# Circuit Court of Cook County Performance Metrics

Department 440
Juvenile Temporary Detention Center

	440-Juvenile	Program	Ensures that youth are housed in safe and humane conditions, JTDC complies with all state and federal mandates.
Department Number and Name:	Temporary Detention	Description:	Manages Human Resources services including the payroll processing, hiring process, AOIC compliance and oversee
	Center	Human Resources,	the performance management process. Provide supervision for JTDC legal matters litigation and labor management.
Program Name:	Admininistration	Legal, Investigation	Responds to discovery requests and legal complaints, supervises the employee discipline, and processes employee
FTE:	82.5	and Management	grievances. Conducts a comprehensive and fair investigatory process when alleged violations of the JTDC, Court, or
			County policies and procedures or other infractions are alleged.

		OL										
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Number of staff positions filled during the period	27	36	32	21	2			Actual			Number positions of open positions filled
2	Number of Paychecks Processed (Cook County Time)	NA	NA	1,358 (FY16 4th QT)	17,654	4,072						Total number of timecards processed and sent to comptrollers for pay check runs from the implementation of Cook County Time(CCT)(Oct 16, 2016 - November 2017). 2016 actuals are not captured because it is pre-CCT; metrics were not captured.
3	Staff Race/Ethnic %	White 13% Non-White 87%	White 13% Non-White 87%	White 13% Non-White 87%	White 12% Non-White 88%	White 12% Non-white 88%						Number of Staff by race describes the diverse workforce employed at the JTDC.
4	Staff by Age Group	21 to 25 = 14 26 to 30 = 104 31 to 35 = 142 36 to 40 = 113 41 to 45 = 100 46 to 50 = 122 51 to 55 = 66 56 to 60 = 55 61 to 65 = 28 66 to 70 = 9 > 70 = 2	NA	21 to 25 = 14 26 to 30 = 97 31 to 35 = 132 36 to 40 = 109 41 to 45 = 96 46 to 50 = 116 51 to 55 = 62 56 to 60 = 56 61 to 65 = 28 66 to 70 = 9 >70 = 2	NA	21 to 25 = 11 26 to 30 = 87 31 to 35 = 119 36 to 40 = 107 41 to 45 = 91 46 to 50 = 110 51 to 55 = 69 56 to 60 = 55 61 to 65 = 24 66 to 70 = 8 >70 = 1	;		ij			Number of Staff by age describes the diverse workforce employed at the JTDC.
5	Number of Employee Discipline referrals processed	235	200	199	210	79						Formal process of employee discipline incidents through formal discipline hearing.
6	Number of Labor Relations/Employee Grievances Filed	42	100	225	280	84						Formal process of employee grievances.
7	Litigation Support Services completed	53	58	40	58	10						Response to discovery requests and liaison with outside counsel.
8	Investigations conducted for reported infractions	290	N/A	232	260	47						The JTDC implements a comprehensive and fair investigatory process when alleged violations of the JTDC, Court, or County policies and procedures or other infractions are alleged to ensure safe, secure, living and working environment for residents and staff.
9	Number of PREA Resident Assessments	3,923	N/A	3,371	4,118	784						

1 - Administration May 23, 2017

		EFFICIENCY M										
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Time to Fill Position from posting to onboarding	192 days	320 days	173 days	158 days	128 days						Actual Days for 2015/2016 are the total number of days from the job posting to the start date of selected candidate. The projected 2017 date is based on the goal to decrease number of days to fill by 5% .
2	Number of Pay Discrepancies(Cook County Time)	NA	NA	225 (FY16 4th QT)	240	156						Total number of reported discrepancies in projected pay vs. actual pay received by employees. NOTE: the implementation of CCT programming and system glitches account for the majority of the pay discrepancies. Also note that 2016 actual is a total of discrepancies from October 16, 2016 to November 20, 2016. 2017 numbers are projected to trend at a more efficient rate based on system adjustment and the closure of trouble tickets.
3	Employee discipline case processing time	10 hours	11 hours	11 hours	11 hours	7.25 hours						Labor Relations Analyst: Receipt of discipline req+G21:123uest and recommendation, review of discipline materials, scheduling.  Hearing Officer: Conduct discipline hearing. General Counsel: Supervise assignments.
4	Employee grievances case processing time	17 hours	17 hours	7 hours	6 hours	2.17 hours						Labor Relations Analyst: Receipt of grievance, review of grievance materials, Monitor Level 1 grievance, conduct Level 2 grievance and schedule Level 3 grievances. General Counsel: Supervise assignments.
5	Litigation Support request processing time	14 hours	13 hours	18 hours	13 hours	18.2 hours						JTDC collection of documents required by opposing party or JTDC counsel for litigation. 2016 more complex cases including class action cases. 2017 will increase as JTDC is involved in arbitration.

