charts and care provided by community mental health providers conducted by QM staff.  
 Percent certification reviews conducted within 3 year maximum OAR timeframe indicates the number of mental health agency audits conducted and letters written to State requesting new certificates of approval for provider prior to expiration date of the existing certificate.  
 Total community mental health provider reviews per year indicates the count of the number of certificates requested within the measurement year.  
 Total MHASD medical records audited for OAR compliance are internal audits conducted by medical record staff with 10-15% of total records processed annually. Records staff processed and filed 65,813 records this year.

## Legal/Contractual Obligation

Oregon Addictions and Mental Health Division could designate a county even if it did not operate as a Community Mental Health Program. Oregon Revised Statute 430.735 to 430.765. Mandatory reporting policy ORS 430.737. Abuse Reporting 430.743. Abuse Investigation 430.745.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2007	2007	2008	2008
Personnel	\$652,976	\$1,189,793	\$765,802	\$1,073,562
Contracts	\$5,421	\$55,000	\$0	\$73,000
Materials & Supplies	\$48,617	\$0	\$40,343	\$0
Internal Services	\$303,254	\$0	\$312,371	\$0
Subtotal: Direct Exps:	<b>\$1,010,268</b>	<b>\$1,244,793</b>	<b>\$1,118,516</b>	<b>\$1,146,562</b>
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Total GF/non-GF:	<b>\$1,010,268</b>	<b>\$1,244,793</b>	<b>\$1,118,516</b>	<b>\$1,146,562</b>
Program Total:	<b>\$2,255,061</b>		<b>\$2,265,078</b>	
Program FTE	7.33	15.77	9.25	13.85
<b>Program Revenues</b>				
Intergovernmental	\$0	\$1,244,793	\$0	\$1,146,562
Program Revenue for Admin	\$0	\$0	\$0	\$0
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$1,244,793</b>	<b>\$0</b>	<b>\$1,146,562</b>

## Explanation of Revenues

\$515,127 from State Mental Health Grant Award - estimated 07-09 biennium contract.

Oregon Health Plan revenue based on the Governor's budget and December premium rates with 63,605 insured members - \$631,435.

## Significant Program Changes

Last year this program was: #25053, Mental Health and Addiction Services Quality Management