

Submitted by: Patrick Kreifels, Regional Administrator Publish Date: September 11, 2023

## **Quality Indicator #1**

<b>Department:</b>		CQI Team:	
☐ Adult Network S	Services	☐ Business Interruption	☐ Internship
☐ Children & Fam	ily Services	□ CARF Training	☐ Leadership
☐ Continuous Qua	lity Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
⊠ Operations/Hum	nan Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Invol		☐ Health & Safety	☐ Social Media
☐ Disaster Respon		☐ Human Resources	☐ Training
☐ Emergency Serv		Supervisors	☐ Wellness
☐ Family & Youth	Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Provide	ers		
☐ Prevention			
	Organizational	Expectation:	
	Risk Exposure: □ Yes	Region V Systems employees to learn, in support of their pro-	
☐ Avoid	□ Tes ⊠ No	to learn, in support of their pro-	oressional development.
	△ NO		
☐ Preserve			
<b>Quality Indicator</b>	Completion of CA	ARF & Region V required training	ings.
<b>Threshold</b>	100% of Region according to assig	V Systems' employees conned deadline.	mplete required trainings
Measurement Type	-	re independent to demonstrate the main focus of achievement	-
<b>Standard</b>	100%		
<b>Data Collection Plan</b>			
Data Source		Relia	as Database/Other Reports
Data Collector.		D	irector of Special Projects
Frequency of C	ollection		Quarterly
Frequency of C	omparison to Thre	eshold by Team	Quarterly
Engguenay of C			
rrequency of C	CT Review		Quarterly

98%

90%

## **Quality Indicator #2**

Department:	CQI Team:
☐ Adult Network Services	☐ Business Interruption ☐ Internship
☐ Children & Family Services	$\square$ CARF Training $\square$ Leadership
☐ Continuous Quality Improvement	☐ Contract ☐ Move It & Fix It
☐ Fiscal	☐ Corporate Citizenship ☐ Patches of Green
□ Operations/Human Resources	☐ Diversity Awareness ☐ Quality
<u>Program:</u>	& Acceptance
Consumer Involvement	☐ Health & Safety ☐ Social Media
☐ Disaster Response	☐ Human Resources ☐ Training
☐ Emergency Services	Supervisors   Wellness
☐ Family & Youth Investment	☐ Information
☐ Housing	Technology Response
☐ Network Providers	
☐ Prevention	
Scope: Organizational	Expectation:
☐ Achieve Risk Exposure:	Region V Systems sponsors quality trainings to employees and community partners.
☐ Avoid ☐ Yes ☐ No	employees and community partners.
□ Preserve     □	
<b>Quality Indicator</b> Training evaluation	ons.
Threshold Community train	ings sponsored by Region V Systems will result in an
·	ry rate of 85% or above.
Measurement Type Quarterly scor	res are independent to demonstrate the
difference/trend/a	verage.
Standard 90%	
Data Collection Plan	
Data Source	Training Evaluation Tool
Data Collector	Director of Special Projects
Frequency of Collection	Quarterly
Frequency of Comparison to Thre	eshold by TeamQuarterly
Frequency of CCT Review	Quarterly
Baseline (FY 07-08)	FY 22-23

94%

98%

<b>Department:</b>		CQI Team:	
	Services	☐ Business Interruption	☐ Internship
☐ Children & Fan	nily Services	☐ CARF Training	☐ Leadership
☐ Continuous Qua	ality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hun	nan Resources	☐ Diversity Awareness	☐ Quality
Program:	_	& Acceptance	☐ Risk Management
☐ Consumer Invo		☐ Health & Safety	☐ Social Media
☐ Disaster Respon		☐ Human Resources	☐ Training
☐ Emergency Ser		Supervisors  ☐ Information	☐ Wellness
☐ Family & Youtl	h Investment	Technology Response	
☐ Housing	1	reciniology Response	
☐ Network Provid	lers		
⊠ Prevention	Onconinctional	E	
	Organizational Risk Exposure:	Expectation: Federal Block Grant funded pr	revention coalitions will
☐ Avoid	⊠ Yes	meet all reporting requirement	
☐ Eliminate	□ No	information, activities, and out	
□ Preserve		Nebraska.	
<u>Threshold</u>	southeast Nebrask	zed county community prevent a will participate in substance a 5 reporting, NPIRS (Nebraska	abuse annual assessments
<b>Measurement Type</b>	Quarterly score difference/trend/av	<u> </u>	o demonstrate the
<b>Standard</b>	100%		
<b>Data Collection Plan</b>	<u>1</u>		
Data Source	A	Annual Assessment Forms, BH5	Forms, NPIRS Database
Data Collector		P1	revention Team Members
Frequency of C	Collection		Quarterly
Frequency of Comparison to Thre		eshold by Team	Quarterly
Frequency of C	CCT Review		Quarterly
Baseline 100% (FY 11-12)		<u><b>FY 22-23</b></u> 100%	

I	Department:		<b>CQI Team:</b>		
		☐ Business	Interruption	☐ Internship	
☐ Children & Family Services		☐ CARF Tr	aining	☐ Leadership	
	☐ Continuous Qu	uality Improvement	☐ Contract		☐ Move It & Fix It
	☐ Fiscal		☐ Corporate	Citizenship	☐ Patches of Green
	☐ Operations/Hu	ıman Resources	☐ Diversity	Awareness	$\square$ Quality
<u>I</u>	Program:		& Accept	ance	☐ Risk Management
	☐ Consumer Inv	olvement	☐ Health &	Safety	☐ Social Media
	□ Disaster Responsation	onse	☐ Human R	esources	☐ Training
	☐ Emergency Se	rvices	Superviso		☐ Wellness
	☐ Family & You	th Investment	☐ Informati	on	
	☐ Housing		Technolo	gy Response	
	☐ Network Provi	iders			
	□ Prevention				
	Scope:	<b>Organizational</b>	<b>Expectation:</b>		
		Risk Exposure:			media will increase
	☐ Avoid	□ Yes	_	knowledge of p	
	☐ Eliminate	⊠ No	activities/strat	egies and resou	rces.
	☐ Preserve				
Qı	uality Indicator	Number of visits t	to the website/so	ocial media site	·.
Tł	nreshold	Increase the nu	ımber of visi	ts to the w	ebsite/social media site
					e (Users: Repeat: 3,471,
					) by June 30, 2024.
	4.70	0 1			1 1100 1
M	easurement Type	• •	-		e quarterly differences and
		the last quarter is	the main focus	or acmevement	•
St	<u>andard</u>	Above baseline nu	ımbers		
Da	ata Collection Pla	n			
				•••••	KidGlov
	Data Collecto	r	•••••	I	Prevention Team Members
	Frequency of	Collection	•••••	•••••	Quarterly
	Frequency of	Comparison to Thr	eshold by Tean	1	Quarterly
	Frequency of	CCT Review	•••••	•••••	Quarterly
		D 1'		TIX 22 22 3	D 1 6109 157
<b>11</b> 7	abaita Haara	Baseline	iana 1 042		End of Fiscal Year
	ebsite Users: ocial Media:	Repeat 3,471; Uni Impressions 65,92	•	Impression	374; Unique: 2,833
$\mathbf{v}$	ciai ivicula.	mpressions 03,72	· 1	1111bre2210H	3 UJ,UII

<b>Department:</b>		CQI Team:	
	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
<b>Program:</b>		& Acceptance	☐ Risk Management
☐ Consumer Inv	olvement	☐ Health & Safety	☐ Social Media
☐ Disaster Respo	onse	☐ Human Resources	☐ Training
☐ Emergency Se	ervices	Supervisors	☐ Wellness
☐ Family & You	th Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
□ Prevention			
Scope:	<u>Organizational</u>	Expectation:	
☐ Achieve	Risk Exposure:	Each coalition has an annual	
☐ Avoid	⊠ Yes	identified in their BH5, for lo	ong-term sustainability
☐ Eliminate	□ No	planning.	
□ Preserve			
Quality Indicator       Coalition sustainability plans.         Threshold       100% of all funded coalitions will report quarterly on regional coalition sustainability strategies.			terly on regional coalition
Measurement Typ	·	are dependent upon the end of	the year focus.
<u>Standard</u>	100%		
<b>Data Collection Plan</b>	<u>an</u>		
Data Source			Coalition Plans
Data Collector	r		Prevention Team Members
Frequency of	Collection		Annual
Frequency of	Comparison to Thre	eshold by Team	Annual
Frequency of	CCT Review		Quarterly
<u>Baseline</u> (FY 17-18	3)	<u><b>FY 22-23</b></u> 100%	