		OUTCOME METRICS										
#	Metric Name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Rate to Fill of Open Positions	84%	NA	89%	100%	10%						In FY 2015/2016 an average of 13.5% of our positions went unfilled either due to in ability to select top talent to fill the position, or budgetary reasons.
2	Retention Rate	88%	NA	93%	95%	99%						The number is a total percentage of employees hired that maintained employment by the end of the fiscal year.
3	Payroll Proficiency Rate(Cook County Time)	NA	NA	83%	98%	92%						2016 actuals are not captured because it is pre-CCT; metrics were not captured.
4	Rate of completed employee discipline per year	99%	N/A	100%	100%	100%						All discipline accepted and fully processed during the calendar year .
5	Rate of Employee Grievances completed per year	90%	N/A	89%	100%	100%						All grievances accepted and fully processed within the calendar year.
6	Rate of Litigation Support completed per year	100%	100%	100%	100%	100%						All litigation document requests accepted and processed within the requested deadlines.

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Department Number and Name:	440-Juvenile Temporary Detention Center	Program Name:	JTDC Chapters	FTE:	596.5
Drogram Doscription					

#### Program Description

The JTDC cmplies with all federal and state mandates and follows the 2014 standards for secure detention facility, entitled CHAPTERS. The CHAPTERS standards developed by the Annie E. Casey Youth Law Center and the Center for Childrens Law and Policy provide an overview of operation at the JTDC.

CLASSIFICATION AND INTAKE - Is responible for intake and admission of residents providing required orientation including Prison Rape Elimination Act (PREA).

ACCESS - JTDC provides access to family engagement, effective case management, visitation and resident releases.

PROGRAMMING - JTDC ensures residents receive educational services, transportation, recreation, religious services, volunteer services, positive behavior management and gender responsive programming.

TRAINING AND SUPERVISION OF STAFF - JTDC provides training for staff that meet federal and state mandates. Ensures that staff receive training that meet all Administrative Office of the Illinois Courts (AOIC) mandated requirements. Provides quality assurance to ensure compliance with legal mandates.

ENVIRONMENT - JTDC ensures the safety and security of 650,000 sq. ft. secured detention facility. Also provides emergency preparedness based upon Homeland Security standards. The JTDC maintains, cleans and sanitizes the facility including the living units, offices, gyms and kitcher RESIDENT BEHAVIOR MANAGEMENT - administer daily behavior programming for residents, administer daily rewards for residents, administer behavior management rules and consequences for residents, conduct due process hearings for resident rule violations, coordinate resident grievances, plan, coordinate and administer resident behavior plans as appropriate for rule violations and violent behavior.

SAFETY - monitor and protect the facility, staff, residents, and visitors, respond to crisis situations, administer the standards of the Prison Rape Elimination Act (PREA), inventory radios, keys, and equipment to ensure the security of the facility, monitor and coordinate everyone and everything that enters and exits the secure areas of the facility to prevent the introduction of contraband and maintain security, search for and seize any contraband introduced into the secure facility, conduct residents counts as required by detention standards, coordinate all movement within the secure areas and investigations of abuse, neglect and retaliation.

