

# MDH - Behavioral Health Administration

## MISSION

The Maryland Department of Health Behavioral Health Administration (BHA) will, through publicly-funded services and support, promote recovery, resiliency, health and wellness for individuals who have or are at risk for emotional, substance related, addictive, and/or psychiatric disorders to improve their ability to function effectively in their communities.

## VISION

The vision of BHA is improved health, wellness, and quality of life for individuals across their life span through a seamless and integrated behavioral health system of care.

## KEY GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

### DEPUTY SECRETARY FOR BEHAVIORAL HEALTH

**Goal 1. The Resident Grievance System (RGS) will conduct timely interviews and referrals (Information/Assistance), thorough investigations (Grievances), and assist residents who refuse medication (Clinical Review Panels) in the ten State-run facilities (seven behavioral health and three developmental disabilities).**

**Obj. 1.1** At least 95 percent of all grievances will be resolved within 65 working days.

| Performance Measures                           | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Est. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of requests for RGS services            | 3,274     | 2,364     | 2,382     | 3,013     | 2,804     | 2,733     | 2,850     |
| Percent of grievances processed within 65 days | 95%       | 98%       | 97%       | 98%       | 92%       | 95%       | 95%       |

**Goal 2. The Resident Grievance System will work toward prevention of grievances by responding to residents' concerns. Grievances filed will be successfully mediated and resolved at the lowest possible level.**

**Obj. 2.1** Grievances will decline as the number of information/assistance interactions provided to residents increases.

**Obj. 2.2** At least 93 percent of all grievances will be closed by Stage 3.

| Performance Measures                          | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Est. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of grievances                          | 410       | 454       | 414       | 516       | 319       | 416       | 417       |
| Number of Information/Assistance interactions | 2,620     | 1,672     | 1,766     | 2,261     | 2,263     | 2,097     | 2,207     |
| Number of Clinical Review Panels              | 244       | 238       | 202       | 236       | 222       | 220       | 226       |
| Percent of grievances resolved by:            |           |           |           |           |           |           |           |
| Stage 1 – Rights Advisor                      | 54%       | 40%       | 37%       | 51%       | 46%       | 45%       | 48%       |
| Stage 2 – Unit Director                       | 10%       | 18%       | 10%       | 9%        | 19%       | 12%       | 13%       |
| Stage 3 – Superintendent                      | 27%       | 33%       | 45%       | 33%       | 32%       | 37%       | 34%       |
| Stage 4 – Central Review Committee            | 9%        | 9%        | 8%        | 7%        | 3%        | 6%        | 5%        |

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## BEHAVIORAL HEALTH ADMINISTRATION

**Goal 1. Increase the abilities of participants with behavioral health disorders to live successfully in the community.**

**Obj. 1.1** By fiscal year 2020, the percentage of adults (18-64 years old) gaining or maintaining employment based on the most recent mental health (MH) outpatient service request in the fiscal year compared to the earliest MH outpatient service request within the same episode of care will be at least 20 percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adults who answered employment question at the earliest and the most recent MH outpatient service request | 33,979    | 35,581    | 37,430    | 39,727    | N/A       | 35,000    | 38,000    |
| Number of adults who answered that they are currently employed at the most recent MH outpatient service request     | 9,981     | 11,191    | 12,556    | 13,300    | N/A       | 10,500    | 12,500    |
| Percent of adults that gained or maintained employment  | 29.4%     | 31.5%     | 33.5%     | 33.5%     | N/A       | 30.0%     | 32.9%     |

**Obj. 1.2** By fiscal year 2020, the percentage of adults (18-64) gaining or maintaining employment based on the most recent substance related disorder (SRD) Level I outpatient and Opioid Maintenance Treatment (OMT) service request in the fiscal year compared to the earliest SRD service request within the same episode of care will be at least 40 percent.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adults who answered the employment question at the earliest and the most recent SRD outpatient service request | 2,625     | 11,710    | 28,058    | 29,114    | N/A       | 25,000    | 26,000    |
| Number of adults who answered they are currently employed at the most recent SRD outpatient OMT service request          | 1,322     | 4,603     | 10,226    | 10,500    | N/A       | 8,750     | 9,250     |
| Percent of adults that gained or maintained employment   | 50.4%     | 39.3%     | 36.4%     | 36.1%     | N/A       | 35.0%     | 35.6%     |

