

**Coordinated System of Care (CSoC) Dashboard
Quality Assurance Committee - 11/21/2022**

Outcomes: Systems Level and CSoC-Specific							
Outcome	Report	Goal of Monitoring	Specific Metrics	Reporting Period			
				10/1/21-12/31/21	1/1/22-3/31/22	4/1/22-6/30/22	7/1/22-9/30/22
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	5.34%	5.81%	6.45%	5.91%
	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	6.67	6.20	7.15	6.21
	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	94.05%	92.99%	94.95%	93.95%
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)	-16.96	-16.82	-17.15	-15.01
			Percent of youth showing improved clinical functioning (from intake to discharge) on standardized tool (CANS)	77.17%	74.46%	79.08%	68.29%
			<i>Compliance Percentage (% youth with intake and discharge CANS so improvement can be calculated)</i>	98.02%	96.62%	95.60%	90.67%
	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)	69.70%	62.50%	66.11%	59.57%

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

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Process Indicator: Youth Receiving Services in their Homes and Communities							
Process Indicator	Report	Goal of Monitoring	Specific Metrics	Reporting period			
				10/1/21-12/31/21	1/1/22-3/31/22	4/1/22-6/30/22	7/1/22-9/30/22
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	97.25%	98.45%	98.64%	98.35%
			Timely first contact standard was met	94.00%	95.83%	96.80%	94.90%
			Timely face-to-face contact was met	75.80%	76.63%	70.71%	69.03%
	CSoC Youth: Enrollment and Agency Involvement (CSoC report QM6)	Monitor number of youth in CSoC and agency involvement.	Total number of CSoC Enrollees	2,522	2,646	2,600	2,550
			Number of CSoC Enrollees with Juvenile Justice involvement	235 (9.32%)	246 (9.30%)	240 (9.23%)	228 (8.94%)
			Number of CSoC Enrollees with Department of Children & Family Services (DCFS) involvement	290 (11.50%)	332 (12.55%)	315 (12.12%)	307 (12.04%)
			Number of CSoC Enrollees with Juvenile Justice and DCFS involvement	33 (1.31%)	28 (1.06%)	42 (1.62%)	32 (1.25%)
			Number of CSoC Enrollees with Child-Serving Agencies involvement (Juvenile Justice or DCFS)	558 (22.13%)	606 (22.9%)	597 (22.96%)	567 (22.24%)
	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)	90.3%	88.8%	89.8%	89.6%
	CSoC Youth: Youth receiving services in sufficient amount, frequency, and duration (CSoC report POC6)	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: Month 1 of reporting period	92.80%	92.58%	89.95%	81.92%
			Month 2 of reporting period	93.14%	90.80%	90.64%	83.90%
			Month 3 of reporting period	93.87%	92.24%	92.34%	85.85%

*Please note: Data from previous reporting periods available upon request.
POC6 report methodology was changed effective 7/1/22.*

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Process Indicator: Youth Receiving High-Quality Wraparound Care Coordination									
Outcome	Process Indicator	Report	Goal of Monitoring	Specific Metric Range of Compliance Rates				Reporting Period 1/1/21 – 12/31/21	
	High-Fidelity Wraparound	Fidelity to Practice (QM15-annual)	Ensure high-quality Wraparound care coordination	Family Voice & Choice Key Element Items				99.14% to 99.86%	
				Strengths-Based Key Element Items				96.20% to 99.93%	
				Needs-Based Key Element Items				93.39% to 98.92%	
				Outcomes-Based Key Element Items				87.68% to 98.35%	
				Natural & Community Supports Key Element Items				89.24% to 99.35%	
				Effective Teamwork Key Element Items				98.28% to 99.78%	
				Reduce OOH Placements Manage Costs Improve Outcomes					Reporting Period
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	
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 Rate = 52.59%	Numerator: 199 Denominator: 398 Rate = 50.00%	Numerator: 176 Denominator: 380 Rate = 46.32%	Numerator: 198 Denominator: 423 Rate = 46.81%	
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 Rate = 72.59%	Numerator: 277 Denominator: 398 Rate = 69.60%	Numerator: 242 Denominator: 380 Rate = 63.68%	Numerator: 282 Denominator: 423 Rate = 66.67%	

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