		OL	JTPUT METRICS	(count of work	cunits processe	d or produced,	persons serve	d, etc.)				
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Number of Admissions Processed	3,923	3,923	3,371	4,118	784						Number of JTDC admissions.
2	Number of Releases Processed	3,972	3,972	3,397	4,117							Number of JTDC releases.
3	Resident % by Race Breakdown	Black - 81% Latino - 15% Asian- 0% Other - 0% White - 3%	NA	Black - 80% latino - 15% Asian- 0% Other - 5% White - 3%	NA	Black - 72% Latino - 12% Asian- 1% Other - 5% White - 10%	:					Resident race/ethnic %
4	Resident Breakdown Length of Stay by Gender in number of days	M - 21 days F - 13 days	M - 21 days F - 13 days	M - 31 days F - 18 days	M - 47 days F - 23 days	M - 20 days F - 13 days						Resident length of stay by gender
5	Resident % by Gender Breakdown	M - 92% F - 8%	M - 92% F - 8%	M - 92% F - 8%	M - 92% F - 8%	M - 92.2% F - 7.3%						Resident gender %
6	Implementation of Effective Case Management total hours per year	N/A	N/A	215,350	348,575	54,990						Effective Case Management: A process that requires the Caseworker to work collaboratively with residents and families to provide residents individual intensive diagnostic assessment by identifying educational, health, mental health, and behavioral needs; rewarding and acknowledging positive behavior as well as sanctioning ceptable behavior. Resident Visits: Visits including family, legal personnel, volunteers, clinical agencies, probation officers, and other stakeholders. Administrative Intervention Plan: An individual multidisciplinary Administrative Center. All plans are developed by the resident's parent center TL/ATL and Caseworkers and include restorative justice goals that focus on a timely and successful reentry strategy for the resident to return to his/her parent center.  Caseworkers conduct Prison Rape Elimination Act (PREA) training with residents 2x per year.

		OUTPUT	METRICS (coun	t of work units								
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1	2017 Q2	2017 Q3	2017 Q4	2017 YE	2018 Target	Definition
7	Avg. Caseload/per Caseworker	130	137	112	137	Actual 28	Actual 	Actual 	Actual 	Actual 		Case Management with collaboration of residents and families to provide residents individual intensive diagnostic assessment by identifying educational, health, mental health, and behavioral needs.
8	Internal PREA Allegations	29	N/A	32	30	2						PREA mandates (115.322) an investigation is completed for all allegations of sexual abuse and sexual harassment.
9	PREA Referrals and Multi- Disciplinary Team Meeting	121	N/A	177	175	51						PREA standard (115.342) mandates that the information received from the screening and resident self disclosures is utilized to make housing, bed, program, and education assignments with the purpose of keeping all residents free from sexual abuse and sexual harassment. Multi-Disciplinary Team (MDT) is a group of staff from diverse disciplines who collectively share information, develop recommendations, utilize comprehensive assessments, and coordinate services
10	Hours of Large Muscle Exercise offered to residents per year	117,895	N/A	91,250	139,430	21,960						Recreation and Activities Program: Develop and implement comprehensive recreation and activities programs for residents of each Center that includes indoor and outdoor recreation as well as at least one hour of large muscle activity per day.
11	Number of Staff Trained	698	703	648	679	111						The total number of trained staff. 679 is the budgeted number of staff for FY2017.
12	Number of Volunteers Trained	215	225	255	280	111						The total number of Volunteers that were trained
13	Number of Staff PREA Trained	478	703	647	679	626	:	:				The total number of JTDC Staff trained
14	Video Events Captured and Archive from system	2,557	2,557	2,007	2,282	308						Number of total video events archived for future reference if needed.
15	Behavior Management Program hours provided per Center a year	282,948	334,632	258,420	334,632	58,560						Hours each staff member dedicates to the reinforcement of appropriate resident behaviors while providing positive and corrective consequences for inappropriate resident behaviors as necessary.
16	Resident Disciplinary Due Process Hearings	5,667	5,184	4,885	5,616	1,228						Hearings conducted by JTDC officers to assess formal behavioral charges on residents.
17	Number of Resident Grievances	2,453	2,453	1,842	844	283						Resident grievances are collected every business day. They are tracked by a grievance coordinator who distributes them for response by departmental staff.
18	Work Orders submitted to maintain 650,000 sq. ft. physical plant (carpenters, plumbers, electrians, etc.)	3,901	3,901	7, 289	8,476	753						Work Orders are submitted to inform Department of Facility Management on all areas of the physical plant in need of repairs and ensure completeness of repairs.

