		SoC-Specific Reporting Period								
					4/1/21-	7/1/21- 9/30/21	10/1/21- 12/31/21			
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	5.61%	5.78%	5.01%	5.34%			
		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	6.77	7.01	7.53	6.67			
	QM09)	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	94.46%	91.36%	93.43%	94.05%			
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)	-16.46	-16.25	-16.07	-16.96			
	(CSoC report QM8)		Percent of youth showing improved clinical functioning (from intake to discharge) on standardized tool (CANS)	73.01%	69.45%	72.24%	77.17%			
			Compliance Percentage (% youth with intake and discharge CANS so improvement can be calculated)	97.51%	96.66%	98.23%	98.02%			
	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)	69.00%	64.09%	60.00%	69.70%			

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

Coordinated System of Care (CSoC) Dashboard Quality Assurance Committee - 2/21/2022

Process Indicator	Report			Reporting period			
		Goal of Monitoring	Specific Metrics	1/1/21- 3/31/21	4/1/21- 6/30/21	7/1/21- 9/30/21	10/1/21- 12/31/21
Increase Utilization of HCBS	CSoC Youth: Access to Wraparound (CSoC report QM12)	Ensure that Wraparound is accessible and responsive to immediate needs.	Percent of CSoC members for whom: Timely referral standard was met	91.65%	90.47%	97.49%	97.25%
			Timely first contact standard was met	97.75%	97.28%	96.35%	94.00%
			Timely face-to-face contact was met	78.00%	78.77%	74.45%	75.80%
	CSoC Youth: Enrollment and Agency Involvement (CSoC report QM6)	Monitor number of youth in CSoC and agency involvement.	Total number of CSoC Enrollees	2,650	2,655	2,498	2,522
			Number of CSoC Enrollees involved with Juvenile Justice	241 (9.09%)	250 (9.42%)	239 (9.57%)	235 (9.32%)
			Number of CSoC Enrollees involved with DCFS	281 (10.60%)	307 (11.56%)	283 (11.33%)	290 (11.50%)
	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)	91.9%	91.8%	90.2%	90.3%
	CSoC Youth: Youth receiving services in sufficient amount, frequency, and duration (CSoC report POC 6)	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	97.09%	97.50%	94.27%	92.80%
			Month 2 of reporting period	97.91%	94.03%	94.91%	93.14%
			Month 3 of reporting period	97.12%	94.15%	93.66%	93.87%

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

								Reporting Period
Outcome	Process Indicator Report Goal of Monitoring Specific Metric						1/1/21 - 12/31/21	
	High-Fidelity Wraparound	(QM15-annual)	Ensure high-quality Wraparound care coordination	Range of Compliance Rates for	99.14% to 99.86%			
	wraparound			Range of Compliance Rates for	96.20% to 99.93%			
				Range of Compliance Rates for Needs-Based Key Element Items				93.39% to 98.92%
				Range of Compliance Rates for Outcomes-Based Key Element Items				87.68% to 98.35%
				Range of Compliance Rates for Natural & Community Supports Key Element Items				89.24% to 99.35%
				Range of Compliance Rates for Effective Teamwork Key Element Items				98.28% to 99.78%
				Reporting Period				T
Reduce OOH	Process Indicator	Report	Goal of Monitoring	Specific Metric	Baseline 1/1/18-12/31/18	Interim Period 1/1/19-12/31/19	Interim Period 1/1/20-12/31/20	Final Period 1/1/21-12/31/21
Placements	7-Day Follow-Up	Performance	Increase the	The percent of acute inpatient		Numerator:	Numerator:	Data will be
Manage Costs	Hospitalization	Improvement Project	percentage of youth	psychiatric hospitalization	213	199	176	available May
Improve Outcomes	(FUH) Rate		attending follow-up	discharges with a valid FUH	Denominator:	Denominator:	Denominator:	2022
		Hospitalization Follow	hospitalization	service within 1 to 7 days of	405	398	380	
		Up Practices	appointments within	the acute inpatient discharge				
			seven days of discharge		Rate = 52.59%	Rate = 50.00%	Rate = 46.32%	
	30-Day Follow-Up	Performance	Increase the	The percent of acute inpatient		Numerator:	Numerator:	Data will be
	Hospitalization	Improvement Project	percentage of youth	psychiatric hospitalization	294	277	242	available May
	(FUH) Rate	· ·	attending follow-up	discharges with a valid FUH	Denominator:	Denominator:	Denominator:	2022
		Hospitalization Follow		service within 1 to 30 days of	405	398	380	
		Up Practices	appointments within	the acute inpatient discharge				
			thirty days of discharge		Rate = 72.59%	Rate = 69.60%	Rate = 63.68%	

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