**Obj. 1.3** By fiscal year 2020, the percent of individuals with a decrease in arrest 30 days prior to the service request based on the most recent SRD service request in the fiscal year compared to the earliest SRD service request within the same episode of care will be 10 percent.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of individuals who answered the "arrest 30 days prior" question at the earliest and the most recent SRD service request | 1,472     | 2,538     | 2,633     | 2,250     | N/A       | 1,500     | 1,500     |
| Number of individuals who showed a decrease in the number of arrests   | 1,122     | 1,139     | 1,234     | 1,413     | N/A       | 750       | 750       |
| Percent of adults that showed a decrease in the number of arrests  | 76.2%     | 44.9%     | 46.9%     | 62.8%     | N/A       | 50.0%     | 50.0%     |

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**Obj. 1.4** By fiscal year 2020, at least 70 percent of adults (18-64 years old) receiving MH treatment will report being satisfied with their recovery.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adults who answered the recovery satisfaction question at the most recent MH outpatient service request     | 43,069    | 44,912    | 45,814    | 45,413    | N/A       | 35,000    | 35,500    |
| Number of adults who answered they are satisfied with their recovery at the most recent MH outpatient service request | 31,569    | 33,139    | 34,372    | 34,061    | N/A       | 26,250    | 26,625    |
| Percent of adults who report being satisfied with their recovery  | 73.3%     | 73.8%     | 75.0%     | 75.0%     | N/A       | 75.0%     | 75.0%     |

**Obj. 1.5** By fiscal year 2020 at least 85 percent of adolescents (14-17 years old) receiving MH treatment will report being hopeful about their future.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adolescents answering the “hopeful about my future” question at the most recent MH outpatient service request | 10,054    | 10,759    | 11,216    | 11,541    | N/A       | N/A       | N/A       |
| Number of adolescents who answered they are hopeful about their future at the most recent MH outpatient service request | 8,738     | 9,196     | 9,643     | 9,799     | N/A       | N/A       | N/A       |
| Percent of adolescents who report being hopeful about their future  | 86.9%     | 85.5%     | 86.0%     | 84.9%     | N/A       | N/A       | N/A       |

**Obj. 1.6** By fiscal year 2020, at least 80 percent of adults (18-64 years old) receiving SRD treatment will report being satisfied with their recovery.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adults who answered the recovery satisfaction question at the most recent SRD outpatient service request     | N/A       | 29,590    | 31,151    | 30,573    | N/A       | N/A       | N/A       |
| Number of adults who answered they are satisfied with their recovery at the most recent SRD outpatient service request | N/A       | 23,983    | 25,405    | 24,979    | N/A       | N/A       | N/A       |
| Percent of adults that are satisfied with their recovery   | N/A       | 81.1%     | 81.6%     | 81.7%     | N/A       | N/A       | N/A       |

**Obj. 1.7** By fiscal year 2020, at least 90 percent of adolescents (14 - 17 years old) receiving SRD Level I outpatient and OMT treatment will report being hopeful about their future.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adolescents who answered the hopeful about the future question at the most recent SRD outpatient service request | N/A       | 402       | 312       | 239       | N/A       | N/A       | N/A       |
| Number of adolescents who answered they are hopeful about their future at the most recent SRD outpatient service request   | N/A       | 369       | 294       | 220       | N/A       | N/A       | N/A       |
| Percent of adolescents who report being hopeful about their future   | N/A       | 91.8%     | 94.2%     | 92.1%     | N/A       | N/A       | N/A       |

