Outcomes: Systems Level and CSoC-Specific							Specific Metrics Goal of Monitoring Goal of Monitoring Fercent of CSoC members (under 22) who were served in a psychiatric hospital during the quarter Official CSoC report QM3) For under 22) in psychiatric hospitalization, in days. For under 22) in psychiatric hospitalization, in days. For under 22) in psychiatric hospitalization at discharge for CSoC to maintain youth in the home and community and avoid out of home placement For under CSoC report QM90 For under 22) in psychiatric hospitalization, in days. For under 22) in		
Outcome	Report	Goal of Monitoring		Reporting Period					
			Specific Metrics	1/1/19-3/31/19	4/1/19-6/30/19	7/1/19-9/30/19	10/1/19-12/31/19		
	CSoC Youth: Children in	Monitor over time for functioning	Percent of <u>CSoC members</u> (under 22) who were served						
	Restrictive Settings	of CSoC, stable or reduced	in a psychiatric hospital during the quarter						
	(CSoC report QM3)	numbers		4.99%	3.93%	4.03%	4.51%		
Reduce OOH Placements	CSoC Youth: ALOS for	Monitor over time for functioning	Average Length of Stay (ALOS) for CSoC members						
	children in restrictive	of CSoC, stable or reduced	(under 22) in psychiatric hospitalization, in days.						
	settings (CSoC report	numbers							
	QM3)			7.13	7.10	7.12	7.60		
	CSoC Youth: Living	Direct measure of the ability of	Percent of youth whose living situation at discharge						
	Situation at Discharge	CSoC to maintain youth in the	from CSoC is a family home.						
	(CSoC report QM09)	home and community and avoid							
		out of home placement		92.21%	94.77%	93.73%	91.99%		
	CSoC Youth: CANS	Direct measure of the ability of	Average decrease (intake to discharge) on standardized						
	Outcomes (CSoC report	CSoC to improve youths' clinical	tool measuring clinical functioning (CANS)						
	QM8)	functioning		-17.16	-17.23	-14.78	-15.89		
			Percent of youth showing improved clinical functioning						
l.a			(from intake to discharge) on standardized tool (CANS)						
Improve Outcomes				76.79%	75.00%	73.10%	74.41%		
			Compliance Percentage (% youth with intake and						
			discharge CANS so improvement can be calculated)	95.92%	95.78%	96.59%	98.04%		
	CSoC Youth: Improved	Direct measure of the ability of	Percent of youth showing improved school functioning						
	School Functioning	CSoC to improve youths' school	(intake to discharge) on standardized tool (CANS:						
	(CSoC report QM10)	functioning	School Module)	68.75%	65.21%	62.72%	66.67%		

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

Coordinated System of Care (CSoC) Dashboard Quality Assurance Committee - 2/17/2020

rocess	Report	Goal of monitoring		Reporting period					
Indicator			Specific Metrics	1/1/19-3/31/19	4/1/19-6/30/19	7/1/19-9/30/19	10/1/19-12/31/19		
	CSoC Youth: Access to	Ensure that	Percent of CSoC members for whom:	27.53%	34.04%	69.84%	73.09%		
	Wraparound (CSoC report	Wraparound is	Timely referral standard was met						
	QM12)	accessible and	Timely first contact standard was met	94.13%	95.07%	93.28%	93.71%		
		responsive to immediate needs.	Timely face-to-face contact was met	67.28%	65.14%	70.06%	67.58%		
	CSoC Youth: Enrollment	Monitor number of	Total number of CSoC Enrollees	2,954	2,987	2,820	2,895		
Increase Utilization of HCBS	and Agency Involvement (CSoC report QM6)	youth in CSoC and agency involvement.	Number of CSoC Enrollees involved with Juvenile Justice	356 (12.1%)	365 (12.2%)	352 (12.5%)	332 (11.5%)		
			Number of CSoC Enrollees involved with DCFS	240 (8.1%)	263 (8.8%)	290 (10.3%)	271 (9.4%)		
	CSoC Youth: Utilization of Natural Supports (CSoC report QM13)	build sustainable	Percent of fully enrolled CSoC members with at least one natural/informal support person on their Plan of Care (POC) Month 1 of reporting period	87.84%	84.70%	76.40%	*85.3%		
		supports.	Month 2 of reporting period	85.69%	81.80%	77.00%			
			Month 3 of reporting period	86.83%	72.70%	76.90%			
	CSoC Youth: Youth receiving services in sufficient amount,		Percent of members receiving services in sufficent amount, frequency, and duration. Month 1 of reporting period	97.29%	97.51%	97.26%	96.09%		
	' "		Month 2 of reporting period	97.33%	97.50%	96.95%	97.09%		
	(CSoC report POC 6)	determined they need.	Month 3 of reporting period	97.18%	97.15%	96.83%	95.83%		

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

^{*}Prior to the 10/1/19-12/31/19 reporting period, metric included only CSoC members who had at least one CFT during the reporting period.

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Process Indicato	r: Youth Receiving High	-Quality Wraparound	Care Coordination				
		Report	Goal of Monitoring		Reporting Period 2019 (Reported Annually)		
0	D			Constitution and adults			
Outcome	Process Indicator			Specific Metric		Caregiver	Youth
	High-Fidelity Wraparound	, ,	Ensure high-quality Wraparound	Overall Fidelity: Total Fidelity Score	Louisiana	0.77	0.74
		· '	care coordination		National	0.72	0.69
	Youth and Family Satisfaction		Ensure high-quality Wraparound	Overall satisfaction: I am satisfied	Louisiana	1.5	1.5
		Survey (QM15 - annual)	care coordination	with the wraparound process in	National	1.41	1.18
				which my family and I have			
				participated			
					Baseline		
	Process Indicator	Report	Goal of Monitoring	Specific Metric	1/1/19-6/30/19		
	7-Day Follow-Up	Performance	Increase the percentage of youth	The percent of acute inpatient	Numerator = 93		
Reduce OOH	Hospitalization (FUH) Rate	Improvement Project	attending follow-up	psychiatric hospitalization discharges	Denominator = 196		
Placements		(PIP): Measuring	hospitalization appointments	with a valid FUH service within 1 to 7			
Manage Costs		Hospitalization Follow Up	within seven days of discharge to	days of the acute inpatient discharge	Rate = 47.5%		
Improve Outcomes		Practices	70%				
	30-Day Follow-Up		Increase the percentage of youth	The percent of acute inpatient	Numerator = 136		
	Hospitalization (FUH) Rate	Improvement Project	attending follow-up	psychiatric hospitalization discharges	Denominator = 196		
		(PIP): Measuring	hospitalization appointments	with a valid FUH service within 1 to			
			within 30 days of discharge to 90%	1	Rate = 69.4%		
		Practices		discharge			

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