| LCCMH Quality Improvement Plan 2022 | | | | | | | | | 1 |
|--|---|---------|----|------------------------|------------|------|----------------------|----|---|
| KEY: | Below Target/ Not likely to meet goal at current rate | | | Monitor or revise plan | | | On or Above Target | | |
| NLT. | | | | Withitton | n revise p | lali | Oll Of Abbove Target | | |
| Measure | Baseline | Goal | | Q1 | | Q2 | Q3 | Q4 | YTD/Plan |
| Increase MICS Utilization | 28 | 40 | | 10 | | 20 | | | cumulative totals |
| Decrease PHQ-9 score between entry and | | | | | | | | | |
| discharge (MICS) by 10% | 67% | 100% | | 29% | | 50% | | | |
| Sustain C-MICS Utilization | 20 | 20 | | 11 | | 17 | | | |
| Children follow-up with services after | | | | | | | | | |
| discharge | 7 | 11 | | 8 | | 13 | | | |
| Veteran's Navigator will increase contacts | | | | | | | | | |
| by 42% | 31 | 44 | | 7 | | 24 | | | |
| Increase number of contractual therapists | | | | | | | | | Resignations in March and another in April |
| (Outpatient Therapy) | 4 | 7 | | 4 | | 3 | | | (3rd Q.) |
| Decrease number of persons served | | | | | | | | | |
| dropping out of service (Outpatient | | | | | | | | | |
| Therapy) | 66% | 50% | | 49% | | 23% | | | |
| Reduce LOCUS overrides | 16.34% | 10% | | 22% | | 25% | | | |
| Adult MI cases will have at least 1 LOCUS | | | | | | | | | |
| assessment each quarter | 90% | 95% | | 75% | | 83% | | | |
| Reduce hospital days to 1660 for the year, | | | | | | | | | |
| 415/quarter | 1804 | 1660 | | 695 | | 1167 | | | |
| Decrease Stepping Stone unit cost | \$ 9.63 | \$ 8.00 | \$ | 8.35 | \$ | 6.92 | | | |
| | | | | | | | | | |
| Increase program-related objectives | | | | | | | | | |
| completed each quarter (Stepping Stone) | 50% | 60% | | 55% | | 56% | | | |
| Increase ACT group attendance | 10 | 13 | | 9 | | 14 | | | |
| Increase ACT community involvement | 8 | 12 | | 10 | | 13 | | | |
| Increase number of Mental Health Court | | | | | | | | | |
| accepted referrals | 2 | 6 | | 3 | | 4 | | | |
| | | | | | | | | | |
| Increase number of active jail diversions | 3 | 12 | | 4 | | 3 | | | 1 pending for 3rd. Q. |

| Start Moral Reconation Therapy. | N/A | | | | | | On hold until new staff starting in 3rd Q. is trained on the model. |
|---|-------|-------|-----------------|-------|-------|--|---|
| Persons served are in right program per | | | | | | | |
| LOCUS (Co-Occurring) | 80% | 90% | | 54% | 58% | | |
| Increase Clubhouse daily attendance | 21.6 | 29.4 | | 23.97 | 24.92 | | |
| Use Flourish to track data sources. | 0 | 9 | | 3 | 6 | | |
| Increase case management face to face | | | | | | | |
| contacts | 9,122 | 9,250 | | 2,321 | 4,696 | | |
| | | | | 52 | 54 | | |
| Increase number of persons served in HSW | 51 | 56 | | | | | |
| | | | N/A new goal | | 31% | | New goal this quarter. This is the baseline number. Will be using staff tracking logs. |
| Increase Employment Specialist hours | | | implement | | | | starr trucking logs. |
| performed in community based settings | 31% | 65% | ed Q2 | | | | |
| Increase number of children served by | | | | | | | |
| Youth Peer Support | 15 | 30 | | 15 | 21 | | |
| Youth Peer Support children served will have reduction in average CAFAS score | 77.3 | 60 | | 61 | 74 | | |
| Children & families participate in safe CMH | _ | | | | | | |
| events (Children's) | 30 | 100 | | 160 | 160 | | |
| All ABA technicians receive RBT credentials | 0% | 100% | | 31% | 55% | | |
| Implement quarterly group parent training | | | | | | | |
| program (Autism) | 0 | 4 | | 1 | 2 | | |
| Review incident reports on a quarterly | | | | · | | | |
| basis Goal to sustain or reduce incidents | | | | | | | |
| from FY21. Minus MCSI Missed | | | | | | | cumulative |
| Medications | 293 | 130 | | 30 | 46 | | totals |