Coordinated System of Care (CSoC) Dashboard Quality Assurance Committee - 8/15/2022

Outcomes: Systems Level and CSoC-Specific								
				7/1/21- 9/30/21		1/1/22- 3/31/22	4/1/22- 6/30/22	
Outcome	Report	Goal of Monitoring	Specific Metrics					
Reduce OOH Placements	CSoC Youth: Children in Restrictive Settings (CSoC report QM3)	Monitor over time for functioning of CSoC, stable or reduced numbers	Percent of <u>CSoC members</u> who were served in a psychiatric hospital during the quarter	5.01%	5.34%	5.81%	6.45%	
	CSoC Youth: Average Length of Stay (ALOS) for children in restrictive settings (CSoC report QM3)	Monitor over time for functioning of CSoC, stable or reduced numbers	Average Length of Stay (ALOS) for <u>CSoC members</u> in psychiatric hospitalization, in days	7.53	6.67	6.20	7.15	
	CSoC Youth: Living Situation at Discharge (CSoC report QM9)	Direct measure of the ability of CSoC to maintain youth in the home and community and avoid out of home placement	Percent of youth whose living situation at discharge from CSoC is a Home and Community Based (HCB) setting	93.43%	94.05%	92.99%	94.95%	
Improve Outcomes	CSoC Youth: Child and Adolescent Needs and Strengths (CANS) Outcomes	Direct measure of the ability of CSoC to improve youths' clinical functioning	Average decrease (intake to discharge) on standardized tool measuring clinical functioning (CANS)	-16.07	-16.96	-16.82	-17.15	
	(CSoC report QM8)		Percent of youth showing improved clinical functioning (from intake to discharge) on standardized tool (CANS)	72.24%	77.17%	74.46%	79.08%	
			Compliance Percentage (% youth with intake and discharge CANS so improvement can be calculated)	98.23%	98.02%	96.62%	95.60%	
	CSoC Youth: Improved School Functioning (CSoC report QM10)	Direct measure of the ability of CSoC to improve youths' school functioning	Percent of youth showing improved school functioning (intake to discharge) on standardized tool (CANS: School Module)	60.00%	69.70%	62.50%	66.11%	

Please note: Data from previous reporting periods available upon request.

Coordinated System of Care (CSoC) Dashboard Quality Assurance Committee - 8/15/2022

				Reporting period			
rocess ndicator	Report	Goal of Monitoring	Specific Metrics	7/1/21- 9/30/21		1/1/22- 3/31/22	4/1/22- 6/30/22
	CSoC Youth: Access to Wraparound	Ensure that Wraparound is accessible and responsive to immediate needs.	Percent of CSoC members for whom: Timely referral standard was met	97.49%	97.25%	98.45%	98.64%
	(CSoC report QM12)		Timely first contact standard was met	96.35%	94.00%	95.83%	96.80%
			Timely face-to-face contact was met	74.45%	75.80%	76.63%	70.71%
	CSoC Youth: Enrollment and Agency Involvement (CSoC report QM6)	Monitor number of youth in CSoC and agency involvement.	Total number of CSoC Enrollees	2,498	2,522	2,646	2,600
			Number of CSoC Enrollees involved with	239	235	246	240
			Juvenile Justice	(9.57%)	(9.32%)	(9.30%)	(9.23%
			Number of CSoC Enrollees involved with DCFS	283	290	332	315
Increase				(11.33%)	(11.50%)	(12.55%)	(12.129
Jtilization			Number of CSoC Enrollees involved with	53	33	28	42
of HCBS			Juvenile Justice and DCFS	(2.12%)	(1.31%)	(1.06%)	(1.62%
	CSoC Youth: Utilization of Natural Supports (CSoC report QM13)	Ensure Wraparound is helping families build sustainable teams with natural supports.	Percent of fully enrolled CSoC members with at least one natural/informal support person on their Plan of Care (POC)	90.2%	90.3%	88.8%	89.8%
	receiving services in sufficient amount,	Ensure that CSoC members are able to access the services that their CFT determined they need.	Percent of members receiving services in sufficent amount, frequency, and duration:				
			Month 1 of reporting period			92.58%	89.95%
			Month 2 of reporting period	94.91%	93.14%	90.80%	90.64%
			Month 3 of reporting period	93.66%	93.87%	92.24%	92.34%

Please note: Data from previous reporting periods available upon request.

Coordinated System of Care (CSoC) Dashboard Quality Assurance Committee - 8/15/2022

				Coordination Reporting Period					
Outcome	Process Indicator	Report	Goal of Monitoring	Specific Metric Range of Compliance Rates			1/1/21 – 12/31/21		
	High-Fidelity Wraparound	Fidelity to Practice		Family Voice & Choice Key Element Items			99.14% to 99.86%		
	Wiaparounu	1	•				96.20% to 99.93%		
				Needs-Based Key Element Items			93.39% to 98.92%		
				Outcomes-Based Key Element Items Natural & Community Supports Key Element Items			87.68% to 98.35%		
							89.24% to 99.35%		
				Effective Teamwork Key Ele		ment Items		98.28% to 99.78%	
Reduce OOH						Reportir	g Period		
Placements Manage Costs					Baseline	Interim Period	Interim Period	Final Period	
Improve	Process Indicator	Report	Goal of Monitoring	Specific Metric	1/1/18-12/31/18	1/1/19-12/31/19	1/1/20-12/31/20	1/1/21-12/31/21	
Outcomes	7-Day Follow-Up	Performance	Increase the	The percent of acute	Numerator:	Numerator:	Numerator:	Numerator:	
Outcomes	Hospitalization	Improvement Project	percentage of youth	inpatient psychiatric	213	199	176	198	
	(FUH) Rate	(PIP): Measuring	attending follow-up	hospitalization discharges	Denominator:	Denominator:	Denominator:	Denominator:	
		Hospitalization Follow	hospitalization	with a valid FUH service	405	398	380	423	
		Up Practices	appointments within	within 1 to 7 days of the					
			seven days of discharge	acute inpatient discharge	Rate = 52.59%	Rate = 50.00%	Rate = 46.32%	Rate = 46.81%	
	30-Day Follow-Up	Performance	Increase the	The percent of acute	Numerator:	Numerator:	Numerator:	Numerator:	
	Hospitalization	Improvement Project	percentage of youth	inpatient psychiatric	294	277	242	282	
	(FUH) Rate	(PIP): Measuring	attending follow-up	hospitalization discharges	Denominator:	Denominator:	Denominator:	Denominator:	
		Hospitalization Follow	hospitalization	with a valid FUH service	405	398	380	423	
		Up Practices	appointments within	within 1 to 30 days of the					
		1	i	acute inpatient discharge	Rate = 72.59%	Rate = 69.60%	Rate = 63.68%	Rate = 66.67%	

Please note: Data from previous reporting periods available upon request