## **Quality Indicator #6**

	oartment:		CQI Team:	
	Adult Network Services		☐ Business Interruption	☐ Internship
	Children & Family Services		☐ CARF Training	☐ Leadership
	_	uality Improvement	☐ Contract	☐ Move It & Fix It
	Fiscal	_	☐ Corporate Citizenship	☐ Patches of Green
	•	ıman Resources	☐ Diversity Awareness	☐ Quality
	gram:		& Acceptance	☐ Risk Management
	Consumer Inv		☐ Health & Safety	☐ Social Media
	Disaster Respo		☐ Human Resources	☐ Training
	Emergency Se		Supervisors  Information	☐ Wellness
	Family & You	ith investment	Technology Response	
	Housing	• 1	reciniology Response	
	Network Provi Prevention	iders		
		Organizational	Expectation	
	ope: Achieve	Organizational Risk Exposure:	Expectation: Increase the number of comm	unity coalitions
	Avoid	× Yes	throughout southeast Nebrasl	——————————————————————————————————————
	Eliminate		collaborative partnerships and sustain capacity in	
			substance abuse prevention e	- ·
			L	
Qua	lity Indicator	Active communit	y prevention coalitions through	nout southeast Nebraska.
Thre	<u>eshold</u>	85% of counties	s (16) in southeast Nebrask	a will sustain an active
		community preve	ntion coalition by the end of th	ne fiscal year.
Mea	surement Typ	e Quarterly scores a	are independent to demonstrate	e quarterly differences with
		the last quarter as	the main focus of achievemen	t.
Stan	<u>dard</u>	100%		
Data	Collection Plan	an_		
	Data Source.		Cou	nty Reports and RPC Team
Data Collector				Prevention Team Members
	Frequency of	Collection		Quarterly
	Frequency of	Comparison to Thr	eshold by Team	Quarterly
	Frequency of	CCT Review		Quarterly

**Baseline** (March 2004) 59%

 $\frac{\textbf{FY 22-23 End of Fiscal Year}}{100\%}$ 

## **Quality Indicator #7**

<b>Department:</b>		CQI Team:	
□ Adult Network     □ Adult Network	ork Services	☐ Business Interruption	☐ Internship
☐ Children &	Family Services	☐ CARF Training	☐ Leadership
☐ Continuous	Quality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/l	Human Resources	☐ Diversity Awareness	$\square$ Quality
<b>Program:</b>		& Acceptance	☐ Risk Management
☐ Consumer In	nvolvement	☐ Health & Safety	☐ Social Media
☐ Disaster Res	sponse	☐ Human Resources	☐ Training
☐ Emergency	Services	Supervisors	☐ Wellness
☐ Family & Y	outh Investment		
☐ Housing		Technology Response	
☐ Network Pro	oviders		
Scope:	<b>Organizational</b>	Expectation:	
⊠ Achieve	Risk Exposure:	The Regional Prevention Ce	
☐ Avoid	☐ Yes	(YAB) will have youth repre	esentation from all 16
☐ Eliminate	⊠ No	counties.	
☐ Preserve			
Quality Indicato  Threshold	_ , ,	sentation. les (16) are represented on YA	AB membership.
Measurement Ty	v <u>pe</u> Quarterly sco difference/trend/a	1	to demonstrate the
<u>Standard</u>	100%		
Data Collection	<u>Plan</u>		
Data Sourc	e		YAB Meeting Minutes
Data Collector			Prevention Team Members
Frequency of Collection			Quarterly
Frequency	of Comparison to Thr	eshold by Team	Quarterly
Frequency	of CCT Review		Quarterly
Baseline (June 20	006) <b>FY 22-23</b>	end of Fiscal Year	

80% FY 22-23 end of Fisc 69%

## **Quality Indicator #8**

<b>Department:</b>		CQI Team:	
□ Adult Net	twork Services	☐ Business Interruption	☐ Internship
☐ Children	& Family Services	☐ CARF Training	☐ Leadership
☐ Continuo	us Quality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operation	s/Human Resources	☐ Diversity Awareness	☐ Quality
<b>Program:</b>		& Acceptance	☐ Risk Management
☐ Consumer	r Involvement	☐ Health & Safety	☐ Social Media
☐ Disaster F	Response	☐ Human Resources	☐ Training
☐ Emergence	ey Services	Supervisors	☐ Wellness
☐ Family &	Youth Investment	☐ Information	
☐ Housing		Technology Response	
□ Network l	Providers		
□ Prevention	n		
Scope:	Organizational	Expectation:	
☐ Achieve	Risk Exposure:	Increase the number of Hope	
$\square$ Avoid	☐ Yes	southeast Nebraska in an eff	
☐ Eliminate	No ⊠ No	sustain capacity in suicide p	revention.
Quality Indica	50% of all count	ies within Region V Systems um of one Hope Squad.	s geographical territory will
Measurement	Type Quarterly sco difference/trend/a	1	to demonstrate the
<u>Standard</u>	100%		
Data Collectio	n Plan		
Data Sou	ırce	Prevention monitoring of im	plementation with counties.
Data Col	lector		. Prevention Team Members
_			
Frequenc	cy of Comparison to Thr	reshold by Team	Quarterly
Frequenc	cv of CCT Review		Ouarterly
= = = 4	· v · · · · · · · · · · · · · · · · · ·		200011

<u>Baseline</u> (FY 19-20) 69%

**FY 22-23 End of Year** 56%

## **Quality Indicator #9**

<b>Department:</b>		CQI Team:	
		☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv	olvement	☐ Health & Safety	☐ Social Media
☐ Disaster Respo	onse	☐ Human Resources	☐ Training
☐ Emergency Se	ervices	Supervisors	☐ Wellness
☐ Family & You	ith Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
□ Prevention			
Scope:	<b>Organizational</b>	<b>Expectation:</b>	
☐ Achieve	Risk Exposure:	Increase the number of Second	
☐ Avoid	☐ Yes	learning curricula throughout	
☐ Eliminate	⊠ No	efforts to aid students' social	emotional development.
□ Preserve			
Quality Indicator	Evidence Based curriculum.	1	Social/Emotional learning
Threshold		ties will have a minimum of od d Social/Emotional learning cu	9
Measurement Typ	Quarterly sco difference/trend/a	1	to demonstrate the
<b>Standard</b>	100%		
<b>Data Collection Pl</b>			
Data Source			
Data Collector			
Frequency of Collection			Quarterly
Frequency of	f Comparison to Thr	reshold by Team	Quarterly
Frequency of	f CCT Review		Quarterly
<b>Baseline</b> (FY 19-20 100%	-	<u>Y 22-23</u> 0%	

#### **Quality Indicator #10**

_		T	
<b>Department:</b>		CQI Team:	
☐ Adult Network Services		☐ Business Interruption	☐ Internship
☐ Children & Family Services		☐ CARF Training	☐ Leadership
1	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal	D	☐ Corporate Citizenship	☐ Patches of Green
_	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:  ☐ Consumer Inv	volvoment	& Acceptance	☐ Risk Management
		☐ Health & Safety ☐ Human Resources	☐ Social Media
☐ Disaster Respo		Supervisors	☐ Training
☐ Emergency Se		☐ Information	☐ Wellness
•	ith Investment	Technology Response	
☐ Housing		reciniology Response	
☐ Network Prov	iders		
☐ Prevention	Organizational	E-mostotion	
Scope:  ⊠ Achieve	Organizational Risk Exposure:	Expectation: Region V Systems adheres to	o personnel policies that
□ Avoid	× Yes	contribute to the effective pe	<u> </u>
☐ Eliminate		personnel.	Troffinance evaluation of its
☐ Preserve			
□ Fleseive			
<b>Quality Indicator</b>	5th business day evaluation = conduction; passv Y-Drive, hard cop	annual performance evaluations following the performance evaluated by the established deadlin word-protected and by signed by the employee and iness day following the performance evaluations.	aluation deadline (completed te, documented on the correct saved on the supervisor, and submitted to
<b>Threshold</b>	100% of all emperformance eval	ployees shall have a docum uation.	ented, signed semi-annual
Measurement Typ	e Quarterly scor difference/trend/a	<u> </u>	to demonstrate the
<b>Standard</b>	100%		
<b>Data Collection Pl</b>	<u>an</u>		
Data Source		Per	formance Evaluation Forms
Data Collecto	or		Operations Manager
Frequency of Collection			Quarterly
Frequency of	Comparison to Thr	eshold by Team	Quarterly
Frequency of	CCT Review		Quarterly

**Baseline** (FY 21-22)

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
⊠ Operations/Hu	ıman Resources	☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		□ Human Resources	☐ Training
☐ Emergency Se		Supervisors	☐ Wellness
☐ Family & You	th Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	Organizational Did F	Expectation:	1 12 2 4 4
⊠ Achieve	Risk Exposure:	Region V Systems adheres to	-
☐ Avoid	⊠ Yes	contribute to the effective per personnel.	Tormance evaluation of its
☐ Eliminate	□ No	personner.	
☐ Preserve			
required deadline deadline, document the Y Drive, hard		Il performance evaluations are (completed evaluation = connted on the correct form; passworps signed by the employee are permance evaluation deadline.	nducted by the established word-protected and saved on
<b>Threshold</b>	100% of all e performance eval	mployees shall have a do- uation.	cumented, signed annual
Measurement Ty	<b>pe</b> Quarterly sco difference/trend/a		to demonstrate the
<b>Standard</b>	100%		
<b>Data Collection P</b>	<u>lan</u>		
Data Source		Annual Perf	formance Evaluation Forms
Data Collecto	or		Operations Manager
Frequency of Collection			Quarterly
Frequency of Comparison to Thr		eshold by Team	Quarterly
Frequency of	CCT Review		Quarterly
<u><b>Baseline</b></u> (FY 06-078%	97) <u>FY</u>	<u>Y 22-23 Average</u> %	