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**Obj. 1.8** The percentage of Public Behavioral Health System (PBHS) service recipients readmitted to the same or different mental health inpatient treatment facility within 30 days of discharge will not exceed 18 percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent of PBHS service recipients who are readmitted to the same or different mental health inpatient treatment facility within 30 days of discharge | N/A       | N/A       | N/A       | N/A       | 18.3%     | 18.0%     | 18.0%     |
| Total number of PBHS service recipients discharged from an inpatient treatment facility following an admission for a mental health related condition  | N/A       | N/A       | N/A       | N/A       | 19,521    | 21,000    | 23,000    |

**Obj. 1.9** The percentage of PBHS substance use disorder (SUD) service recipients readmitted to the same or different SUD Residential Treatment facility within 30 days of discharge will not exceed 20 percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent of PBHS SUD service recipients readmitted to the same or different SUD Residential Treatment facility within 30 days of discharge | N/A       | N/A       | N/A       | N/A       | 11.2%     | 10.0%     | 10.0%     |
| Total number of PBHS SUD service recipients discharged from Residential Treatment   | N/A       | N/A       | N/A       | N/A       | 15,020    | 16,500    | 17,300    |

**Goal 2. Maintain and increase the number of individuals treated in the Public Behavioral Health System (PBHS).**

**Obj. 2.1** By fiscal year 2020, the number of individuals receiving behavioral health services will increase by 7 percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of individuals treated in the PBHS in the fiscal year          | 243,690   | 260,213   | 275,667   | 291,740   | 289,027   | 327,799   | 327,799   |
| Change in the number of individuals treated from previous fiscal year | N/A       | 16,523    | 15,454    | 16,073    | -2,713    | 38,772    | 0         |
| Percent change from previous fiscal year                              | N/A       | 6.8%      | 5.9%      | 5.8%      | -0.9%     | 13.4%     | 0.0%      |

**Obj. 2.2** By fiscal year 2020, the number of individuals receiving MH services will increase by 5 percent.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of individuals that received MH services in the PBHS in the fiscal year | 192,809   | 200,959   | 211,325   | 225,278   | 222,966   | 238,795   | 238,795   |
| Change in the number of individuals treated from previous fiscal year          | N/A       | 8,150     | 10,366    | 13,953    | -2,312    | 15,829    | 0         |
| Percent change from previous fiscal year                                       | N/A       | 4.2%      | 5.2%      | 6.6%      | -1.0%     | 7.1%      | 0.0%      |

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**Obj. 2.3** By fiscal year 2020, the number of individuals receiving SRD services will increase by 7 percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of individuals that received SRD services in the PBHS in the fiscal year | 90,731    | 103,115   | 110,398   | 116,536   | 122,219   | 130,940   | 130,940   |
| Change in the number of individuals treated from previous fiscal year           | N/A       | 12,384    | 7,283     | 6,138     | 5,683     | 8,721     | 0         |
| Percent change from previous fiscal year  | N/A       | 13.6%     | 7.1%      | 5.6%      | 4.9%      | 7.1%      | 0.0%      |

**Obj. 2.4** By fiscal year 2020, the number of dually diagnosed individuals receiving behavioral health services will increase by 10 percent.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of individuals that received services in the PBHS in the fiscal year that were dually diagnosed | 77,749    | 85,657    | 91,914    | 98,624    | 91,526    | 98,700    | 102,000   |
| Change in the number of dually diagnosed individuals treated from previous fiscal year                 | N/A       | 7,908     | 6,257     | 6,710     | -7,098    | 7,174     | 3,300     |
| Percent change from previous fiscal year   | N/A       | 10.2%     | 7.3%      | 7.3%      | -7.2%     | 7.8%      | 3.3%      |

