CTN Performance Indicators for 2016-17

CTN sets targets and monitors progress quarterly for 33 performance and quality indicators each year. The indicators are grouped around our five strategic directions.

This is a high-level overview of the performance indicators for 2016-17. For more detail, including how the indicators are defined and measured, the 2016-17 targets, and the results from 2015-16, please see the following pages. CTN will post results on *some* of the indicators each quarter, and after the end of the fiscal year.

 We invite you to contact us to let us know what information you are most interested in!

Strategic Direction 1: Working effectively as a network:

- Return on investment
- Productivity
- Total margin
- Service Results
- Capacity Building
- Reach
- Adoption of the Shared Electronic Record

Strategic Direction 2: Strengthening Partnerships/Securing funding

- Partner Engagement/Connectivity
- Contract Costs
- Provider Satisfaction
- Level of Integration
- Network Alignment

Strategic Direction 3: Leading innovation and Quality Improvement

- Family Satisfaction
- Youth satisfaction
- Single Plan of Care
- Child and Family Outcomes

- Quality of Life
- Quality Record Audit
- Inclusivity

Strategic Direction 4: Improving technologies, tools and processes

- Satisfaction with the shared record
- Documentation Timeliness
- Helpdesk Responsiveness
- Videoconferencing
- Site occupancy
- Communications

Strategic Direction 5: Improve access to information, services and supports for families

- Wait for assessment (% waiting over 90 days)
- Wait for service (% waiting over 90 days)
- Wait while receiving no other services
- Family Engagement
- Time in ACCESS/intake
- Satisfaction with ACCESS/intake

Strategic Direction 1:

Strategic Direction 1:	Indicator	Measure	2016-17 Targets	15-16 Results	Definition
Working more effectively as a Network **Quality Dimension:** Adequate Resourcing	1. Return on Investment	% agencies in compliance with 80% contracted hours in ECR (incl. accept. variance)	100% (including acceptable variance)	88%	% of host agencies meeting the targeted (80%) % of contracted hours documented in the Shared Electronic Record/adjusted for acceptable variance; Source-MIS quarterly report
	2. Productivity	% agencies compliant with 70% Service Recipient Hours Target (incl. acceptable variance)	100% (including acceptable variance)	76%	% of host agencies meeting the service recipient (SR) to non- service recipient hours target of 70% (70:30)/adjusted for acceptable variance; Source- MIS quarterly report
	3. Total margin	Ratio of Expenses to Income	1	1	Ratio of Expenses to income; Source- Financial Statements
	4. Service Results	a) Service Recipient Hours (MCYS contract) b) Count of visits by type c) % targeted ABA Intakes – (Per Partner agreement)	a) 78,975 Service recipient Hours b) All visits by type c) 1,284 ABA intakes	a) 81,205 SR Hours (106%) b) 29,131 visits (71.02% F-F) c) 1,698 ABA intakes (170%)	a) % service recipient hours delivered in relation to MCYS operating plan targets b) # Visits by type, including telephone visits >5 minutes c) % of ABA Intake targets met (new/re-engaging) Source – MIS Reports
	5. Capacity Building	Prof. Dev: # events & participants; Learning Management System: # users and courses completed	Maintain # events/ participants. LMS: users; new courses, completions	70 events/ 1,039 participants; LMS: 1,386 participants/ 1,364 courses completed	Total number of training and professional development events and number of attendees. Source – Local and Specialty Team tracking Logs Learning Management System (LMS) # new modules, participants, courses completed. Source - LMS
	6. Reach	Ratio of clients: to population/prevalence; Total: % of MCYS only clients	Total clients 6,980 MCYS clients	6,980 clients 5,047 MCYS only	Total # unique individuals served b) % unique individuals receiving services per MCYS targets. Source – MIS quarterly report
	7. Adoption of the Shared E-Client Record	% increase in active ECR users in by type; % of new users active at 3 months	Expect increase per SNS; 80% of **new users** active at 3 months	502 active users: 54% non-contracted; 65% new users active @ 3 months	% increase in users (by type) in shared electronic record active in previous 6 months; % of newly trained users using the record in first 3 months Source - Goldcare

Strategic Direction 2:

