



Measures Commentary



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Report No. 99-22

Department of Children and Families Adult Community Mental Health Proposed Performance Measures for Fiscal Year 2000-01

Background

The Adult Community Mental Health Program's mission is to support adults with serious mental illness in the community. In accordance with its mission, the program provides case management, outpatient, community support, inpatient, and residential services. The program provides services to three target populations:

- adults with severe and persistent mental illness are persons whose chronic psychiatric disabilities make them eligible for disability income;
- adults in mental health crisis are persons who do not have a chronic psychiatric disability but, due to a severe stressful event, meet the admission criteria of a psychiatric facility; and
- adults with forensic involvement are persons charged with a criminal offense or adjudicated as incompetent for court proceedings and placed by the court in a community mental health program as a condition of their release from jail.

As required by law, the Department of Children and Families is proposing a set of performance measures for use in the Appropriations Act for 2000-2001. This report presents the Office of Program Policy Analysis and Government Accountability's assessment of and recommendations for improving these proposed measures.

Recommended Program Performance Measures

Agency accountability systems should include two levels of performance measures. First, they should include policy-level outcome and output measures that help the Legislature assess program effectiveness and make budget decisions. These measures should be included in agencies' legislative budget requests and the appropriations act. Second, agencies should maintain program-level measures that provide more detailed information about interim outcome measures that can be tied more closely to program operations. Agencies should inform the Legislature about the internal measures they are keeping and make data for the measures available for legislative review as needed.

In preparing for the Governor's Fiscal Year 2000-2001 budget proposal, the department assessed current program performance measures in an effort to provide a concise list of useful indicators (see the department's Draft Model of Performance Measures for Mental Health Institutions available on their web site). The department discusses the strengths and weaknesses of current performance measures in Exhibit D-2B of their Fiscal Year 2000-2001 Legislative Budget Request. We agree with the department's proposed outcome and output measures for the appropriations act (see Exhibits 1). Their proposal would reduce the number of measures in the appropriations act from the 19 in the Fiscal Year 1999-2000 implementing appropriations act to one outcome, one output, and one efficiency measure for the three target groups of the Adult Community Mental Health Program. With some modifications, the department proposes to keep the remaining Fiscal Year 1999-2000 measures internally to be routinely published and made available to legislative committees. Exhibit 2 has our recommendations for these internal measures.

The department's proposed internal measures do not include a measure that indicates how well community mental health services divert persons from the state mental health institutions. We recommend the department routinely publish the rate of adults with severe and persistent mental illness admitted to a state mental health institution per

1,000 served. Because the Adult Community Mental Health Program and Mental Health Institution Programs both provide services to enable persons with severe mental illness to live in the community, the Legislature may want to consider establishing performance indicators for a combined program. For example, the average annualized number of days in the community could be modified to include persons in mental health institutions.

Exhibit 1
OPPAGA Agrees with Outcome and Output Measures
for Inclusion in the Appropriations Act for Fiscal Year 2000-01

Target Group	Department Proposed Outcome Measures	OPPAGA Comments	OPPAGA's Recommended Outcome Measures
Adults with severe and persistent mental illness	Annualized average number of days spent in the community		OPPAGA agrees
Adults in mental health crisis	Percentage of functioning that individuals changed during the year	The proposed indicator replaces the average functional level change score based on the Global Assessment of Functioning scale. The change allows the department flexibility in what functional assessment tool can be used. Scores from different tools will be standardized before calculating the average percentage change in functioning.	OPPAGA agrees
Adults with forensic involvement	Percentage of persons on conditional release who are recommitted		OPPAGA agrees
All target groups	Number served		OPPAGA agrees
All target groups	Cost per person served		OPPAGA agrees

Exhibit 2
OPPAGA Agrees with the Department's Proposals and Recommends One Additional Measure

Target Group	Department Proposed Outcome Measures	OPPAGA Comments	OPPAGA's Recommended Outcome Measures
All target groups	Percentage of adults who improve functioning	The proposed indicator replaces the average functional level based on Global Assessment of Functioning scale. The proposed indicator is a better measure because it reflects improvement in client functioning.	OPPAGA agrees
Adults with severe and persistent mental illness	Annualized average number of days worked for pay		OPPAGA agrees
Adults with severe and persistent mental illness	Percentage of clients who worked during the year		OPPAGA agrees
Adults with severe and persistent mental illness	Average monthly income	We recommend renaming this indicator because financial resources for clients primarily come from public assistant, not paid employment.	OPPAGA agrees
Adults in mental health crisis	Percentage not readmitted to a crisis stabilization unit within 30 days		OPPAGA agrees
Adults with severe and persistent mental illness		We recommend an indicator for how well community mental health services divert persons from admission to a state mental health institution.	Rate of adults admitted to a state mental health institution per 1,000 served.

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