

**Quality Improvement &  
Quality Assessment Performance Improvement Plan  
Annual Report, FY 2019-2020  
Executive Summary**

The Children's Center provides a comprehensive array of services for children and families in Wayne County. The purpose of the Quality Improvement Plan is to design the quality monitoring system for all The Children's Center programs and services. The plan primarily consists of indicators designed to measure performance, both at the individual program level as well as the entire organization. The purpose of the QAPIP is to demonstrate that The Children's Center achieves alignment with healthcare reform and demonstrates to clients, advocates, community organizations, health care providers, and Local and State policy makers that it has a distinct competency as a client-focused provider of behavioral health services. The indicators generally fall in one of four areas: effectiveness, efficiency, satisfaction, and contractual compliance.

Improvement in client output and outcomes was noted in the Behavioral Health programs, as evidenced by decreased FAS scores. The Early Childhood Behavioral Health program demonstrated tremendous progress in this area, and the Home Based program met target for two quarters. Within these programs, additional focus on developing comprehensive, measurable, family-centered treatment plans will result in increased success with goal completion, as well as family-reported satisfaction with outcomes. With respect to efficiency indicators, we noted significant improvement with treatment plan completion and consistently achieving target for timely CAFAS and PECFAS completion.

Another note-worthy accomplishment is that the diversion rate was met for most of the year, even with an increased target. Also, in FY20, the fewest inpatient hospitalizations took place. We had the highest response rate for the follow-up survey and a statistically significant client satisfaction survey response rate. Both behavioral health surveys along with the foster parent surveys provide quantitative and qualitative feedback on how we can better serve our children and families. As noted in previous annual reports, all the efficiency targets listed above correlate and interconnect to agency-wide factors such as client no-shows/cancellations, utilization of collaborative documentation, management of caseloads, and change in mandates from funders, amongst other factors.

The Quality & Compliance department will work closely with Child Welfare programs in monitoring their targets by meeting monthly to review key performance indicators. Specific focus will continue to transpire on the timeliness of medical & dentals and any contributing nuances that can positively affect this outcome. Although the YASS graduation rate declined, it exceeds the State and City of Detroit graduation rate, which is a tremendous success. YASS clients with a mentor reached the highest percentage in FY20 and 92% of YASS clients were involved in productive activities. Also, the Child Welfare chart reviews increased from FY19 to FY20.

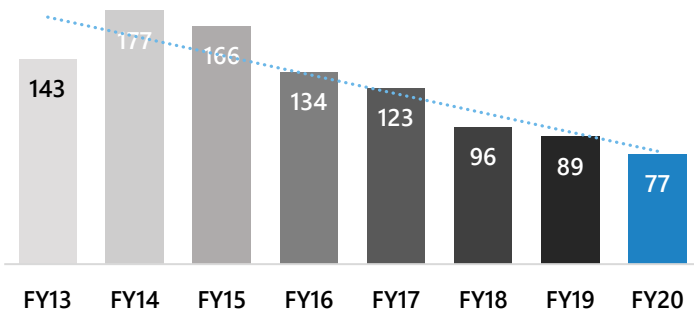
Agency-wide, collaborative work will continue to take place between Quality & Compliance and Program service areas to ensure effective and efficient service delivery happens. Within the Quality & Compliance department, consistent reviews using large sample sizes are an essential aspect of obtaining valuable data to foster data driven decision making. This practice will support continuous quality improvement resulting in the development of initiatives that will positively impact the lives of the children and families we serve.



# The Children's Center

## Quality Improvement & Quality Assessment Performance Improvement Plan Executive Summary Highlights

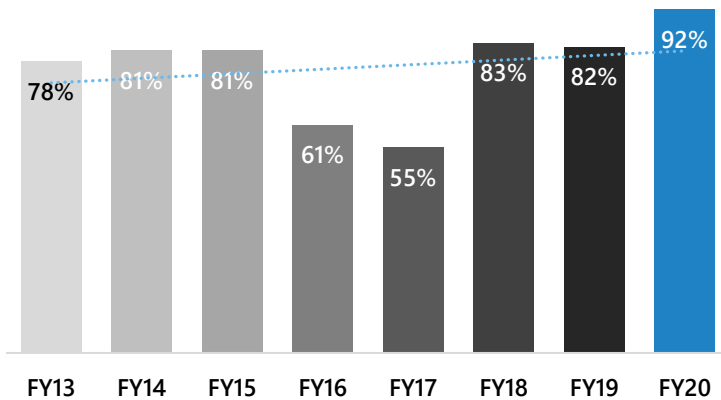
FY20 saw the fewest inpatient SED hospitalizations in 8 fiscal years.



# 97%

Treatment Plan Completion Compliance

YASS Clients with an Identified Mentor is the highest in FY20.



# 92%

YASS Clients Involved in Productive Activities

The NPS FY20 Follow-Up Survey Score is 63.

