**CDS Family & Behavioral Health Services, Inc.**

**FY 2017-2018 Performance Improvement Plan**

| **Goal** | **Indicator/Outcome** | **Data Source** | **Program** | **Timing** | **Obtained By** | **Type of Measure** |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Satisf.** | **Effective** | **Efficient** | **Access** | **Status** |
| Participants satisfaction with services |  90% of average scores per question will be ‘3’ or greater (scale 1-4). | Participant Satisfaction Survey | CINS/FINS | Monthly Reports  | Data Systems ManagerData collected by:Front Desk Staff; Counselor or designated staff member | X |  |  |  | 100% of the average scores were 3 or greater |
| Admitted youth will receive intake and assessments | 99% of youth admitted to services will have a completed intake and a needs assessment initiated. | NETMIS | CINS/FINS | Monthly Report | Data Systems ManagerData collected by Designated Data Entry Staff by site |  |  | X |  | 99% of youth served met this Indicator/Outcome |
| Participant successful completion of services | 85% of participants will successfully complete CINS/FINS services. | NETMIS | CINS/FINS | Monthly Reports | Data Systems ManagerData collected by:Counselor/Case Manager or designated staff member |  | X |  |  | 99% of participants successfully completed services |
| Reduce juvenile crime for at risk youth. | 90% of youth served in CINS/FINS programs will have no arrests during services. | DJJ Comprehensive Accountability Report  | CINS/FINS | AnnualReports | Data Systems ManagerAs reported by Department of Juvenile Justice  |  | X |  |  | 98% of non-residential and 99% of residential youth remained crime free |
| Provide effective services | Recidivism rate does not exceed 20% in 6 months for residential services or 8% in 12 months for non-residential services | DJJ Comprehensive Accountability Report | CINS/FINS | AnnualReport | Data Systems ManagerAs reported by Department of Juvenile Justice |  | X |  |  | The recidivism rate was 7% for residential services and 5% for non-residential services  |
| Reduce the NETMIS data entry lag time to 3 days. | 90% of intakes will be entered within 3 days. | NETMIS | CINS/FINS | Monthly Reports | Data Systems ManagerData collected by Data Entry Staff by site |  |  | X |  | 98% of intakes were entered within 3 days |
| Reduce the NETMIS data entry lag time to 3 days | 90% of discharges will be entered within 3 days | NETMIS | CINS/FINS | Monthly Reports | Data Systems ManagerData collected by Data Entry Staff by site |  |  | X |  | 91% of discharges were entered within 3 days |
| Complete 30-day follow-ups of discharged CINS/FINS participants | 90% of youth discharged from services will receive a 30 day follow-up. | NETMIS | CINS/FINS | Monthly Report | Data Systems ManagerData collected by:Counselors or designated staff members |  |  | X |  | 99% of youth discharged received a 30 day follow up |
| Complete 60- day follow ups of discharged CINS/FINS participants | 90% of youth discharged from services will receive a 60-day follow-up | NETMIS | CINS/FINS | Monthly Report | Data Systems ManagerData collected by:Counselors or designated staff members |  |  | X |  | 96% of youth served received a 60 day follow up |
| Youth discharged to an appropriate setting. | 90% of youth will be discharged home or to another appropriate setting | NETMIS | CINS/FINS | MonthlyReports | Data Systems ManagerData collected by:Counselors or designated staff members |  | X |  |  | 96% of youth were discharged to an appropriate setting |
| Youth attending school regularly at discharge | 75% of youth completing services will report attending school regularly at 30 -day follow-up | NETMIS | CINS/FINS | Monthly Reports | Data Systems ManagerData collected by:Counselors or designated staff members |  | X |  |  | 93% reported attending school regularly at 30-day follow up |
| Youth attending school regularly at discharge | 75% of youth completing services will report attending school regularly at 60-day follow-up | NETMIS | CINS/FINS | MonthlyReports | Data Systems ManagerData collected by:Counselors or designated staff members |  | X |  |  | 96% reported attending school regularly at 60-day follow up |
| Increase SAMH performance  | 95% of SAMH direct service staff shall meet at least 90% of expected level of contact hours as measured on a monthly basis (staff with CDS over 3 months). | State PBPS Data System | SAMH | Monthly Report | Data Systems ManagerSAMH direct service staff  |  |  | X |  | 5 of 7 staff or 71% met this standard  |
| Responsive to stakeholders | 90% of stakeholders surveyed will agree or strongly agree that CDS has staffs that are accessible to their organization. | Stakeholders Surveys | All programs | Annually | Chief Operations Officer |  |  |  | X | !00% of stakeholders concurred with the statement |
| Reduce costs associated with Youth Care Worker supervision of participants in the residential programs | Establish biweekly budgetary guidelines for staff coverage based on licensure requirements and historical experience and provide managers biweekly personnel expenditure reports to utilize for planning and to track progress. | Bi-weekly Youth Care Worker Payroll Analysis Report | CINS/FINS Residential | BiweeklyReport | Chief Financial Officer Data Systems ManagerExpenses controlled by:Coordinators |  |  | X |  | 2 of the 3 shelters ended the year under budget.Central was under by $3,916N.W. was under by $3,828East was over by $7,715.Overall for all tree shelters CDS was $29 under budget. |
| Reduce and/or control programs variable costs. | Establish program budgets based on historical experience and provide managers monthly expenditure reports to utilize for planning and to track progress. | Coordinator Budget Reports | All programs | Monthly Report, one week prior to EMT | Chief Financial Officer Data Systems ManagerExpenses controlled by:Coordinators |  |  | X |  | As an Agency CDS ended up 3% over budget |