<b>Department:</b>	CQI Team:	
☐ Adult Network Services	☐ Business Interruption	☐ Internship
☐ Children & Family Services	☐ CARF Training	☐ Leadership
☐ Continuous Quality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal	☐ Corporate Citizenship	☐ Patches of Green
□ Operations/Human Resources	☐ Diversity Awareness	☐ Quality
Program:	& Acceptance	☐ Risk Management
☐ Consumer Involvement	⋈ Health & Safety	☐ Social Media
☐ Disaster Response	☐ Human Resources	☐ Training
☐ Emergency Services	Supervisors	☐ Wellness
☐ Family & Youth Investment	☐ Information	
☐ Housing	Technology Response	
☐ Network Providers		
☐ Prevention		
Scope: Organizational	<b>Expectation:</b>	
☐ Achieve <b>Risk Exposure:</b>	In an effort to maintain a high-	1 2
$\square$ Avoid $\boxtimes$ Yes	health and safety for all employ	
☐ Eliminate ☐ No	partners at Region V Systems,	
□ Preserve	conducted and documented acc schedule.	cording to the established
	schedule.	
<b>Quality Indicator</b> Completion of dri	lls according to established sche	edule.
Threshold 100% of drills con	mpleted per established schedule	e.
Measurement Type Quarterly scor difference/trend/a	1	o demonstrate the
Standard 100%		
<b>Data Collection Plan</b>		
Data Source	Drill	l and Inspection Schedule
Data Collector	Неа	alth & Safety Coordinator
Frequency of Collection		Quarterly
Frequency of Comparison to Thre	eshold by Team	Quarterly
Frequency of CCT Review		Quarterly
Baseline (FY 13-14) FY	<sup>7</sup> 22-23 Average	
88% 100	0%	

## **Quality Indicator #13**

<b>Department:</b>		CQI Team:	
☐ Adult Network S	Services	☐ Business Interruption	☐ Internship
☐ Children & Fami	ily Services	☐ CARF Training	☐ Leadership
☐ Continuous Qual	lity Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
□ Operations/Hum	an Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involv	vement	☐ Health & Safety	☐ Social Media
☐ Disaster Respons	se	☐ Human Resources	☐ Training
☐ Emergency Serv	ices	Supervisors	☐ Wellness
☐ Family & Youth	Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Provide	ers		
☐ Prevention			
Scope: O	<u>Organizational</u>	Expectation:	
$\Box$ Achieve $\boxed{\mathbf{R}}$	Risk Exposure:	Emergency Service Requests	receive priority
☐ Avoid	⊠ Yes	responses. Non-Emergency Se	ervice Requests are
☐ Eliminate ☐	□ No	processed in a timely manner.	
□ Preserve			
<b>Quality Indicator</b>	Service Requests	are addressed efficiently.	
<u>Threshold</u>	assigned to an addocumentation en	Requests are addressed efficient pplicable IT Response Team tered within one (1) business day equests must be entered within the content of t	member and have initial ay for emergency requests;
Measurement Type	Quarterly scor difference/trend/a	1	to demonstrate the
<b>Standard</b>	100%.		
<b>Data Collection Plan</b>	<u>n</u>		
Data Source		Service	Request System Database
Data Collector.		Tecl	nnology Systems Manager
Frequency of C	ollection		Quarterly
Frequency of C	omparison to Thr	eshold by Team	Quarterly
Frequency of C	CT Review		Quarterly

<u>Baseline</u> (FY 16-17) 96%

## **Quality Indicator #14**

<u>De</u>	oartment:		COI Team:	_
	Adult Network		☐ Business Interruption	☐ Internship
	Children & Fa	•	☐ CARF Training ☐ Leadership	
	Continuous Q	uality Improvement	☐ Contract	$\square$ Move It & Fix It
	Fiscal		☐ Corporate Citizenship	☐ Patches of Green
$\boxtimes$	Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Pro	gram:		& Acceptance	☐ Risk Management
	Consumer Inv	olvement	☐ Health & Safety	☐ Social Media
	Disaster Respo	onse	☐ Human Resources	☐ Training
	Emergency Se	ervices	Supervisors	☐ Wellness
	Family & You	th Investment	☐ Information	
	Housing		Technology Response	
	Network Prov	iders		
	Prevention			
Sc	ope:	<b>Organizational</b>	<b>Expectation:</b>	
$\boxtimes$	Achieve	Risk Exposure:	To maintain a high-quality sta	•
	Avoid	$\boxtimes$ Yes	accountability for all building	1 0
	Eliminate	□ No	Systems, it is expected that all	
	Preserve		appropriately keep the pegboa	rd updated.
	lity Indicator	including pegboar	ts are accurately documented durd status and visitor sign in, per	standard procedures.
Thre	<u>eshold</u>	during health and	occupants will be accurately do safety drills.	cumented on the pegboard
<u>Mea</u>	surement Typ	e Quarterly scor difference/trend/a	1	to demonstrate the
Stan	<u>idard</u>	100%		
<u>Data</u>	Collection Pl			
			Pegboard Printout	_
			He	·
	Frequency of	Collection		Quarterly
	Frequency of	Comparison to Thr	eshold by Team	Quarterly
	Frequency of	CCT Review		Quarterly
Bas	seline (FY 14-1	5) <b>FY</b>	<b>22-23 Average</b>	
87%		94		

## **Quality Indicator #15**

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
_	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
-	ıman Resources	☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		□ Human Resources	☐ Training
☐ Emergency Se		Supervisors	☐ Wellness
☐ Family & You	ith Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention	0 1 11 1	<b>D</b>	
Scope:	Organizational  Disk Exposures	Expectation:	stively conduct day to day
	Risk Exposure:  ⊠ Yes	A business necessity to effect operations knowing the available.	
	□ No	Systems employees.	additing of Region V
☐ Eliminate		Systems emproyees:	
☐ Preserve			
<b>Quality Indicator</b>	pegboard status of	s accurately documented. Superfeach of the employees they ser it is accurate according to the	supervise once a month to
Threshold	100% of Region Vector the pegboard.	V Systems employees will be	accurately documented on
Measurement Typ	e Quarterly scor difference/trend/a	1	to demonstrate the
<b>Standard</b>	100%		
<b>Data Collection Plan</b>	a <u>n</u>		
Data Source		HR Superviso	ors through Microsoft Form
Data Collecto	or		CQI Analyst
Frequency of Collection			Quarterly
Frequency of	Comparison to Thr	eshold by Team	Quarterly
Frequency of CCT Review			Quarterly

Baseline 93%

**FY 22-23 Average** 93%

Quality	Indicator	#16
---------	-----------	-----

<b>Department:</b>		CQI Team:	
□ Adult Network Service	es	☐ Business Interruption	☐ Internship
☐ Children & Family Se	☐ Children & Family Services		☐ Leadership
☐ Continuous Quality Ir	nprovement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Human Re	esources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involvement	nt	☐ Health & Safety	☐ Social Media
☐ Disaster Response		☐ Human Resources	☐ Training
☐ Emergency Services		Supervisors	☐ Wellness
☐ Family & Youth Inves	stment	☐ Information	
		Technology Response	
☐ Network Providers			
☐ Prevention			
	<u>izational</u>	<b>Expectation:</b>	
I	Exposure:	Increase the number of person	
$\square$ Avoid $\square$ Ye		RentWise education program	<del>-</del>
$\square$ Eliminate $\square$ No	O	obtain and keep rental housing	g.
☐ Preserve			
Threshold The	number of pe	ersons successfully completing	RentWise training offered
by I	Region V will	increase by 50% from baseline	e (target = 18).
	-	are independent to demonstrate the main focus of achievement	± •
<b>Standard</b> TBl	D		
<b>Data Collection Plan</b>			
Data Source		F	Registration Sign-in Sheets
Data Collector			Director of Network
Frequency of Collec	tion		Quarterly
Frequency of Compa	arison to Thr	reshold by Team	Quarterly
Frequency of CCT I	Review		Quarterly
Baseline (FY 21-22) 12 people, 2 course offering	ne	<u>FY 22-23</u> 13	

