Children, Youth and Families FSP
Dashboard and Report

Reporting period: 07/01/2024-03/31/2025

Program Name: All FSP
Provider ID: Total

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Notes: - Data are cumulative across the Fiscal Year
- DCR: Data Collection and Reporting System. CCBH: Cerner Community Behavioral Health
- PAF: Partnership Assessment Form. KET: Key Event Tracking. 3M: Quarterly Assessment

SOCE system of care evaluation

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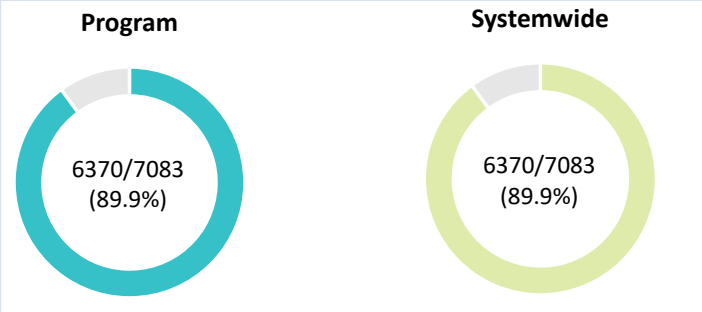
COUNTY OF SAN DIEGO HHSA HEALTH AND HUMAN SERVICES AGENCY | LIVE WELL SAN DIEGO

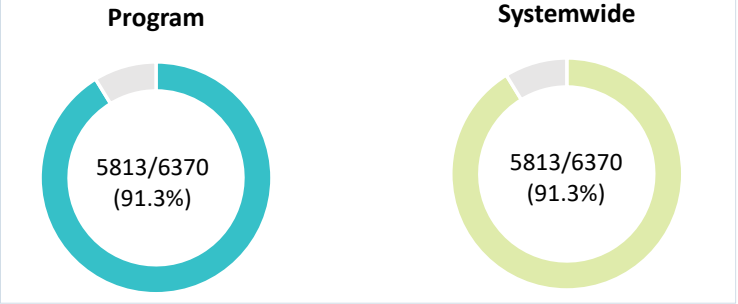
Program Name: All FSP
Provider ID: Total

DATA COMPLIANCE*

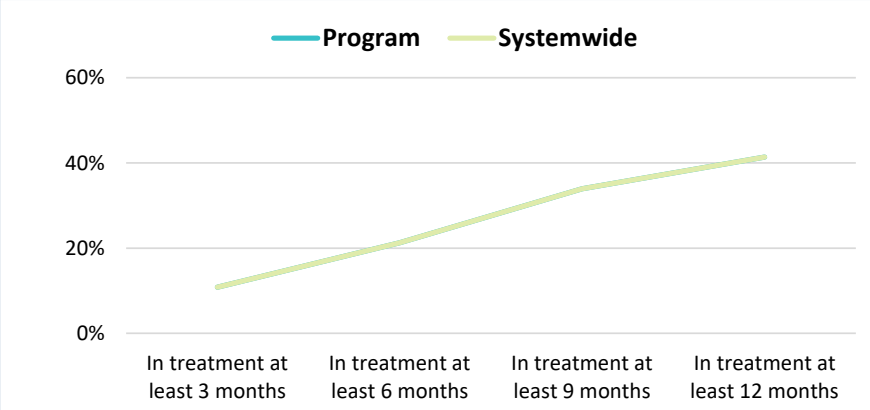
Percent of service events entered in the DCR



Percent of quarterly reports entered on time

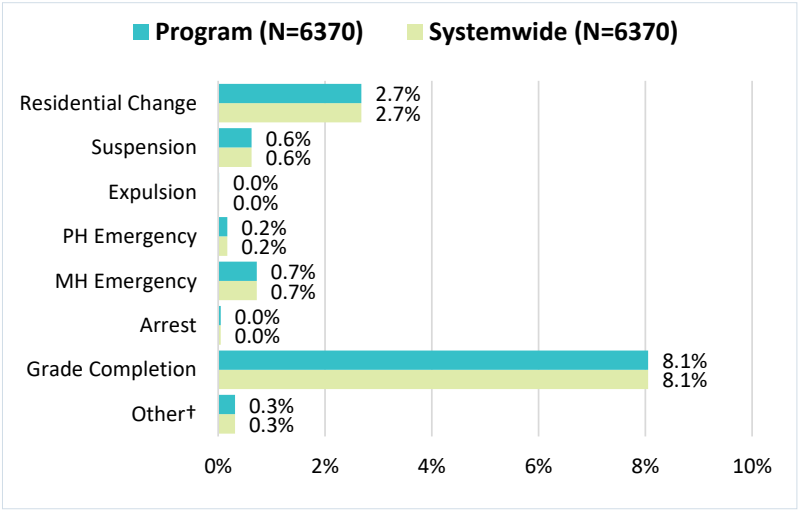


Percent of clients with at least one KET submitted by the amount of time in treatment



	In treatment at least 3 months	In treatment at least 6 months	In treatment at least 9 months	In treatment at least 12 months
Program N	4807	2924	186	114
Systemwide N	4807	2924	1863	1141

Percent of clients with at least one KET submitted within the current FY



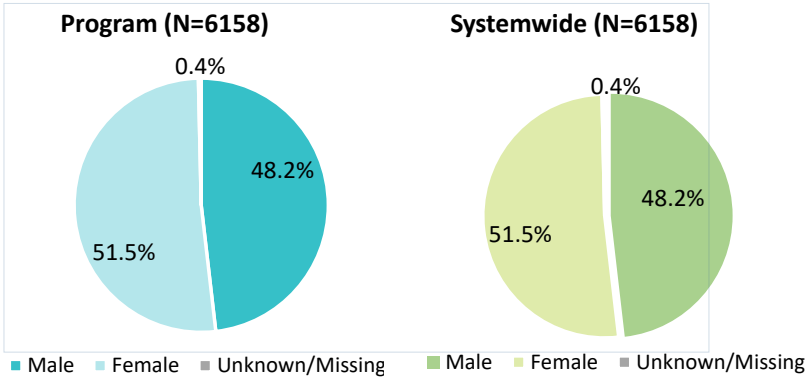
* Compliance data sources: CCBH, PAF, 3M and KET. † Other categories are listed in the appendix.