		EFFICIENCY MI	ETRICS (cost per	unit, work units	processed per st	aff person, cycle	time to compl	ete work unit, e	tc.)			
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Per Diem Cost of housing a minor at JTDC	\$431	\$431	\$520	\$520	\$520						Daily cost of housing a minor at the JTDC
2	Time to process PREA resident assessments, in hours	0:18	N/A	0:21	0:17	0:23						PREA Coordinator reviews resident profiles to ensure all assessments have been completed.
3	Time to process internal PREA allegations, in hours	23.66	N/A	21:00	23:00	20:00						PREA Coordinator provides follow-up on every PREA investigation to ensure proper notifications were issued, resident services provided, reporting to the Department of Justice, Office of Justice Program, and included in the federally mandated PREA report. Additionally, conducts incident reviews of all substantiated investigations.
4	Time to process PREA referrals and conducts Multi-Disciplinary Team Meetings, in hours	7:46	N/A	4:00	4:00	3:36						PREA Coordinator provides follow-up on every PREA referral to ensure all appropriate actions are taken such as housing recommendations, additional security measures needed, review of incident report, and conducts MDT meetings as needed.
5	Video Captures processed per video analyst	1,279	1,279	1,003	1,141	308						The JTDC is budgeted for two video analysts.
6	Hearings Conducted Per Hearing Officer	1,133	1,250	1,221	1,404	307						The average number of hearings conducted per Hearing Officer (5 hearing officers in 2015, 4 hearing officers in 2016 and 2017).
7	Average Resident Grievance Response Time (Days)	2	3	3	3	2						Length of time from when grievance is received to when it is resolved with the resident (in days).
8	Number of moves, external transportation	813	813	1,041	1,041	252						JTDC has a specialized division of staff trained in transporting residents externally, outside of the building. These transport can be to court, placement, hospitals, funeral furloughs, etc. and any destination not inside of the JTDC.
9	Number of moves, internal transportation	130,369	130,369	117,139	149,587	24,733						Internal transportation is the movement of resident within the physical structure of the JTDC; inclusive of court, medical, programming, school, visitation, recreation, schedule meeting, etc.
10	Emergency and Non-emergency responses	1,892	1,892	1,146	1,146	233						Specialize team of trained staff responds to assistance calls for an emergency and/or non-emergency nature.
11	Number of External Transportation events per day per staff	2	2	3	3	1						All residents must be accompanied by JTDC trained Transportation staff for court, placement, hospitals, funeral furloughs, etc.
12	Number of Internal Transportation events per staff per day	13	13	12	12	3						All moves (inclusive of court, medical, programming, school, visitation, recreation, schedule meeting, etc.) for residents are escorted by JTDC staff.
13	Emergency and Non-emergency responses per staff per day	5	5	3	3	1						Specialize team of trained staff responds to assistance calls for an emergency and/or non-emergency nature.
14	Work Orders submitted for 650,000 sq. ft. physical plant per staff member	1,950	1,950	3,644	4,238	377						Formal established process for JTDC to request the addressing of maintenance is
15	Training Hours Provided per Year	45,451	45,451	51,319	57,000	150,077						The total number of training hours held through the fiscal year.