Strategic Direction 2:			2016-17 Targets	15-16 Results	Definitions
	Indicator	**Measure**			
Strengthen Partner-ships and secure more funding	8. Partner engagement & connectivity	Level of Trust; Density Degree of centralization Overall Satisfaction Benefits/Drawbacks Tool: Partner Tool	Establish Baseline with new measurement tool	*N/A* *Last survey in 2013*	Level of trust, density of ties; overall satisfaction and benefit vs drawbacks of participating in network, per Partner Tool survey/analysis Source – survey of network partners
Quality Dimension: Shared leadership	9. Contract costs	Variance at year end	0	1	# contracts with surplus or deficit greater than 10% of the contracted amount at year end
	10. Provider satisfaction	Survey; % very satisfied or satisfied ; *Provider Survey – spring 2017*	90%	88% (91% with SPOC)	Results obtained from Provider Satisfaction surveys – satisfied or very satisfied with participation in the network Population: staff of network partners, both contracted and non-contracted
	11. Level of integration	MPOC subscale for comprehensive, coordinated care (CCC) (Fam. Survey – Apr.16)	Over benchmark of 5	5.1 with SPOC 4.5 without SPOC (MPOC)	Family survey/MPOC comprehensive, coordinated care subscale, comparing families with and without a single plan of care May also be reported via the Provider Survey - % teams at various levels of integration
	12. Network Alignment	**New: Proportion of families reporting successful transitions, and effectiveness of preparation for transition.** **Family Survey 2016 n=321/609 families who experienced one or more transitions**	**Establishing baseline and targets.**	**Previous indicator**: 100% 471 Transitional integrated program plans (TIPP) at school entry in Simcoe County, documented in the ECR	% families reporting a transition/% of transitions that were successful; % indicating that CTN prepared them effectively for the transition Source: Family Survey

Strategic Direction 3

Strategic Direction 3:			2016-17 Targets	15-16 Results	Definitions
	Indicator	**Measure**			
Lead innovation & continuous QI in family centered, integrated care	13. Family Satisfaction with Family- centred care	Measure of Processes of Care (MPOC) Source: CTN Family Survey, March **2016; MPOC – 3 out of 5 subscales,** n=417-609	Benchmark is 5/7 Respectful/Supportive Enabling & Partnering Specific information Combined SPOC/non-SPOC score	SPOC (n=108) 5.3 5.1 5.1 Without SPOC (n=175) 4.8 4.5 4.8	Scores obtained from 3 sub-scales of the Measures of Process of Care (MPOC) per the Family Survey Respectful/Supportive Enabling & Partnering Specific information Source: Family Survey
Quality Dimension : Family Centred, evidence-informed Care	**14. New: Youth Satisfaction**	Interview-based surveys	**Pilot methodology; establish baseline**	n/a	Piloting various methodologies to gather feedback on service directly from children, pre-teens and youth
	15. Single Plan of care (SPOC)	# clients with SPOC or integrated Transition Plan	# clients with SPOC / TIPP	1,018	# unique clients with a Single Plan of Care Coordinator or a TIPP (integrated transition plan) documented in the shared record Source: MIS and Simcoe Early Intervention Council
	16. Outcomes	In family survey years, indicator is based on Child and Family outcomes reported by families. In 16-17, indicator is based on outcomes using the CANS and the reliable change index	Test use of CANS reliable change index with SPOC sample; change in child and/or family needs and/or strengths **Sample: 180 SPOC clients with a baseline and second CANS**	• 42.1% ↑school participation; • 40.4% ↑child partic in family • 38.7% ↑ parent coping; 37.7% ↑sense of hope • 24.9% ↓feelings of depression • 20.1%↑ability to work outside home	Parent report of improved child and family outcomes from Family surveys; outcome measurement from CANS - reliable change index between baseline and most recent CANS – Child and Adolescent Strengths and Needs tool
	17. New: Quality Audit	**# records audited; %**	400 records audited	n/a	Quality record audit on a representative sample of records both active and closed, per accreditation standard
	18. Quality of Life	**PEDS QL; sample of population**	Establish baseline	n/a	PedsQL; measure of quality of life for various age groups (parent report)
	19. Inclusivity	% of requests for interpreter services met; top language	100% of requests for interpreters met	100% of requests; top of 12 languages: Cantonese, Mandarin	% requests for interpreter service that are able to be met (total requests and % change) Source: Internal Log