**Obj. 2.5** The percentage of PBHS recipients receiving Medication Assisted Treatment (MAT) services will increase annually by at least three percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent change in the number of PBHS recipients receiving MAT services                          | N/A       | N/A       | N/A       | N/A       | -2.4%     | 6.0%      | 6.0%      |
| Number of PBHS service recipients receiving PBHS MAT services in current fiscal year            | N/A       | N/A       | N/A       | N/A       | 33,605    | 35,621    | 37,758    |
| Change in number of PBHS service recipients receiving PBHS MAT services in previous fiscal year | N/A       | N/A       | N/A       | N/A       | -813      | 2,016     | 2,137     |

**Obj. 2.6** The percentage of mental health inpatient treatment recipients who receive follow up mental health care within seven days of discharge will increase by two percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent of PBHS mental health inpatient treatment recipients who receive follow-up mental health care within seven days of discharge from an inpatient facility | N/A       | N/A       | N/A       | N/A       | 48.4%     | 48.5%     | 48.6%     |
| Total number of PBHS service recipients discharged from mental health inpatient treatment facilities  | N/A       | N/A       | N/A       | N/A       | 19,521    | 20,000    | 20,500    |

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**Obj. 2.7** The percent of PBHS Substance Use Disorder (SUD) service recipients who receive follow-up treatment within seven days of discharge from a SUD treatment facility will increase annually by two percent.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Percent of PBHS Substance Use Disorder (SUD) service recipients who Received Follow-up treatment within 7 days of discharge from SUD Residential Treatment facility | N/A       | N/A       | N/A       | N/A       | 45.7%     | 45.8%     | 46.0%     |
| Total number of PBHS SUD service recipients discharged from SUD Residential Treatment   | N/A       | N/A       | N/A       | N/A       | 15,020    | 16,000    | 17,000    |

**Goal 3. Implement utilization of the latest technology to expand access to behavioral health services in the least restrictive settings.**

**Obj. 3.1** By fiscal year 2020, at least 8 percent of individuals receiving outpatient behavioral health services in rural areas will receive tele-health services.

| Performance Measures   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Unduplicated number of individuals served in outpatient setting in rural areas     | 15,371    | 17,740    | 18,728    | 19,815    | 18,972    | 19,000    | 19,500    |
| Number of individuals that received tele-behavioral health services in rural areas | 1,306     | 1,996     | 2,100     | 2,079     | 7,734     | 7,750     | 7,800     |
| Percent receiving tele-behavioral health services                                  | 8.5%      | 11.3%     | 11.2%     | 10.5%     | 40.8%     | 40.8%     | 40.0%     |

**Goal 4. Promote health and wellness initiatives in the Behavioral Health System.**

**Obj. 4.1** By fiscal year 2020, less than 6 percent of adolescents (11-17 years old) receiving MH treatment will report smoking.

**Obj. 4.2** By fiscal year 2020, less than 45 percent of adults (18-64 years old) receiving MH treatment will report smoking.

| Performance Measures  | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Number of adolescents receiving MH outpatient services who answered the smoking question  | 24,539    | 25,936    | 28,332    | 30,899    | N/A       | N/A       | N/A       |
| Number of adolescents receiving MH outpatient services who answered "yes" that they smoke | 1,070     | 917       | 918       | 734       | N/A       | N/A       | N/A       |
| Percent of adolescents receiving MH treatment who report smoking                          | 4.4%      | 3.5%      | 3.2%      | 2.4%      | N/A       | N/A       | N/A       |
| Number of adults receiving MH outpatient services who answered the smoking question       | 61,896    | 66,264    | 68,698    | 73,726    | N/A       | N/A       | N/A       |
| Number of adults receiving MH outpatient services who answered "yes" that they smoke      | 25,515    | 26,485    | 25,271    | 24,542    | N/A       | N/A       | N/A       |
| Percent of adults receiving MH treatment who report smoking                               | 41.2%     | 40.0%     | 36.8%     | 33.3%     | N/A       | N/A       | N/A       |

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**Obj. 4.3** By fiscal year 2020, less than 35 percent of adolescents (11-17 years old) receiving SRD Level I outpatient and methadone maintenance services will report smoking.