	OUTC	COME METRICS	(percentage of s	uccess accompli	shing a program'	s primary task.	customer satisfa	action survey re	sults. etc.)			
	Metric Name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Rate of residents who complete Orientation Process per year	100%	100%	100%	100%	88%	Actual	Actual	Actual	Actual		Provides orientation services: intake, property, parent notification, orientation training, resident handbook, and review of JTDC rules and procedures with residents. The number of residents who complete orientation.
2	Rate of successfully completed PREA Resident Assessments	100%	100%	100%	100%	100%						Federal mandates require all resident admitted are assessed for the risk of sexual abuse and sexual harassment (115.341).
3	Rate of successfully completed Internal PREA Investigations	100%	100%	100%	100%	100%						All allegations of sexual abuse and sexual harassment are investigated as indicated by federal mandates (115.322).
4	Rate of successfully completed PREA Referrals and Multi- Disciplinary Team Meetings	100%	100%	100%	100%	100%						Federal mandates require the use of information obtained during resident screening, mental and medical assessment, resident disclosures, and any other relevant information to determine residents housing placement, programming, education assignments (115.342).
5	Estimated Rate of Large Muscle Exercise Participation	90%	100%	90%	100%	100%						Comprehensive recreation and activities programs for residents of each Center that includes indoor and outdoor recreation as well as at least one hour of large muscle activity per day.
6	Rate of Compliance with Federal PREA Training Standards	68%	100%	96%	100%	92%						Did staff pass PREA exit exam
7	Rate of Training Compliance with Detention Standards	55%	100%	74%	100%	16%						The number of staff that were in compliance with AOIC Standard 40 hours.
8	Rate of RMIS useage for admissions	N/A	100%	100%	100%	100%		****				enter all admission and release of residents into RMIS
9	Rate of participation in Orientation Process	100%	100%	100%	100%	100%						Provides orientation services: intake, property, parent notification, orientation training, resident handbook, and review of JTDC rules and procedures with residents. The number of residents who complete orientation.
10	Rate of Residents participating in Behavorial Management Program	100%	100%	100%	100%	100%						All residents are supervised and participate in behavioral management programming; including rewards, consequences, safety and security checks.
11	Due Process Hearings Completed Within 4 Hours	84%	100%	89%	100%	88%						Percentage of hearings completed within 4 hours.
12	Satisfaction Rate on Parent Satisfaction Survey	NA	100%	83%	100%	88%						Parent Satisfaction Surveys are distributed when parents are picking up residents for release. The results provided here regarding the question, "Was JTDC staff helpful during your son/daughter's detention at the JTDC?"
13	Social Climate Scale - Safety Subscale	54	55	56	56	*						The Social Climate Scale (SCS) is a environmental assessment conducted semi- annually at juvenile detention centers across the nation. The safety subscale assesses resident perceptions of physical safety at the detention center. SCS data is calculated by a consultant from Michigan State University. The mean score for juvenile detention centers nationally is 50.
14	Social Climate Scale - Activity Subscale	53	53	55	55	*						The Social Climate Scale (SCS) is a environmental assessment conducted semi- annually at juvenile detention centers across the nation.
15	Social Climate Scale - Order/Organization Subscale	54	54	55	55	*						The Social Climate Scale (SCS) is a environmental assessment conducted semi- annually at juvenile detention centers across the nation.

<sup>\*</sup> Surveys are completed in April & November each year. Reports are generated in June & December.

Department Number and Name:	Temporary	Program Description: CCHHS Cermak	Conducts crisis interventions, provides medical assessments and services to all residents including dental scheduling of external appointments, and follow up. Medically required direct care supervision of residents on crisis watch and/or other medically required supervision. Provide psychological and
Program Name:	Health and Mental Health Care		psychiatric assessment and follow up services. Provide psycho-educational groups and individual mental health services to all residents. Also provides health and mental health educational services.
FTE:	CCHHS FTEs and not in JTDC's FTE appropriation.		

		OL	JTPUT METRICS (	count of work u	nits processed o	r produced, perso	ons served, etc	.)				
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2	2017 Q3	2017 Q4	2017 YE	2018 Target	Definition
							Actual	Actual	Actual	Actual		
1	# of Dental Services provided	5,890	N/A	5,946	6,000	1,153						Oral examinations, oral treatment, extractions, x-rays, periodontal,
	# Of Defital Services provided	3,890	N/A	3,340	0,000	1,133	***		:	••••		restorations, etc.
	# of Nursing Health Assessment											Nurses perform health assessments for injuries, restraints and confinements.
2	completed	10,461	N/A	10,034	10,000	2,793						
	completed											
												Residents' health service requests are triaged by the nurse within 24 hours.
3	# of Nursing Sick Calls completed	10,562	N/A	9,305	10,000	1,448						

		EFFICIENCY MET	RICS (cost per u	nit, work units p	processed per sta	ıff person, cycle t	ime to comple	te work unit, e	tc.)			
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2 Actual	2017 Q3 Actual	2017 Q4 Actual	2017 YE Actual	2018 Target	Definition
1	Daily average number of patients served per dentist	11	N/A	9	10	21						Ave. # of patients seen by the dentist per clinical day
2	Daily Average number of Nursing Health Assessment completed per nurse		N/A	5	6	5						Ave. Daily Health Assessment performed per RN
3	Averge Daily Nursing Sick Calls completed per nurse	14	N/A	15	20	16						Ave. # of Sick Calls addressed by an RN/day

	OU	TCOME METRICS (pe										
#	Metric Name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Q1 Actual	2017 Q2	2017 Q3	2017 Q4	2017 YE	2018 Target	Definition
							Actual	Actual	Actual	Actual		
												Resident Survey during Release question # 14. I found the medical service
1	Overall Patient Satisfaction	N/A	N/A	91%	95%	*						helpful.
												Yes No.
2	Number of Asthma Patients	42	N/A	55	Reduce asthma- related incidents by 80%							Ave. # of asthma patients