Strategic Direction 4

Strategic Direction 4:			2016-17 Targets	15-16 Results	Definitions
	Indicator	**Measure**			
Improve technologies, tools and processes that streamline Network operations & communications **Quality dimension** Effective integration enablers	20. Satisfaction re ECR	Provider Survey (a) I consult my clients shared record on a regular basis; and b) each team member documents in e-record); c) new question – overall satisfaction? Survey: Early 2017	a) "Consult client record regular basis" b) "Each team member documents" c) Overall satisfaction Target 75%	Provider Survey April 2015 a. All providers: 76% (SPOC: 78%) b. All providers: 48% (SPOC: 51%) c. All: 71% VS or satisfied	Results of provider survey on 3 questions related to use/satisfaction with Shared Electronic Client Record
	21. Documentation Timeliness	% agencies achieving compliance in documentation timeliness (Clinical – Average time between visit and related in ECR= 7 days; and 7 days for non-service recipient time)	100 % of agencies are documenting SR & Non SR within 7 days	82% Service recipient Documentation 47% Non-service recipient documentation	Average time between clinical visit and documentation in the shared electronic record; % that occur within the targeted timeframe (7 days); by Service recipient, and Non-Service recipient activity Source: MIS report
	22. Helpdesk Calls & Response	Average time (Hours:Min) tickets are open in the quarter; # helpdesk tickets during period;	3 days [Monitor change in # and type of tickets]	46 hours: 28 minutes 1.93 days Total tickets: 2,364	Average response time (to ticket closed) and # Helpdesk tickets Source: helpdesk software – NSM CCAC
	23. Videoconferencing events – type/hours	Utilization hours/events by type (admin, clinical, educational)	**OTN now available from Oak Ridges & Barrie only**	791 events:1,384 Hours CTN Events (33.9%) Non-CTN (66.1%)	# events and hours videoconferencing used for admin, education or clinical purposes
	24. Site occupancy	% Average utilization	Clinical –65 %	Clinical = 52%	% Average utilization of clinical drop down space per daytime capacity available
	25. Communication	Family satisfaction - general communic.; Website – monthly average views, users, new Newsletter – %open/read	a) Gen Communication b) Website: 12,800 pageviews; 3,200 Users; 30% new c) Connect: 35% open rate; 25% click through	a) SPOC 4.5; non-SPOC 3.8 b) 2,997 ave./ month (Q4), 67% bounce rate	a) Family Report/satisfaction on general communication subscale of MPOC; b) Website pageviews; # users/% new; c) Connect – open rate and click through rate

Strategic Direction 5:	Indicator	Measure	2016-17 Targets	15-16 Results	
Improve access to information, services and supports for families **Quality dimension** Access, equity, inclusivity	26. Access to assessment: Waited for assessment, *excluding ABA	# of unique clients who waited for one or more assessments; Average # days waited **Range of days waited**	Benchmark – 90 days a) Target	2,727 clients 5,654 assessments 83 days (Average)	# of unique clients (across all functional centres) **who waited for multiple assessments; # assessments waited for; Average # days waited/range of days waited**
	27. % assessments > 90 days wait, excluding ABA	% of waits for one or more assessments > 90 days		30% (1,720 assessments)	% (#) of waits for multiple assessments that were longer than the 90 day benchmark
	28. Access to Service: Waited for Service	# of unique clients waited for # multiple services ; Average # days waited **Range of days waited**	Benchmark – 90 days	2,172 clients 3,664 services 18 days (average)	# of unique clients who waited for multiple services (all functional centres); # waits for services; Average # days waited for services ; range/longest waits
	29. Wait for service over 90 days	% of waits for multiple services > 90 days		3%	% (#) waits for multiple services longer than the 90 day benchmark
	30. % of Clients who waited with no other service	% of Clients who waited for assessment while **receiving no other services visible in ECR**	Benchmark – 90 days;	1,355 clients (50%) 75 days (average)	% of clients who waited and were receiving no CTN services over the benchmark
	31. Family Engagement	# events and Participants – families; # events and Participants – youth Survey to identify satisfaction with and impact of participation in family engagement activities; Family Mentor (FMP) and volunteer programs	a) Participants/event b) Youth/ events c) Satisfaction-events **d)** 65 Peer mentors; 70 new referrals; 350 families total **e)** 10 FMP- led workshops; 200 attendees f) 80 Volunteers; 700 Vol. hours; satisfaction	a) Total: 2,971 in 112 events: including:566 participants in 75 groups or chats; 2,385 in 35 events (Fairs, parties) b) 24 youth/ 2 events c) 95% satisfied/very satisfied with family events (n=99) d) 1,840 Facebook 'likes' e) 2 coaches; 19 mentors trained; 25 matched	# family –related activities; Family satisfaction (Family Survey-events); # youth activities; # peer mentors/hours per Trillium deliverables; # volunteers/volunteer hours
	32. ACCESS/intake	Average days in 'intake' ABA Intake (**Level 1 & CFI**)	CTN - 30 days ABA – 200 days	27 days (1,316 clients) 240 days (2,181 clients)	Average # days in intake from referral received to discharged from service navigation, with ABA Intake separated out
	33. Satisfaction re ACCESS	% families very satisfied (CTN-ABA separated)	90% very satisfied	CTN: 83% VS/17% Satisfied n=80 ABA: 72% VS/23% Satisfied n=47	% of families very satisfied with service from Access, with ABA and CTN intake reported separately *when numbers allow separate analysis