**Obj. 4.4** By fiscal year 2020, less than 70 percent of adults (18-64 years old) receiving SRD Level I outpatient and methadone maintenance services will report smoking.

| <b>Performance Measures</b>  | <b>2016 Act.</b> | <b>2017 Act.</b> | <b>2018 Act.</b> | <b>2019 Act.</b> | <b>2020 Act.</b> | <b>2021 Est.</b> | <b>2022 Est.</b> |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| Number of adolescents receiving SRD Level I outpatient and OMT services who answered the smoking question  | 946              | 820              | 698              | 604              | N/A              | N/A              | N/A              |
| Number of adolescents receiving SRD Level I outpatient and OMT services who answered "yes" that they smoke | 283              | 255              | 184              | 153              | N/A              | N/A              | N/A              |
| Percent of adolescents receiving SRD treatment who report smoking  | 29.9%            | 31.1%            | 26.4%            | 25.3%            | N/A              | N/A              | N/A              |
| Number of adults receiving SRD Level I outpatient and OMT services who answered the smoking question       | 11,841           | 42,073           | 45,772           | 47,361           | N/A              | N/A              | N/A              |
| Number of adults receiving SRD Level I outpatient and OMT services who answered "yes" that they smoke      | 8,134            | 29,360           | 32,525           | 32,366           | N/A              | N/A              | N/A              |
| Percent of adults receiving SRD treatment who report smoking   | 68.7%            | 69.8%            | 71.1%            | 68.3%            | N/A              | N/A              | N/A              |

**Obj. 4.5** The percentage of PBHS MH service recipients with three or more BH related Emergency Department (ED) visits will not exceed 12 percent.

**Obj. 4.6** The percentage of PBHS SUD service recipients with three or more BH related ED visits will not exceed 12 percent.

| <b>Performance Measures</b>   | <b>2016 Act.</b> | <b>2017 Act.</b> | <b>2018 Act.</b> | <b>2019 Act.</b> | <b>2020 Act.</b> | <b>2021 Est.</b> | <b>2022 Est.</b> |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| Percent of PBHS MH service recipients with three or more behavioral health related ED visits  | N/A              | N/A              | N/A              | N/A              | 2.1%             | 2.1%             | 2.0%             |
| Total number of PBHS MH service recipients  | N/A              | N/A              | N/A              | N/A              | 222,966          | 238,795          | 238,795          |
| Percent of PBHS SUD service recipients with three or more behavioral health related ED visits | N/A              | N/A              | N/A              | N/A              | 1.1%             | 1.1%             | 1.0%             |
| Total number of PBHS SUD service recipients   | N/A              | N/A              | N/A              | N/A              | 122,219          | 130,940          | 130,940          |

# MDH - Behavioral Health Administration

## STATE PSYCHIATRIC FACILITIES

Goal 1. Improve psychiatric outcomes for all patients.

Obj. 1.1 To maintain patient satisfaction rates of at least 80 percent (as reported in patient satisfaction surveys).

| Performance Measures - Satisfaction Survey | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Thomas B. Finan Hospital Center            | 91%       | 88%       | 81%       | 90%       | 82%       | 90%       | 90%       |
| RICA Baltimore                             | 88%       | 98%       | 89%       | 97%       | 93%       | 94%       | 94%       |
| Eastern Shore Hospital Center              | N/A       | 45%       | 48%       | 66%       | 60%       | 61%       | 64%       |
| Springfield Hospital Center                | 76%       | 74%       | N/A       | 74%       | 68%       | 75%       | 75%       |
| Spring Grove Hospital Center               | 72%       | 84%       | 84%       | 87%       | 43%       | 50%       | 50%       |
| Clifton T. Perkins Hospital Center         | 100%      | 52%       | 59%       | 75%       | 40%       | 60%       | 60%       |
| John L. Gildner RICA                       | 100%      | 96%       | 83%       | 75%       | 90%       | 75%       | 76%       |

Obj. 1.2 The percent of patients discharged on two or fewer antipsychotic medications will exceed 85 percent.