<b>Department:</b>		CQI Team:		
	Services	☐ Business Interruption	☐ Internship	
☐ Children & Fa	•	☐ CARF Training	☐ Leadership	
☐ Continuous Qu	uality Improvement	☐ Contract ☐ Move It & Fix It		
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green	
-	man Resources	☐ Diversity Awareness	☐ Quality	
Program:		& Acceptance	☐ Risk Management	
☐ Consumer Invo		☐ Health & Safety	☐ Social Media	
☐ Disaster Respo		☐ Human Resources	☐ Training	
☐ Emergency Se		Supervisors  Information	☐ Wellness	
☐ Family & You	tn investment	Technology Response		
<ul><li>✓ Housing</li><li>✓ Network Provi</li></ul>	dore	reciniology response		
☐ Prevention	idels			
Scope:	Organizational	Expectation:		
$\boxtimes$ Achieve	Risk Exposure:	Region V Systems' Rental As	sistance Program	
☐ Avoid	☐ Yes	(Substance Use/Mental Health	•	
☐ Eliminate	⊠ No	in achieving self-sustainable h	nousing.	
☐ Preserve				
<u>Threshold</u>	Persons served within the Rental Assistance Program (RAP) will experience a successful discharge (bridge to Section 8 or other housing bridge to self-sufficiency or self-terminate assistance).  70% (SUD/MH track combined) of RAP voucher participants (excluding one-time housing costs/flex fund recipients) will successfull discharge/bridge.			
Measurement Type	Quarterly scores a difference/trend/a	re independent to demonstrate verage.	the	
<u>Standard</u>	100%			
Data Collection Pla	<u>n</u>			
Data Source		Region V Sy	ystems Compass Software	
Data Collector	r		CQI Analyst	
Frequency of	Collection		Quarterly	
Frequency of	Comparison to Thro	eshold by Team	Quarterly	
Frequency of	CCT Review		Quarterly	
Baseline (FYs 20-22	2)	FY 22-23 Average of Qua	arterly Performance	
Programs Combine		Programs Combined:	68%	
	H: 63%	MH:	68.25%	
SU	D: 83%	SUD:	63.5%	

## **Quality Indicator #18**

<b>Department:</b>		CQI Team:	
	Services	☐ Business Interruption	☐ Internship
☐ Children & Fan	· ·	☐ CARF Training	☐ Leadership
☐ Continuous Qua	ality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	<ul><li>Patches of Green</li></ul>
☐ Operations/Hun	nan Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Invol		☐ Health & Safety	☐ Social Media
☐ Disaster Respor		☐ Human Resources	☐ Training
☐ Emergency Serv		Supervisors  ☐ Information	☐ Wellness
☐ Family & Youth	n investment	Technology Response	
<ul><li>✓ Housing</li><li>✓ Network Provid</li></ul>	lara	reemiology Response	
☐ Prevention	ieis		
	<u>Organizational</u>	Expectation:	
	Risk Exposure:	Region V Systems' Rental A	Assistance Program-
☐ Avoid	☐ Yes	Substance Use & Mental He	
☐ Eliminate	⊠ No	wait times so that people ga	in a stable place to live
□ Preserve		sooner.	
<u>Threshold</u>	People receiving measure.  The average numle Priority 1 MH: 2	one-time housing assistan	
Measurement Type	Quarterly scores trend/average.	s are independent to de	emonstrate the difference/
<b>Standard</b>	14 days MH, 60 d	lays SUD	
<b>Data Collection Plan</b>	<u>n</u>		
Data Source		Region V	Systems Compass Software
			Director of Network
Frequency of (	Collection		Quarterly
Frequency of (	Comparison to Thr	reshold by Team	Quarterly
Frequency of (	CCT Review		Quarterly
<b>Baseline</b> (FY 21-22 <b>P1</b> =25 days MH, 17 <b>P2</b> =87 days MH, 25	days SUD		<u>3</u> Days MH, 22 Days SUD Days MH, 28 Days SUD

<b>Department:</b>		CQI To	eam:		
☐ Adult Netv	☐ Adult Network Services		siness Interruption	☐ Internship	)
☐ Children &	Family Services	□ CA	ARF Training	☐ Leadershi	ip
☐ Continuou	s Quality Improv	ement   $\square$ Co	ntract	$\square$ Move It $\delta$	& Fix It
☐ Fiscal		☐ Co	rporate Citizenship	☐ Patches o	f Green
☐ Operations	s/Human Resourc	es 🔲 Di	versity Awareness	$\square$ Quality	
<b>Program:</b>		&	Acceptance	☐ Risk Man	agement
☐ Consumer	Involvement	□ Не	alth & Safety	☐ Social Me	edia
☐ Disaster R	esponse		man Resources	☐ Training	
☐ Emergency	y Services		pervisors	☐ Wellness	
☐ Family &	Youth Investmen	•	ormation		
☐ Housing		Те	chnology Response		
☐ Network P	roviders				
☐ Prevention	<u> </u>				
Scope:	<b>Organizatio</b>				
	Risk Exposi		will improve function	U	
☐ Avoid	☐ Yes		ating in the Family	& Youth Investm	ent
☐ Eliminate	⊠ No	prograi	program.		
☐ Preserve					
<b>Quality Indicat</b>			gated Average Chi	ld Adolescent F	<b>Functioning</b>
	Assessme	nt Scale (CAFA)	S) scores.		
<u>Threshold</u>	on any of 10-point discharge	the 8 domains v (mild/minimal	int (severe impairmed vill decrease to 20-perope impairment) when (Must have a 30 in a (All tracks).	oint (moderate in comparing ad	mpairment), mission to
Measurement 7			lative for current quasithe main focus of a	-	quarters in
<b>Standard</b>	100%				
<b>Data Collection</b>	n Plan				
Data Sour	rce			FYI Evaluatio	on Database
Data Coll	ector			CQI 1	Department
Frequency	y of Collection				Quarterly
Frequenc	y of Comparison	to Threshold b	y Team		Quarterly
Frequency	y of MT Review			•••••	Quarterly
		47%	Track Prevention Juvenile Justice	Baseline 43.7% (16-17) 33% (16-17)	FY 22-23 24% N/A%

## **Quality Indicator #20**

<u>Der</u>	oartment:		CQI Team:		
	Adult Networl	k Services	☐ Business Inte	erruption $\square$	Internship
$\boxtimes$	Children & Fa	mily Services	☐ CARF Traini	ing $\square$	Leadership
	Continuous Q	uality Improvement	☐ Contract		Move It & Fix It
	Fiscal		☐ Corporate Ci	tizenship $\Box$	Patches of Green
	Operations/Hu	ıman Resources	☐ Diversity Aw	areness $\square$	Quality
Pro	gram:		& Acceptanc		Risk Management
	Consumer Inv		☐ Health & Saf	<u> </u>	Social Media
	Disaster Respo		☐ Human Reso	urces	Training
	Emergency Se		Supervisors		Wellness
$\boxtimes$	Family & You	ith Investment	☐ Information	D	
	Housing		Technology 1	Response	
	Network Prov	iders			
	Prevention				
	ope:	<u>Organizational</u>	<b>Expectation:</b>		
$\boxtimes$	Achieve	Risk Exposure:	Youth will impro	_	
	Avoid	☐ Yes	participating in th	e Family & You	ith Investment
	Eliminate	⊠ No	program.		
	Preserve				
<u>Qua</u>	<u>lity Indicator</u>	Aggregated Aver (CAFAS).	rage Child Adole	scent Functioni	ng Assessment Scale
Thre	<u>eshold</u>		ed youth's total CA intake vs. discharg		decrease by 20 points acks).
Mea	surement Typ		are cumulative for quarter as the main	-	nd previous quarters in ement.
Stan	dard	100%			
<u>Data</u>	Collection Pl	<u>an</u>			
	Data Source				Fidelity EHR
	Data Collecto	or			CQI Department
	Frequency of	f Collection			Quarterly
	Frequency of	f Comparison to Thr	eshold by Team	•••••	Quarterly
	Frequency of	f CCT Review			Quarterly
Tra	<u>ick</u>	Baseline (FY 10-	11 Average)	FY 22-23	
	FYI	62.5%		66%	
	ditional	45%		70%	
	nsition	46%		83%	
Pre	vention	50%		35%	

NA%

Juvenile Justice 57% (FY 15-16)

