

Outcomes: Systems Level and CSoC-Specific							
Outcome	Report	Goal of Monitoring	Specific Metrics	Reporting Period			
				4/1/21-6/30/21	7/1/21-9/30/21	10/1/21-12/31/21	1/1/22-3/31/22
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	5.78%	5.01%	5.34%	5.81%
	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	7.01	7.53	6.67	6.20
	CSoC Youth: Living Situation at Discharge (CSoC report 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	91.36%	93.43%	94.05%	92.99%
Improve Outcomes	CSoC Youth: Child and Adolescent Needs and Strengths (CANS) Outcomes (CSoC report QM8)	Direct measure of the ability of CSoC to improve youths' clinical functioning	Average decrease (intake to discharge) on standardized tool measuring clinical functioning (CANS)	-16.25	-16.07	-16.96	-16.82
			Percent of youth showing improved clinical functioning (from intake to discharge) on standardized tool (CANS)	69.45%	72.24%	77.17%	74.46%
			<i>Compliance Percentage (% youth with intake and discharge CANS so improvement can be calculated)</i>	96.66%	98.23%	98.02%	96.62%
	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)	64.09%	60.00%	69.70%	62.50%

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

Process Indicator: Youth Receiving Services in their Homes and Communities							
Process Indicator	Report	Goal of Monitoring	Specific Metrics	Reporting period			
				4/1/21-6/30/21	7/1/21-9/30/21	10/1/21-12/31/21	1/1/22-3/31/22
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	90.47%	97.49%	97.25%	98.45%
			Timely first contact standard was met	97.28%	96.35%	94.00%	95.83%
			Timely face-to-face contact was met	78.77%	74.45%	75.80%	76.63%
	CSoC Youth: Enrollment and Agency Involvement (CSoC report QM6)	Monitor number of youth in CSoC and agency involvement.	Total number of CSoC Enrollees	2,655	2,498	2,522	2,646
			Number of CSoC Enrollees involved with Juvenile Justice	250 (9.42%)	239 (9.57%)	235 (9.32%)	246 (9.30%)
			Number of CSoC Enrollees involved with DCFS	307 (11.56%)	283 (11.33%)	290 (11.50%)	332 (12.55%)
	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)	91.8%	90.2%	90.3%	88.8%
	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 sufficient amount, frequency, and duration.				
			<b>Month 1</b> of reporting period	97.50%	94.27%	92.80%	92.58%
			<b>Month 2</b> of reporting period	94.03%	94.91%	93.14%	90.80%
		<b>Month 3</b> of reporting period	94.15%	93.66%	93.87%	92.24%	

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

Process Indicator: Youth Receiving High-Quality Wraparound Care Coordination									
Outcome	Process Indicator	Report	Goal of Monitoring	Specific Metric	Reporting Period				
					1/1/21 – 12/31/21				
<b>Reduce OOH Placements Manage Costs Improve Outcomes</b>	High-Fidelity Wraparound	Fidelity to Practice (QM15-annual)	Ensure high-quality Wraparound care coordination	Range of Compliance Rates for <b>Family Voice &amp; Choice</b> Key Element Items	99.14% to 99.86%				
				Range of Compliance Rates for <b>Strengths-Based</b> Key Element Items	96.20% to 99.93%				
				Range of Compliance Rates for <b>Needs-Based</b> Key Element Items	93.39% to 98.92%				
				Range of Compliance Rates for <b>Outcomes-Based</b> Key Element Items	87.68% to 98.35%				
				Range of Compliance Rates for <b>Natural &amp; Community Supports</b> Key Element Items	89.24% to 99.35%				
				Range of Compliance Rates for <b>Effective Teamwork</b> Key Element Items	98.28% to 99.78%				
						Reporting Period			
						Baseline	Interim Period	Interim Period	Reporting Period
						1/1/18-12/31/18	1/1/19-12/31/19	1/1/20-12/31/20	1/1/21-12/31/21
		7-Day Follow-Up Hospitalization (FUH) Rate	Performance Improvement Project (PIP): Measuring Hospitalization Follow Up Practices	Increase the percentage of youth attending follow-up hospitalization appointments within seven days of discharge	The percent of acute inpatient psychiatric hospitalization discharges with a valid FUH service within 1 to 7 days of the acute inpatient discharge	Numerator: 213 Denominator: 405  <b>Rate = 52.59%</b>	Numerator: 199 Denominator: 398  <b>Rate = 50.00%</b>	Numerator: 176 Denominator: 380  <b>Rate = 46.32%</b>	Numerator: 198 Denominator: 423  <b>Rate = 46.81%</b>
	30-Day Follow-Up Hospitalization (FUH) Rate	Performance Improvement Project (PIP): Measuring Hospitalization Follow Up Practices	Increase the percentage of youth attending follow-up hospitalization appointments within thirty days of discharge	The percent of acute inpatient psychiatric hospitalization discharges with a valid FUH service within 1 to 30 days of the acute inpatient discharge	Numerator: 294 Denominator: 405  <b>Rate = 72.59%</b>	Numerator: 277 Denominator: 398  <b>Rate = 69.60%</b>	Numerator: 242 Denominator: 380  <b>Rate = 63.68%</b>	Numerator: 282 Denominator: 423  <b>Rate = 66.67%</b>	

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