| Performance Measures - Discharge   | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Thomas B. Finan Hospital Center    | N/A       | N/A       | N/A       | 96%       | 98%       | 100%      | 100%      |
| Eastern Shore Hospital Center      | N/A       | N/A       | N/A       | 99%       | 100%      | 100%      | 100%      |
| Springfield Hospital Center        | N/A       | N/A       | N/A       | 98%       | 83%       | 97%       | 97%       |
| Spring Grove Hospital Center       | N/A       | N/A       | N/A       | 94%       | 80%       | 82%       | 80%       |
| Clifton T. Perkins Hospital Center | N/A       | N/A       | N/A       | 99%       | 98%       | 98%       | 98%       |

Obj. 1.3 The elopement rate for RICA facilities will not exceed two per 1,000 patient days.

| Performance Measures - Elopement | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|----------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| RICA Baltimore                   | N/A       | N/A       | N/A       | 0.08      | 0.24      | 0.00      | 0.00      |
| John L. Gildner RICA             | N/A       | N/A       | N/A       | 2.23      | 2.47      | 1.73      | 1.60      |



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**Goal 2. Provide treatment and care in the least restrictive and least intensive setting consistent with safety needs.**

**Obj. 2.1** The rate of seclusions will not exceed 0.75 hours for every 1,000 inpatient hours.

| Performance Measures - Seclusion Hours | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Thomas B. Finan Hospital Center        | 0.06      | 0.19      | 0.06      | 0.12      | 0.14      | 0.11      | 0.11      |
| RICA Baltimore                         | 0.42      | 0.28      | 0.57      | 0.55      | 0.36      | 0.36      | 0.36      |
| Eastern Shore Hospital Center          | 0.53      | 0.81      | 0.36      | 0.68      | 0.26      | 0.27      | 0.26      |
| Springfield Hospital Center            | 0.07      | 0.20      | 0.07      | 0.10      | 0.09      | 0.09      | 0.09      |
| Spring Grove Hospital Center           | 0.00      | 0.00      | 0.00      | 0.00      | 0.00      | 0.00      | 0.00      |
| Clifton T. Perkins Hospital Center     | 0.02      | 0.02      | 0.02      | 0.01      | 0.01      | 0.01      | 0.01      |
| John L. Gildner RICA                   | 0.01      | 0.01      | 0.02      | 0.00      | 0.00      | 0.00      | 0.00      |

**Obj. 2.2** The rate of restraints will not exceed 0.75 hour for every 1,000 inpatient hours.

| Performance Measures - Restraint Hours | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Thomas B. Finan Hospital Center        | 0.14      | 0.15      | 0.04      | 0.04      | 0.05      | 0.03      | 0.03      |
| RICA Baltimore                         | 0.03      | 0.04      | 0.09      | 0.04      | 0.05      | 0.04      | 0.04      |
| Eastern Shore Hospital Center          | 1.83      | 0.10      | 0.07      | 0.01      | 0.02      | 0.02      | 0.01      |
| Springfield Hospital Center            | 1.30      | 1.44      | 0.76      | 1.03      | 0.80      | 0.72      | 0.72      |
| Spring Grove Hospital Center           | 0.12      | 0.12      | 0.14      | 0.09      | 0.12      | 0.10      | 0.09      |
| Clifton T. Perkins Hospital Center     | 1.27      | 2.36      | 0.86      | 1.58      | 1.62      | 1.44      | 1.44      |
| John L. Gildner RICA                   | 0.17      | 0.12      | 0.14      | 0.15      | 0.16      | 0.12      | 0.13      |

