

LCCMH Quality Improvement Plan 2023							
KEY:	Below Target/ Not likely to meet goal at current rate	Monitor or revise plan	On or Above Target				
Measure	Baseline	Goal	Q1	Q2	Q3	Q4	YTD/Plan
Increase MICS contacts over 1 hour-S9484	7%	15%	0	20%	0%	0%	Supervisor to identify ways to eliminate barriers in FY24.
Increase MICS contacts in the home or community	8%	15%	20%	15%	10%	63%	
Sustain C-MICS Utilization	24	25	6	11	21	27	YTD
All children will receive C-MICS Services after hospital recidivism	0%	100%	100%	100%	100%	NA	No children were hospitalized in Q4
Veteran's Navigator increase attendance at Community Outreach Events	20	25	0	12	21	40	YTD
Veteran's Navigator to increase veteran and natural support contacts by 15%	54	62	6	49	75	87	YTD
Decrease missed appointments by 20% for persons served by contractual therapists (Outpatient Therapy)	32%	25%	33%	37%	33%	34%	
Decrease number of persons served dropping out of service (Outpatient Therapy)	38%	25%	84%	94%	76%	84%	
Reduce LOCUS overrides	23%	15%	22%	24%	25%	21%	FY23 average was 23%
Adult MI cases will have at least 1 LOCUS assessment each quarter	80%	95%	84%	81%	87%	93%	FY23 average was 86%
Decrease adult hospital recidivism by 20%	31	25	2	6	15	21	YTD
Maintain Stepping Stone unit cost	\$ 7.19	\$ 7.19	\$ 6.70	\$ 7.27	\$ 9.22	\$ 5.94	Q4 - \$7.24 YTD
Increase program-related objectives completed each quarter (Stepping Stone)	58%	60%	58%	70%	71%	63%	Cummulative for FY23 = 69%

Increase ACT service intensity by 25% (minutes per person per week)	60.1	75		59.7		59.5		68.05		73.98	
Increase ACT contacts with persons support network contacts per month by 25%.	0.65	0.81		1.1		1.2		0.9		0.9	ACTP has remained consistent for the last quarter.
Mental Health Court Participants will meet with CPSS Worker 1x weekly 80% of the time	N/A	80%		18.9%		21.5%		44%		35.8%	Will continue to monitor in FY24
Jail Diversion agreements will be updated and signed	0	9		0		0		1		0	Supervisor trying to attend Chief of Police meeting.
Start Moral Reconciliation Therapy and enroll at least 3 participants.	0	3		0		8		8		6	Another IDDT staff will be trained in MRT in October 2023.
IDDT will increase face to face community contacts.	14%	25%		12%		8%		12%		9%	Q4 - Goal will be continued next FY as IDDT is not fully staffed. New staff will be training on and encouraged to complete services out in the comm. when able. The number of F2F contacts as well as IDDT persons served has also increased, impacting these numbers.
Train 8 more clubhouse members to use Flourish Independently	5	13		7		10		18		21	YTD
Harmony Hall will develop 2 additional TEP's.	3	5		5		5		5		5	Maintain for Q2-4
Start and Enroll participants in Enhanced Illness Management Recovery Groups	0	5		0		0		8		10	Q4 - Average of 6 consumers that attend each week.
Use LOCUS to show persons in Adult Case Management are in the correct Program	N/A	90%		76%		71%		70%		71%	

Increase Employment Specialist hours performed in community based settings	22%	65%	37%	32%	29%	55%	
Increase successful IPS Closures	11.8%	15%	18.6%	12.8%	18.4%	16.6%	
Children's Staff will have 2 clinical documentation trainings per Quarter	N/A	8	2	6	8	11	YTD
Children discharged due to completing their goals	36%	80%	52%	31%	21%	41%	
Autism children will start ABA Therapy within 90 days of WSA Approval	N/A	100%	100%	100%	80%	0%	Q3 - 4/5 started within 90 days. The 1 who did not was by parent choice. Q4 - 1 BCBA is on FMLA and without a supervisor for part of the quarter. New supervisor has a small caseload and is trying to hire another BCBA.
Autism Staff will be trained in the IPOS/ABA Treatment Plan by the plan effectiveness date	N/A	100%	77%	71%	83%	94%	
Nursing Dept. Dimensions Well Body 85% of people enrolled will decrease smoking by at least 50%	N/A	85%	N/A	33%	100%	N/A	No participants in Q4
Nursing Dept. Dimensions Well Body 95% of people will increase physical activity by 50%	N/A	95%	46%	100%	100%	100%	
Review incident reports on a quarterly basis Goal to sustain incidents from FY22 at or below 100.	100	100	27	59	82	107	cumulative totals YTD