☐ Adult Network		CQI Team:	
Adult Network	Services	☐ Business Interruption	☐ Internship
□ Children & Fam	nily Services	☐ CARF Training	☐ Leadership
☐ Continuous Qua	ality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal	• 1	☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hun	nan Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Invol	lvement	☐ Health & Safety	☐ Social Media
☐ Disaster Respon	ise	☐ Human Resources	☐ Training
☐ Emergency Serv		Supervisors	□ Wellness
☐ ☐ Family & Youth		☐ Information	
☐ Housing		Technology Response	
☐ Network Provid	lers		
☐ Prevention			
1	Organizational	<b>Expectation:</b>	
	Risk Exposure:	Youth will improve functioning	ng as a result of
☐ Avoid	☐ Yes	participating in the Family &	•
☐ Eliminate	⊠ No	program.	
⊠ Preserve			
<b>Quality Indicator</b>	Aggregated aver	age Child Adolescent Funct	ioning Assessment Scale
<u>-</u>	(CAFAS).		C
Threshold	40% of youth with an admission score of 80 or more will leave the I program with a total CAFAS score below 80 (the required admission sco (All Tracks).		
Measurement Type Quarterly scores are cumulative for cur FY, with the last quarter as the main for			ter and previous quarters in
		quarter as the main focus of act	hievement.
<b>Standard</b>		quarter as the main focus of act	hievement.
Standard  Data Collection Plan	FY, with the last of 100%	quarter as the main focus of act	
Standard  Data Collection Plan Data Source	FY, with the last of 100%		FYI Evaluation Database
Standard  Data Collection Plan  Data Source  Data Collector	FY, with the last of 100%		FYI Evaluation DatabaseCQI Department
Standard  Data Collection Plan Data Source Data Collector Frequency of C	FY, with the last of 100%  n  Collection		FYI Evaluation Database CQI Department Quarterly
Standard  Data Collection Plan Data Source Data Collector Frequency of C	FY, with the last of 100%  n  Collection		FYI Evaluation DatabaseCQI DepartmentQuarterlyQuarterly
Standard  Data Collection Plan Data Source Data Collector Frequency of C	FY, with the last of 100%  n  Collection	eshold by Team	FYI Evaluation DatabaseCQI DepartmentQuarterlyQuarterlyQuarterly
Standard  Data Collection Plan Data Source Data Collector Frequency of Control Frequency	FY, with the last of 100%  n  Collection	reshold by Team	FYI Evaluation DatabaseCQI DepartmentQuarterlyQuarterlyQuarterly
Standard  Data Collection Plan Data Source Data Collector Frequency of C Frequency of C Frequency of C Track All FYI Traditional	FY, with the last of 100%  n  Collection	reshold by Team	FYI Evaluation DatabaseCQI DepartmentQuarterlyQuarterlyQuarterly
Standard  Data Collection Plan Data Source Data Collector Frequency of Control Frequency	FY, with the last of 100%  n  Collection	eshold by Team	FYI Evaluation DatabaseCQI DepartmentQuarterlyQuarterlyQuarterly
Standard  Data Collection Plan Data Source Data Collector Frequency of C Frequency of C Frequency of C Track All FYI Traditional	EY, with the last of 100%  n  Collection	FY 22-23 Perform 42% 44%	FYI Evaluation DatabaseCQI DepartmentQuarterlyQuarterlyQuarterly

#### **Quality Indicator #22**

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		☐ Human Resources	☐ Training
☐ Emergency Se		Supervisors	☐ Wellness
☐ Family & You	ith Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	Organizational Did E	Expectation:	. 1, C
⊠ Achieve	Risk Exposure:  ☐ Yes	Youth will improve function participating in the Family &	<u> </u>
☐ Avoid	□ res □ No	program.	Touth investment (1.11)
☐ Eliminate	△ INO	program.	
☐ Preserve	TD1 41 4	. 1	. 4 01.11
<b>Quality Indicator</b>		me indicators for the FYI ioning Assessment Scale (CAI	
		Decrease severe impairment (	
		AFAS score below 80 points).	so, or any domain, and s,
There should		_	
<b>Threshold</b>	outcome indicato	emonstrate improvement on	one or more of the three
	outcome marcato	is. (All tracks).	
<b>Measurement Typ</b>		are cumulative for current quar	
	FY, with the last	quarter as the main focus of ac	hievement.
<u>Standard</u>	100%		
<b>Data Collection Plan</b>	a <u>n</u>		
Data Source.			FYI Evaluation Database
Data Collecto	or		CQI Department
Frequency of	Collection		Quarterly
Frequency of	Comparison to Thr	eshold by Team	Quarterly
Frequency of	CCT Review		Quarterly
<u>Track</u>	<b>Baseline</b>	FY 22-23	
All FYI	69% (15-16)	68%	
Traditional	80% (16-17)	74%	
Transition Prevention	40% (16-17) 75.7% (16-17)	83% 35%	
Juvenile Justice	45% (16-17)	NA%	

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
□ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv	olvement	☐ Health & Safety	☐ Social Media
☐ Disaster Respo	onse	☐ Human Resources	☐ Training
☐ Emergency Se	ervices	Supervisors	☐ Wellness
☐ Family & You	th Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	<b>Organizational</b>	<b>Expectation:</b>	
	Risk Exposure:	All wraparound teams will h	* *
☐ Avoid	☐ Yes	identified informal support of	on their team member list.
☐ Eliminate	⊠ No		
☐ Preserve			
<b>Quality Indicator</b>	Documentation o	f informal supports on wrapar	ound teams.
Threshold		will have at least one identificate (utilize FYI statewide con acks).	
Measurement Typ	e Quarterly sco difference/trend/a	1	to demonstrate the
<b>Standard</b>	•	at plans and teams in the 2003 formal resources; 32% had on	- •
<b>Data Collection Pl</b>	<u>an</u>		
Data Source		FYI	Peer Review Process Form
Data Collecto	or	FYI Serv	vice Coordination Specialist
Frequency of	Collection		Quarterly
Frequency of	f Comparison to The	eshold by Team	Quarterly
Frequency of	CCT Review		Quarterly
Track	Baseline	FY 22-23 Average	
All FYI	72% (FY 08-09)	82%	
Traditional	86% (FY 11-12)	79%	
Transition	89% (FY 11-12)	91%	
Prevention	76% (FY 11-12)	89%	
Juvenile Justice	26% (FY 16-17)	100%	

## **Quality Indicator #24**

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	· ·	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		☐ Human Resources	$\square$ Training
☐ Emergency Se		Supervisors	☐ Wellness
☐ Family & You	th Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention	0 ' " 1	T	
Scope:	Organizational Risk Exposure:	Expectation: All wraparound teams will ha	ova at least one (1)
<ul><li>✓ Achieve</li><li>✓ Avoid</li></ul>	Yes Yes	informal support from their to	
☐ Eliminate	⊠ No	child/family monthly team m	
☐ Preserve		Plan of Care (POC) goals.	S. I. I. I.
Quality Indicator	Documentation of	f informal supports attending	child/family monthly toam
Quanty mulcator		ipating in POC goals.	child/family monumy team
<u>Threshold</u>	at least one information monthly team me	with an informal support on their mal support on their team men etings or <u>participate</u> in POC go mal support definition; All Trac	nber list <u>attend</u> child/family oals (utilizing FYI statewide
Measurement Type	e Quarterly scores a	re independent to demonstrate the	he difference/trend/average.
<b>Standard</b>	· · · · · · · · · · · · · · · · · · ·	t plans and teams in the 2003 rmal resources; 32% had one; 89	- ·
<b>Data Collection Pla</b>	<u>ın</u>		
		FY	
Data Collecto	r	FYI Ser	vice Coordination Specialist
Frequency of	Collection		Quarterly
Frequency of	Comparison to Three	shold by Team	Quarterly
Frequency of	CCT Review		Quarterly
<b>Track</b>	<b>Baseline</b>	FY 22-23 Average	<u>e</u>
All FYI	58% (October 2004	·	
Traditional Transition	65% (FY 11-12) 66% (FY 11-12)	52% 89%	
Prevention	47% (FY 11-12)	45%	

100%

89% (FY 16-17)

Juvenile Justice

<b>Department:</b>		CQI Team:	
☐ Adult Networl	x Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		☐ Human Resources	☐ Training
☐ Emergency Se		Supervisors	☐ Wellness
☐ ⊠ Family & You	th Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	<u>Organizational</u>	Expectation:	
	Risk Exposure:		eir home while being served
☐ Avoid	⊠ Yes	in the FYI program.	
☐ Eliminate	□ No		
☐ Preserve			
<b>Quality Indicator</b>	Place of residence	2.	
<u>Threshold</u>	program (if youth	resides out of their home for ne month, it will not be	ome while served in the FYI less than two [2] consecutive considered an out-of-home
Measurement Typ	<b>e</b> Quarterly score trend/average.	s are independent to de	emonstrate the difference/
Standard	100%		
Data Collection Pl	<u>an</u>		
Data Source		FY	I Peer Review Process Form
Data Collecto	or	FYI Se	rvice Coordination Specialist
Frequency of	Collection		Quarterly
Frequency of	Comparison to The	eshold by Team	Quarterly
Frequency of	CCT Review		Quarterly
<b>Tracks</b>	<b>Baseline</b>		3 Average
All FYI	89% (June		
Traditional Transition	98% (FY 1 100% (FY	· · · · · · · · · · · · · · · · · · ·	
Prevention	100% (F1 100% (FY		
Juvenile Justice	81% (FY 1		