<sup>\*</sup> Developed Questionnaire and the mechanics of the survey rolled out the following Quarter

3 - Health Cermak May 23, 2017

	440-Juvenile	Program	Conducts crisis interventions, provides medical assessments and services to all residents including
Department Number and Name:	Temporary	Description:	dental care, mental health services, transportation to appointments, and medically required direct care
Department Number and Name.	Detention	CCHHS Cermak	supervision of residents on crisis watch and/or other medically required supervision, provide mental
	Center		health services to all residents.
	Health and		
Program Name:	Mental		
	Health Care		
FTE:	Contract cost		
	not County		
	FTE		

	OUTPUT METRICS (count of work units processed or produced, persons served, etc.)												
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Qtr 1 Actual	2017 Qtr 2 Actual	2017 Qtr 3 Actual	2017 Qtr 4 Actual	2017 YE Actual	2018 Target		
1	Mental Health Follow Up Counseling Sessions Conducted	5,065	5,616	6,228	5,616*	1,400	1	1	::				
2	Psychiatric Follow Up Visits conducted	889	988	1,117	988**	258							
3	Clinical Rounds completed	16,510	9,855	16,584	9,855	3,199	ł	:					

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"Follow-up" status residents are provided with weekly individual counseling sessions, often more depending on acuity, until the identified problems are resolved or the resident leaves the detention center.

Youth who are prescribed psychotropic medication are monitored closely by way of follow-up clinic visits with the prescribing Psychiatrist/APN.

A "Clinical Round" is defined as when Mental Health clinicians conduct daily rounds on their Center. The main objective of these rounds is to identify problem issues that residents may be experiencing and design interventions to address issues that may exist, before they worsen.

<sup>\*\*</sup> If average residents being treated remains at 38.

	EFFICIENCY METRICS (cost per unit, work units processed per staff person, cycle time to complete work unit, etc.)												
#	Metric name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Qtr 1 Actual	2017 Qtr 2 Actual	2017 Qtr 3 Actual	2017 Qtr 4 Actual	2017 YE Actual	2018 Target		
1	Clinical Contacts per Clinical FTE	2,223	1,750	2,263	1,750	522			::				
2	Clinical Contacts Per Mental Health Clinical FTE	2,099	1,500	2,138	1,750	495							
3	Clinical Contacts Per Psychiatry FTE	3,143	2,500	3,286	2,750	721							

#### finition

Annual clinical contacts are the total of all clinical activities performed by IRC MH staff. These activities include individual and group counseling, assessments, psychiatric contacts, clinical rounds and clinical consultations.

Annual clinical contacts by MH clinical FTE. These FTE include Licensed Clinical Psychologists, Licensed Clinical Social Workers, and masters level Mental Health Specialists.

Annual clinical contacts by Psychiatry FTE. These FTE include board certified Child and Adolescent Psychiatrists and an Advanced Practice Psychiatric Nurse.

	OUTCOME METRICS (percentage of success accomplishing a program's primary task, customer satisfaction survey results, etc.)												
#	Metric Name	2015 Actual	2016 Target	2016 Actual	2017 Target	2017 Qtr 1 Actual	2017 Qtr 2 Actual	2017 Qtr 3 Actual	2017 Qtr 4 Actual	2017 YE Actual	2018 Target		
3	Rate of Compliance with Chronic Disease Treatment Protocols	Not availible	1	100%	100%	Not availible*							
1	Youth Satisfaction Survey Results (Overall Satisfaction)	Not availible	70-80%	1	80-90%	Not availible*							
3	Number of Psychiatric Hospitalizations	11	15	11	15	4							

#### Definition

To determine whether Psychiatrists and other QMHPs are following chronic disease protocols as evidenced by documentation in the medical record (Compliance Indicator #2).

To evaluate the quality of IRC clinical services as assessed by the youth at the JTDC and to identify opportunities for improvement.

Sometimes residents experience symptoms which cannot be adequately managed in a correctional setting and require placement in an outside hospital for stabilization and treatment.

4- Health IRC May 23, 2017

<sup>\*</sup> If average residents on MHFU status remains at 108.

<sup>\*</sup> Surveys are completed in April & November each year. Reports are generated in June & December.