

**Summitview Child & Family Services, Inc.
Quarterly PQI Report**



Q1 Report Period: July 1, 2021 – September 30, 2021

Per: COA PQI

Residential Services
Director of Youth Residential Programs – Haley Randle

Performance Measure Indicator	Target Goal	1 st Quarter July-Sept	2 nd Quarter Oct-Dec	3 rd Quarter Jan-March	4 th Quarter April-June
<u>Youth Standard Residential:</u> 95% of clients that achieved successful completion of the program who presented with Emergency Intervention needs, demonstrated a decrease in the number of Emergency Interventions throughout their course of treatment.	95%	100%			
	Average to Date	Met 100			
<u>Youth Agape Residential:</u> Less than 3 AWOLS (runaways) on average per month	< 3	4			
	Average to Date	Not Met 4			

Residential Services
Director of Adult Residential Programs – Michelle Good

Performance Measure Indicator	Target Goal	1st Quarter July-Sept	2nd Quarter Oct-Dec	3rd Quarter Jan-March	4th Quarter April-June
<u>Adult Residential:</u> 90% of clients demonstrate an increase in Independent Living Skills based upon ANSA scores at Intake and Discharge.	90%	80% Not Met			
	Average to Date	80			
<u>Adult Residential:</u> 90% of clients with a planned discharge successfully complete individual treatment goals.	90%	83% Not Met			
	Average to Date	83			
<u>Adult Residential- Silver Ridge:</u> At least three (3) mental health groups are provided to clients each week by licensed Clinical Administrator.	3	1.6 Not Met			
	Average to Date	1.6			
<u>Adult Residential- Sequoia:</u> At least two (2) mental health groups are provided to clients each week by licensed Clinical Administrator.	2	1.0 Not Met			
	Average to Date	1.0			

**Summitview Academy Non-Public School
Director of Education – Heather Chapman**

Performance Measure Indicator	Target Goal	1st Quarter July-Sept	2nd Quarter Oct-Dec	3rd Quarter Jan-March	4th Quarter April-June
90% of clients who completed a planned discharge demonstrated an increase in WRAT scores from Intake to Discharge.	90%	100%			
	Average to Date	Met			
		100			
90% of client has completed 100% of target credits (5 credits per month) during their course of treatment.	90%	100%			
	Average to Date	Met			
		100			

**General and Administrative Services
Chief Financial Officer – Corinne Morrison**

Performance Measure Indicator	Target Goal	1st Quarter July-Sept	2nd Quarter Oct-Dec	3rd Quarter Jan-March	4th Quarter April-June
On average, less than 2% of new workers compensation claims (excluding first aid) as a percentage of frontline shifts.	<2%	1.0 Met			
	Average to Date	1.0			
**Less than 10% turnover rate of FT Mental Health Specialist positions.	<10%	5.2 Met			
	Average to Date	5.2			
**Less than 15% turnover rate of FT ACTIVE Mental Health Specialists.	<15%	7.8 Met			
	Average to Date	7.8			

Outpatient Mental Health Services
Senior Director of Mental Health Programs – Chris Stedeford

Performance Measure Indicator	Target Goal	1st Quarter July-Sept	2nd Quarter Oct-Dec	3rd Quarter Jan-March	4th Quarter April-June
60% of EDC clients graduate to community services each fiscal year.	60%	70% Met			
	Average to Date	70			
90% of clients demonstrate a reduction in overall score for the Pediatric Symptom Checklist from client Intake to Discharge.	90%	40% Not Met			
	Average to Date	40			
90% of clients demonstrate completion of individual therapy goals from intake to discharge as measured by Discharge Report.	90%	72% Not Met			
	Average to Date	72			
90% of clients demonstrate positive progress towards completion of individual therapy goals as measured in quarterly treatment reviews.	90%	100% Met			
	Average to Date	100			

Residential Mental Health Services
Senior Director of Mental Health Programs – Chris Stedeford

Performance Measure Indicator	Target Goal	1st Quarter July-Sept	2nd Quarter Oct-Dec	3rd Quarter Jan-March	4th Quarter April-June
<u>Standard:</u> 90% of clients completing planned discharge, do so within 6 months of admission	90%	68%			
	Average to Date	68			
<u>Standard:</u> 80% of clients complete a planned discharge.	80%	69%			
	Average to Date	69			
<u>Crisis Residential:</u> 90% of clients complete a planned discharge.	90%	Operations temporarily suspended			
	Average to Date				
90% of clients demonstrate completion of individual therapy goals from intake to discharge as measured by Discharge Report.	90%	100%			
	Average to Date	100			
90% of clients demonstrate positive progress towards completion of individual therapy goals as measured in NSP reports.	90%	100%			
	Average to Date	100			

Admissions
Director of Admissions – Carol McCrory

Performance Measure Indicator	Target Goal	1st Quarter July-Sept	2nd Quarter Oct-Dec	3rd Quarter Jan-March	4th Quarter April-June
Demonstrate less than 5% vacancy rates for the Adult Residential Sequoia facility.	<5%	18.1 Not Met			
	Average to Date	18.1			
	Year-to-Date	18.1			
Demonstrate less than 5% vacancy rates for Standard Youth Residential facilities.	< 5%	5.4% Not Met			
	Average to Date	5.4			
	Year-to-Date	5.4			
Demonstrate less than 10% vacancy rates for Crisis Youth Residential facilities.	< 10%	Operations temporarily suspended			
	Average to Date				
	Year-to-Date				