<b>Department:</b>		CQI Team:	
☐ Adult Networ	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	amily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
<b>Program:</b>		& Acceptance	☐ Risk Management
☐ Consumer Inv	rolvement	☐ Health & Safety	☐ Social Media
☐ Disaster Resp	onse	☐ Human Resources	☐ Training
☐ Emergency Se	ervices	Supervisors	☐ Wellness
☐ Family & You	th Investment	☐ Information	
☐ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention	<del>,</del>		
Scope:	<b>Organizational</b>	Expectation:	
☐ Achieve	Risk Exposure:	Child and Family Teams wil	l have a team meeting at
☐ Avoid	⊠ Yes	least once a month.	
☐ Eliminate	□ No		
□ Preserve			
Quality Indicator	Team meeting su	mmary	
	_	-	
<b>Threshold</b>	90% of families participants).	will have a team meeting e	every month (all FYI track
Measurement Ty	<b>pe</b> Quarterly sco difference/trend/a	1	to demonstrate the
<u>Standard</u>	100%		
<b>Data Collection F</b>	<u>Plan</u>		
Data Source			Team Meeting Summary
Data Collecte	or		Quality Team
Frequency of	f Collection		Quarterly
Frequency of	f Comparison to Thi	reshold by Team	Quarterly
Frequency of	f CCT Review		Quarterly
Track	<b>Baseline</b>	<b>FY 22-23 Avera</b>	ge
All FYI	100% (June 2005)	93%	<del>a_</del>
Traditional	93%	93%	
Transition	90%	94%	
Prevention Juvenile Justice	88% 94% (FY 16-17)	90% 100%	

#### **Quality Indicator #27**

<u>De</u>	oartment:		<b>CQI Team:</b>	
	Adult Network	k Services	☐ Business Interruption	☐ Internship
$\boxtimes$	Children & Fa	mily Services	☐ CARF Training	☐ Leadership
	☐ Continuous Quality Improvement		☐ Contract	☐ Move It & Fix It
	Fiscal		☐ Corporate Citizenship	☐ Patches of Green
	Operations/Hu	ıman Resources	☐ Diversity Awareness	$\square$ Quality
Pro	gram:		& Acceptance	☐ Risk Management
	Consumer Inv	olvement	☐ Health & Safety	☐ Social Media
	Disaster Respo	onse	☐ Human Resources	☐ Training
	Emergency Se	ervices	Supervisors	☐ Wellness
$\boxtimes$	Family & You	ith Investment	☐ Information	
	Housing		Technology Response	
	Network Prov	iders		
	Prevention			
Sc	ope:	<b>Organizational</b>	<b>Expectation:</b>	
	Achieve	Risk Exposure:	FYI will serve families living	
	Avoid	⊠ Yes	areas of Region V Systems in	relative proportion of
	Eliminate	□ No	population.	
$\boxtimes$	Preserve			
Qua	lity Indicator	County of residen	ace at monthly review.	
<u>Thr</u>	<u>eshold</u>	30% of clients in track).	the FYI program will reside in	rural counties (Traditional
Mea	surement Typ	e Quarterly scor difference/trend/a	1	to demonstrate the
Star	<u>idard</u>	30%		
<u>Data</u>	a Collection Pl	<u>an</u>		
			onsumer Enrollment Summary	
	Data Collecto	or	FYI Serv	ice Coordination Specialist
	Frequency of	f Collection		Quarterly
	Frequency of	f Comparison to Thr	eshold by Team	Quarterly
	Frequency of	CCT Review		Quarterly

Track Traditional **Baseline** FY 22-23 Average

31% (June 2004) 31%

#### **Quality Indicator #28**

<u>De</u>	<u>partment:</u>		CQI Team:	
	☐ Adult Network Services		☐ Business Interruption	☐ Internship
$\boxtimes$	Children & Fa	mily Services	☐ CARF Training	☐ Leadership
	Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
	Fiscal		☐ Corporate Citizenship	☐ Patches of Green
	Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Pro	ogram:		& Acceptance	☐ Risk Management
☐ Consumer Involvement		olvement	☐ Health & Safety	☐ Social Media
	Disaster Respo	onse	☐ Human Resources	☐ Training
	Emergency Se	ervices	Supervisors	☐ Wellness
$\boxtimes$	Family & You	ıth Investment	☐ Information	
	Housing		Technology Response	
	Network Prov	iders		
	Prevention			
Sc	ope:	Organizational	Expectation:	
	Achieve	Risk Exposure:	FYI Professional Partners wil	l meet established
	Avoid	⊠ Yes	performance gauges in an atte	•
	Eliminate	□ No	the wraparound model occurs	
$\boxtimes$	Preserve			
	ality Indicator		ners performance gauges. rofessional Partners performance	ce will be met on all of their
Mea	nsurement Typ	e Quarterly sco difference/trend/a	1	to demonstrate the
Star	<u>ndard</u>	100%		
Data	a Collection Pl	<u>an</u>		
	Data Source			FYI Supervisors
	Data Collecto	or		Service Coordinator
				•
	Frequency of	f Comparison to Thr	eshold by Team	Quarterly
	Frequency of	f CCT Review		Quarterly
	- •			•

**<u>Baseline</u>** 99% (FY 16-17) **<u>FY 22-23 Average</u>** 99%

## **Quality Indicator #29**

Department:		CQI Team:	
	Services	☐ Business Interruption	☐ Internship
☐ Children & Fam	ily Services	☐ CARF Training	☐ Leadership
☐ Continuous Qua	lity Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hum	an Resources	☐ Diversity Awareness	☐ Quality
<b>Program:</b>		& Acceptance	☐ Risk Management
☐ Consumer Involv	vement	☐ Health & Safety	☐ Social Media
☐ Disaster Respons	se	☐ Human Resources	☐ Training
☐ Emergency Serv		Supervisors	☐ Wellness
☐ Family & Youth	Investment	☐ Information	
☐ Housing		Technology Response	
□ Network Provide	ers		
☐ Prevention			
'	<u>Organizational</u>	Expectation:	
l –	Risk Exposure:	Per Region V Systems' policy	• •
	⊠ Yes	receive site visit reports withit completion of site visit.	in forty-five (45) days of
☐ Eliminate	□ No	completion of site visit.	
☐ Preserve			
<b>Quality Indicator</b>	Time between co	mpletion of site visit and distri	bution of site visit report.
<u>Threshold</u>	report as prepare	R Providers will receive a copy d by Region V Systems' Netw siness days of completion of th	ork Administration within
<b>Measurement Type</b>	Quarterly scorestrend/average.	s are independent to den	nonstrate the difference/
<b>Standard</b>	100%		
<b>Data Collection Plan</b>	<u>1</u>		
Data Source			Site Visit Reports
<b>Data Collector</b>			Network Director
Frequency of C	Collection		Quarterly
Frequency of C	Comparison to Thr	reshold by Team	Quarterly
Frequency of C	CCT Review		Quarterly
Baseline (FY 06-07)	FY	<u> </u>	

66%

21.5%

## **Quality Indicator #30**

Department:		CQI Team:	
	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	amily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		☐ Human Resources	☐ Training
☐ Emergency Se		Supervisors	☐ Wellness
☐ Family & You	ith Investment	☐ Information	
$\square$ Housing		Technology Response	
Network Prove     □	iders		
☐ Prevention	T		
Scope:	<u>Organizational</u>	Expectation:	
☐ Achieve	Risk Exposure:	Network Administration will the site visit to Network Prov	
☐ Avoid	⊠ Yes	with provider employees.	riders in an exit conference
☐ Eliminate	□ No	with provider employees.	
<ul><li>☑ Preserve</li><li>Quality Indicator</li></ul>	Number of site vi	sit exit conferences.	
			% of Network Providers at
Quality Indicator	Exit conferences	sit exit conferences.  will be completed with 100% ch agency/program site visit.	% of Network Providers at
Quality Indicator  Threshold	Exit conferences completion of each	will be completed with 1009 ch agency/program site visit.	
Quality Indicator	Exit conferences completion of each	will be completed with 1009 ch agency/program site visit. res are independent	% of Network Providers at to demonstrate the
Quality Indicator Threshold Measurement Ty	Exit conferences completion of each	will be completed with 1009 ch agency/program site visit. res are independent	
Quality Indicator  Threshold	Exit conferences completion of each per Quarterly scondifference/trend/a	will be completed with 1009 ch agency/program site visit. res are independent	
Quality Indicator Threshold Measurement Ty	Exit conferences completion of each pe Quarterly sco difference/trend/a	will be completed with 1009 ch agency/program site visit. res are independent	
Quality Indicator Threshold  Measurement Ty  Standard  Data Collection P	Exit conferences completion of each pe Quarterly scondifference/trend/au 100%	will be completed with 1009 ch agency/program site visit. res are independent	to demonstrate the
Quality Indicator Threshold  Measurement Ty  Standard  Data Collection P  Data Source	Exit conferences completion of each completion of each completion of each complete c	will be completed with 100% ch agency/program site visit.  res are independent average.	to demonstrate the  Site Visit Survey
Quality Indicator Threshold  Measurement Ty  Standard  Data Collection P  Data Source of Data Collected	Exit conferences completion of each pe Quarterly sco difference/trend/a 100%	will be completed with 1009 ch agency/program site visit. res are independent average.	to demonstrate the  Site Visit Survey  Network Director
Quality Indicator Threshold  Measurement Ty  Standard  Data Collection P  Data Source Data Collector Frequency of	Exit conferences completion of each completion of each pe Quarterly scondifference/trend/a 100%  Plan  Collection	will be completed with 1009 ch agency/program site visit.  res are independent average.	to demonstrate the  Site Visit Survey  Network Director  Quarterly
Quality Indicator Threshold  Measurement Ty  Standard  Data Collection P  Data Source Data Collector Frequency of	Exit conferences completion of each pe Quarterly sco difference/trend/a 100%  Plan  Collection	will be completed with 1009 ch agency/program site visit. res are independent average.	to demonstrate the  Site Visit Survey  Network Director  Quarterly  Quarterly