**Goal 3. Provide a safe and therapeutic environment for patients and staff.**

**Obj. 3.1** The incidence rate of patient to staff assault will be less than one per 1,000 patient days.

| Performance Measures - Patient Injuries | 2016 Act. | 2017 Act. | 2018 Act. | 2019 Act. | 2020 Act. | 2021 Est. | 2022 Est. |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Thomas B. Finan Hospital Center         | N/A       | N/A       | N/A       | N/A       | 0.06      | 0.06      | 0.06      |
| RICA Baltimore                          | N/A       | N/A       | N/A       | N/A       | 0.75      | 0.75      | 0.75      |
| Eastern Shore Hospital Center           | N/A       | N/A       | N/A       | N/A       | 0.87      | 1.30      | 1.30      |
| Springfield Hospital Center             | N/A       | N/A       | N/A       | N/A       | 0.70      | 0.70      | 0.70      |
| Spring Grove Hospital Center            | N/A       | N/A       | N/A       | N/A       | 0.01      | 0.01      | 0.01      |
| Clifton T. Perkins Hospital Center      | N/A       | N/A       | N/A       | N/A       | 0.82      | 0.80      | 0.75      |
| John L. Gildner RICA                    | N/A       | N/A       | N/A       | N/A       | 6.54      | 3.10      | 2.00      |

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# MDH - Behavioral Health Administration

**Obj. 3.2** The patient injury rate will not exceed 1.0 per 1,000 registered bed days.

| <b>Performance Measures - Patient Injuries</b> | <b>2016 Act.</b> | <b>2017 Act.</b> | <b>2018 Act.</b> | <b>2019 Act.</b> | <b>2020 Act.</b> | <b>2021 Est.</b> | <b>2022 Est.</b> |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| Thomas B. Finan Hospital Center                | 0.03             | 0.04             | 0.02             | 0.01             | 0.01             | 0.01             | 0.01             |
| RICA Baltimore                                 | 0.06             | 0.08             | 0.03             | 0.00             | 0.05             | 0.01             | 0.01             |
| Eastern Shore Hospital Center                  | 0.08             | 0.12             | 0.47             | 0.00             | 0.07             | 0.00             | 0.00             |
| Springfield Hospital Center                    | 0.08             | 0.22             | 0.10             | 0.08             | 0.12             | 0.10             | 0.10             |
| Spring Grove Hospital Center                   | 0.19             | 0.18             | 0.19             | 0.13             | 0.12             | 0.10             | 0.08             |
| Clifton T. Perkins Hospital Center             | 0.04             | 0.05             | 0.08             | 0.08             | 0.08             | 0.07             | 0.07             |
| John L. Gildner RICA                           | 0.00             | 0.00             | 0.00             | 0.06             | 0.00             | 0.07             | 0.06             |

**Goal 4. The BHA hospitals will be compliant with legislative mandates regarding court-ordered placements.**

**Obj. 4.1** The percent of Not Criminally Responsible (NCR) and Incompetent to Stand Trial (IST) court orders admitted within ten business days will be at 100 percent.

**Obj. 4.2** The average cycle time for the admission of Not Criminally Responsible (NCR) and Incompetent to Stand Trial (IST) court orders will be less than ten business days.

**Obj. 4.3** The percent of placement of 8-507 orders within 21 business days will be at 100 percent. 8-507 placements for treatment are received by the State's Institutes for Mental Disease (IMDs).

**Obj. 4.4** The average cycle time for the admission of 8-507 court orders will be less than twenty-one business days.

| <b>Performance Measures</b>   | <b>2016 Act.</b> | <b>2017 Act.</b> | <b>2018 Act.</b> | <b>2019 Act.</b> | <b>2020 Act.</b> | <b>2021 Est.</b> | <b>2022 Est.</b> |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| Percent of court orders for NCR and IST patients admitted within 10 business days | N/A              | N/A              | N/A              | 100%             | 77%              | 100%             | 100%             |
| Average admission cycle time for NCR and IST patients                             | N/A              | N/A              | 8.40             | 7.80             | 14.58            | 10.00            | 10.00            |
| Percent of placement of 8-507 orders within 21 business days                      | N/A              | N/A              | 99%              | 100%             | 100%             | 100%             | 100%             |
| Average admission cycle time for 8-507 court orders                               | N/A              | N/A              | 16.00            | 11.00            | 10.00            | 10.00            | 10.00            |