100%

100%

## **Quality Indicator #31**

	artment:		CQI Team:	
$\boxtimes$	Adult Networl		☐ Business Interruption	☐ Internship
	Children & Fa	mily Services	☐ CARF Training	☐ Leadership
	Continuous Qu	uality Improvement	☐ Contract	$\square$ Move It & Fix It
	Fiscal		☐ Corporate Citizenship	☐ Patches of Green
	Operations/Hu	ıman Resources	☐ Diversity Awareness	$\square$ Quality
<b>Pro</b>	gram:		& Acceptance	☐ Risk Management
☐ Consumer Involvement		olvement	☐ Health & Safety	☐ Social Media
	Disaster Respo	onse	☐ Human Resources	☐ Training
	Emergency Se	ervices	Supervisors	☐ Wellness
	Family & You	th Investment	☐ Information	
	Housing		Technology Response	
$\boxtimes$	Network Prov	iders		
	Prevention			
Sco	pe:	<b>Organizational</b>	<b>Expectation:</b>	
$\boxtimes$	Achieve	Risk Exposure:	Region V Systems offers qua	<u> </u>
	Avoid	□ Yes	trainings to employees, comr	nunity, and network
	Eliminate	⊠ No	providers.	
	Preserve			
Qua	lity Indicator	Training evaluation	ons from evidence-based imple	ementation programs.
<u>Thre</u>	<u>eshold</u>		implementation training sponsoverall satisfactory rating of 85	• •
<u>Mea</u>	surement Typ	Quarterly sco difference/trend/a	1	to demonstrate the
Stan	<u>dard</u>	90%		
<u>Data</u>	Collection Pl	<u>an</u>		
	Data Source		Evidence-	based Training Evaluations
	Data Collecto	or		Director of Special Projects
	Frequency of	f Collection		Quarterly
	Frequency of	f Comparison to Thr	reshold by Team	Quarterly
	Frequency of	f CCT Review		Quarterly
D	line (EV 21-22	1)	EV 22 23 Average	

Baseline (FY 21-22)

FY 22-23 Average

93%

95%

(17 EBP trainings in MI/DBT offered;

4,860 positive responses/5,217 total responses)

## **Quality Indicator #32**

<b>Department:</b>		CQI Team:	
⊠ Adult Network	Services	☐ Business Interruption	☐ Internship
☐ Children & Fan	nily Services	☐ CARF Training	☐ Leadership
☐ Continuous Quality Improvement		☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hun	nan Resources	☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
Consumer Invol		☐ Health & Safety	☐ Social Media
☐ Disaster Respon		☐ Human Resources	☐ Training
Emergency Ser		Supervisors	☐ Wellness
Family & Youtl	h Investment	☐ Information	
☐ Housing		Technology Response	
⊠ Network Provid	lers		
☐ Prevention			
l -	Organizational	Expectation:	
	Risk Exposure: □ Yes	Region V Systems has a prov maintains Evidence Based Pr	
☐ Avoid		possible outcomes of the peo	
☐ Eliminate	⊠ No	recovery.	ple we serve and then
⊠ Preserve		J	
Quality Indicator	Training attendaterainings.	nce at all Region V System	ns evidence-based practice
<u>Threshold</u>	evidence-based tr Quarter 3, 89% (8	evidence-based practice applianing during the fiscal year. (89/100) of approved evidenced evidence-based training)	Example of reporting: In
Measurement Type		are independent to demonstrat the main focus of achievemen	-
<b>Standard</b>	90%		
Standard  Data Collection Pla			
Data Collection Pla	<u>n</u>	Evidence-Based F	Participant Training Reports
Data Collection Pla  Data Source  Data Collector	<u>n</u>		Director of Special Projects
Data Collection Pla  Data Source  Data Collector  Frequency of 0	<u>n</u> rCollection		Director of Special Projects
Data Collection Pla  Data Source  Data Collector  Frequency of 0	<u>n</u> rCollection		Director of Special Projects
Data Collection Pla  Data Source  Data Collector  Frequency of 6  Frequency of 6	n rCollectionComparison to Thr		Director of Special Projects

**Baseline** (FY 21-22)

FY 22-23 Average

## **Quality Indicator #33**

<b>Department:</b>		COLE	
		CQI Team:	
☐ Adult Network S	ervices	☐ Business Interruption	☐ Internship
☐ Children & Fami	ly Services	☐ CARF Training	☐ Leadership
☐ Continuous Qual	ity Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hum	an Resources	☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involv		☐ Health & Safety	☐ Social Media
☐ Disaster Respons		☐ Human Resources	☐ Training
☐ Emergency Serv		Supervisors	☐ Wellness
Family & Youth	Investment		
☐ Housing		Technology Response	
☐ Network Provide	ers		
☐ Prevention			
	<u>rganizational</u>	Expectation:	
-	isk Exposure:	Region V Systems has a provi	
☐ Avoid	Yes	maintains Evidence-Based Propossible outcomes of the peop	
	⊠ No	recovery.	one we serve and then
☐ Preserve		1000 (01)	
<b>Quality Indicator</b>	Adherence to fice evidence-based pro-	lelity and outcomes reporting cogram delivery.	g required in maintaining
<u>Threshold</u>	and outcomes rep delivery at the en 80% (8/10) of app	evidence-based programs will corting requirements to maintain d of the fiscal year. (Example proved programs, per evidence	in evidence-based practice of reporting: In Quarter 3,
	requirements)		
Measurement Type	Quarterly scores trend/average.	s are independent to dem	nonstrate the difference/
Measurement Type  Standard	Quarterly scores	s are independent to dem	nonstrate the difference/
	Quarterly scores trend/average.	s are independent to dem	onstrate the difference/
Standard  Data Collection Plan	Quarterly scores trend/average.	are independent to dem	
Standard  Data Collection Plan  Data Source	Quarterly scores trend/average.	•	articipant Training Reports
Standard  Data Collection Plan  Data Source  Data Collector .	Quarterly scores trend/average.	Evidence-Based Pa	articipant Training Reports Director of Special Projects
Standard  Data Collection Plan  Data Source  Data Collector .  Frequency of C	Quarterly scores trend/average. 100%	Evidence-Based Pa	articipant Training Reports Director of Special Projects Quarterly

<u>Baseline</u> (FY 22-23) 91%

#### **Quality Indicator #34**

<b>Department:</b>		CQI Team:	
☐ Adult Networ	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	amily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/H  □ Operations/H	uman Resources	☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv	olvement	☐ Health & Safety	☐ Social Media
☐ Disaster Resp	onse	☐ Human Resources	☐ Training
☐ Emergency Se	ervices	Supervisors	☐ Wellness
☐ Family & You	ath Investment	☐ Information	
		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	<u>Organizational</u>	<b>Expectation:</b>	
	Risk Exposure:	Region V Systems' Rural and	
☐ Avoid	⊠ Yes	Housing will provide interim	
☐ Eliminate	□ No	in achieving self-sustainable	housing.
☐ Preserve			
<b>Quality Indicator</b>	Rural (RPH), Line Housing Units	coln (LPH), and Rural Transit	ion-age (RTPH) Permanent
<u>Threshold</u>		and RTPH Programs will manuf program unit capacity/utilization 7 Units).	<u> </u>
Measurement Ty	<b>pe</b> Quarterly scores a	are independent; the focus will	be an average for the year.
<b>Standard</b>	100%		
<b>Data Collection P</b>	<u>Plan</u>		
Data Source			Housing Status Update
Data Collecto	or		<b>HUD Housing Coordinator</b>
Frequency of	f Collection		Quarterly
Frequency of	f Comparison to Thr	reshold by Team	Quarterly
Frequency of	f CCT Review		Quarterly
Baseline (FY 20-2	(1) <b>FY</b>	Y 22-23 Average	

Baseline (FY 20-21)
88% Rural

FY 22-23 Average
Overall: 80%

RPH: 84% LPH: 97% RTPH: 25%

#### **Quality Indicator #35**

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Fa	mily Services	☐ CARF Training	☐ Leadership
☐ Continuous Q	uality Improvement	☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Hu	ıman Resources	☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Inv		☐ Health & Safety	☐ Social Media
☐ Disaster Respo		☐ Human Resources	☐ Training
☐ Emergency Se		Supervisors	☐ Wellness
Family & You	th Investment	☐ Information	
⊠ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention		_	
Scope:	Organizational	Expectation:	II
⊠ Achieve	Risk Exposure:  ⊠ Yes	Rural & Lincoln Permanent established performance gau	
☐ Avoid	□ No	of Housing and Urban Deve	
☐ Eliminate		are met.	topment (1102) gardennes
Preserve	Dural (DDII) Lin	coln (I DII) and Dural Transi	tion aga (DTDII) Dammanant
<b>Quality Indicator</b>	Housing Perform	coln (LPH), and Rural Transi	non-age (KTPH) Permanent
There sheetd	<u> </u>	<u> </u>	
<b>Threshold</b>	met on the progra	LPH, and RTPH Housing pro	ograms performance will be
		nn gauges. nents (program participants are e	nrolled in Clarity NMIS within
	the required tir		
		nspections Conducted (Annual F	IQS inspections are conducted
		of initial enrollment date)	. 1
		nspection Data (Annual HQS Inso later than 30 days after initial e	
<b>Measurement Typ</b>	•		to demonstrate the
wicasurement Typ	difference/trend/a	-	to demonstrate the
<b>Standard</b>	100%		
<b>Data Collection Pl</b>	an		
			Housing Status Undate
			_
			•
	_	reshold by Team	•
Frequency of	CCT Review		Quarterly
D 11 (EV. 20. 2		7.44.44 D	

Baseline (FY 20-21) 100% Rural

## **Quality Indicator #36**

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Family Services		☐ CARF Training	☐ Leadership
☐ Continuous Quality Improvement		☐ Contract	$\square$ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Human Resources		☐ Diversity Awareness	$\square$ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involvement		☐ Health & Safety	☐ Social Media
☐ Disaster Response		☐ Human Resources	☐ Training
☐ Emergency Services		Supervisors	☐ Wellness
☐ Family & You	ith Investment	☐ Information	
		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	<b>Organizational</b>	Expectation:	
$\boxtimes$ Achieve	Risk Exposure:	Region V Systems' Permane	•
☐ Avoid	⊠ Yes	persons served in achieving	self-sustainable housing.
☐ Eliminate	□ No		
☐ Preserve			
Quality Indicator		ermanent Housing will remai ent Housing or by discharging	,
<u>Threshold</u>		m participants will remain her permanent housing (annua	
Measurement Typ	Quarterly sco difference/trend/a	1	to demonstrate the
<u>Standard</u>	90%		
Data Collection Pl	<u>an</u>		
			•
Data Collecto	or	Admin	nistrative Program Specialist
Frequency of CollectionQuarterl			Quarterly
Frequency of Comparison to Thre		reshold by Team	Quarterly
Eroguener of			
r requency of	f CCT Review		Quarterly

FY 22-23 Average

New Goal

<u>Baseline</u> To be determine

<b>Department:</b>		CQI Team:	
☐ Adult Networl	k Services	☐ Business Interruption	☐ Internship
☐ Children & Family Services		☐ CARF Training	☐ Leadership
☐ Continuous Quality Improvement		☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Human Resources		☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involvement		☐ Health & Safety	☐ Social Media
☐ Disaster Response		☐ Human Resources	☐ Training
☐ Emergency Services		Supervisors	☐ Wellness
☐ Family & Youth Investment		☐ Information	
		Technology Response	
☐ Network Prov	iders		
☐ Prevention	<b>.</b>		
Scope:	<u>Organizational</u>	Expectation:	
⊠ Achieve	Risk Exposure:	Region V Systems' Permane	<u> </u>
☐ Avoid	⊠ Yes	persons served with maintain	ling nousing.
☐ Eliminate	□ No		
☐ Preserve			
<b>Quality Indicator</b>	months of enrollr		G
<u>Threshold</u>	Less than 10% of 6 months of prog	program participants will returam enrollment.	rn to unhoused status within
Measurement Typ	Quarterly sco difference/trend/a	1	to demonstrate the
<b>Standard</b>	10%		
<b>Data Collection Pl</b>			
Data Source			
		Admin	9 1
Frequency of	f Collection		Quarterly
Frequency of	f Comparison to Thi	eshold by Team	Quarterly
Frequency of	f CCT Review		Quarterly
Baseline To be determined		FY 22-23 Average New Goal	

## **Quality Indicator #38**

<b>Department:</b>		CQI Team:	
☐ Adult Network Services		☐ Business Interruption	☐ Internship
☐ Children & Family Services		☐ CARF Training	☐ Leadership
☐ Continuous Quality Improvement		☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Human Resources		☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involvement		☐ Health & Safety	☐ Social Media
☐ Disaster Response		☐ Human Resources	☐ Training
☐ Emergency Services		Supervisors	☐ Wellness
☐ Family & Youth Investment		☐ Information	
		Technology Response	
☐ Network Prov	iders		
☐ Prevention	<b>.</b>		
Scope:	<u>Organizational</u>	Expectation:	
⊠ Achieve	Risk Exposure:	Region V Systems' Permane	E
☐ Avoid	⊠ Yes	persons served with maintain	ling nousing.
☐ Eliminate	□ No		
☐ Preserve			
<b>Quality Indicator</b>	Persons served by 12 months of enr	y Permanent Housing will ren ollment.	nain housed during the first
<u>Threshold</u>	Less than 15% of 12 months of pro	program participants will retugend enrollment.	rn to unhoused status within
Measurement Typ	Quarterly sco difference/trend/a	1	to demonstrate the
<b>Standard</b>	15%		
<b>Data Collection Pl</b>			
Data Source	•••••		
Data Collecto	or	Admin	istrative Program Specialist
Frequency of	f Collection		Quarterly
Frequency of	f Comparison to Thi	eshold by Team	Quarterly
Frequency of CCT Review			Quarterly
Baseline To be determined		F <u>Y 21-22 Average</u> New Goal	

## **Quality Indicator #39**

<b>Department:</b>		CQI Team:	
☐ Adult Network Services		☐ Business Interruption	☐ Internship
□ Children & Family Services     □		☐ CARF Training	☐ Leadership
☐ Continuous Quality Improvement		☐ Contract	☐ Move It & Fix It
☐ Fiscal		☐ Corporate Citizenship	☐ Patches of Green
☐ Operations/Human Resources		☐ Diversity Awareness	☐ Quality
Program:		& Acceptance	☐ Risk Management
☐ Consumer Involvement		☐ Health & Safety	☐ Social Media
☐ Disaster Resp	onse	☐ Human Resources	☐ Training
☐ Emergency Services		Supervisors	☐ Wellness
☐ Family & You	ith Investment	☐ Information	
$\boxtimes$ Housing		Technology Response	
☐ Network Prov	iders		
☐ Prevention			
Scope:	<u>Organizational</u>	<b>Expectation:</b>	
$\boxtimes$ Achieve	Risk Exposure:	Region V Systems' Permane	
$\square$ Avoid	☐ Yes	the time until housing move-	in date so that people gain
☐ Eliminate	⊠ No	a stable place to live sooner.	
		I was a second	
☐ Preserve	2 110	T	
	Number of days be	petween program enrollment a gth of time (days) from proglebe 60-days or less.	-
☐ Preserve  Quality Indicator	Number of days to the average lens move-in date will	petween program enrollment a gth of time (days) from proglebe 60-days or less.  The second results of the following the followin	-
☐ Preserve  Quality Indicator  Threshold	Number of days to the average leng move-in date will to the Quarterly sco	petween program enrollment a gth of time (days) from proglebe 60-days or less.  The second results of the following the followin	ram enrollment to housing
☐ Preserve  Quality Indicator  Threshold  Measurement Typ	Number of days to The average lens move-in date will to Quarterly sco difference/trend/a less than 60 days	petween program enrollment a gth of time (days) from proglebe 60-days or less.  The second results of the following the followin	ram enrollment to housing
☐ Preserve  Quality Indicator  Threshold  Measurement Typ  Standard  Data Collection Pl  Data Source	Number of days to The average lens move-in date will be Quarterly scool difference/trend/a less than 60 days than	petween program enrollment a gth of time (days) from progle be 60-days or less.  res are independent average.	ram enrollment to housing to demonstrate the
☐ Preserve  Quality Indicator  Threshold  Measurement Typ  Standard  Data Collection Pl  Data Source	Number of days to The average lens move-in date will be Quarterly scool difference/trend/a less than 60 days than	petween program enrollment a gth of time (days) from progle be 60-days or less.  Tes are independent average.	ram enrollment to housing to demonstrate the
☐ Preserve  Quality Indicator  Threshold  Measurement Typ  Standard  Data Collection Pl  Data Source  Data Collect	Number of days to The average lens move-in date will be Quarterly sco difference/trend/a less than 60 days than	petween program enrollment a gth of time (days) from progle be 60-days or less.  res are independent average.	to demonstrate the
☐ Preserve  Quality Indicator  Threshold  Measurement Typ  Standard  Data Collection Pl  Data Source  Data Collector  Frequency of	Number of days to The average lens move-in date will be Quarterly sco difference/trend/a less than 60 days lan or	petween program enrollment a gth of time (days) from prog- l be 60-days or less.  res are independent average.  Admin	to demonstrate the  Clarity istrative Program Specialist Quarterly

**Baseline** 

FY 21-22 Average New Goal

To be determined