Program Name: All FSP
Provider ID: Total

POPULATION SERVED*

Demographics

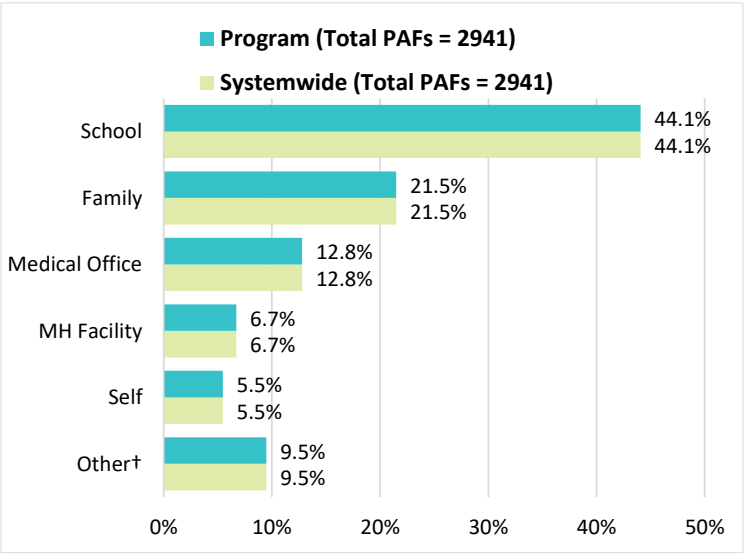
Sex §



Age

Program			Systemwide		
Min	Mean	Max	Min	Mean	Max
0	11.2	20	0	11.2	20

Referral sources (%)



Partnership status

	Program	Systemwide
Clients active on the first day of the FY (i.e., rollover clients)	3090	3090
Clients admitted during the FY	4191	4191
Clients discharged during the FY	3142	3142
Clients active on the last day of the reporting period	4139	4139

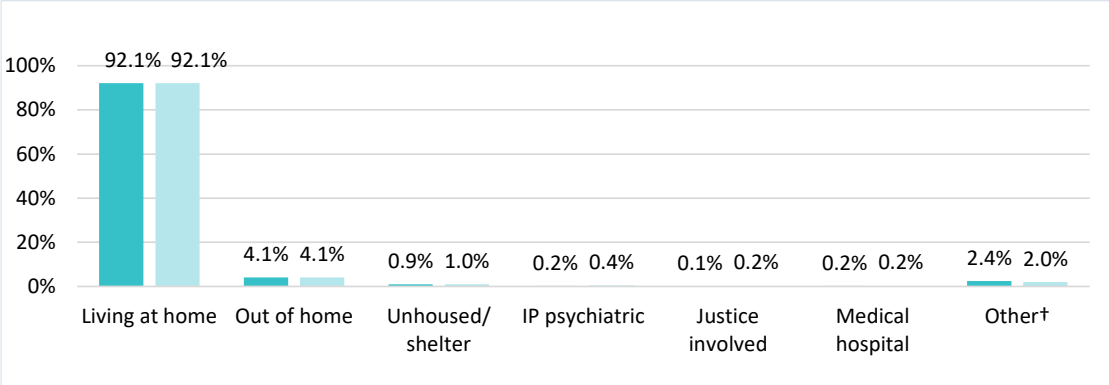
* Population served data sources: CCBH and PAF. † Other categories are listed in the appendix
§ Due to the transition to SmartCare, client sex is now reported in place of gender.

Program Name: All FSP
Provider ID: Total

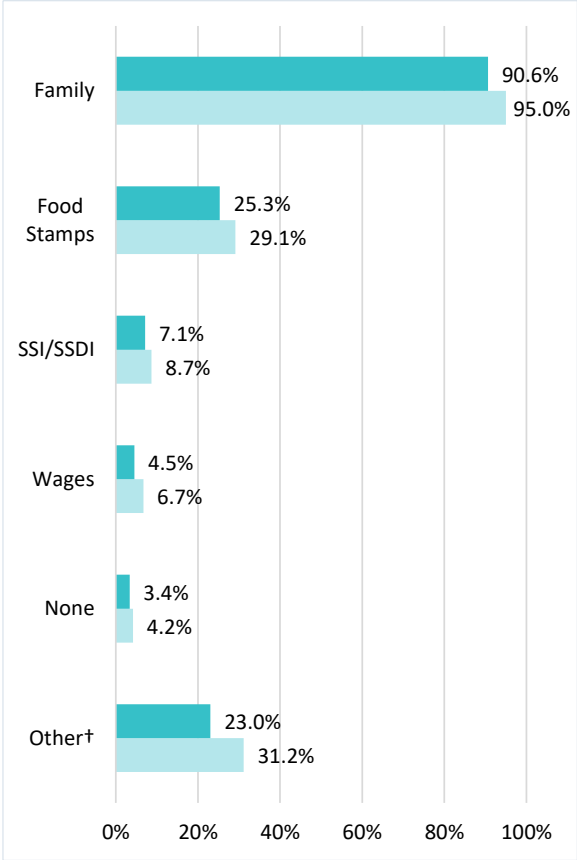
OUTCOME DATA* - Program level (N= 6158 clients)

Intake Latest

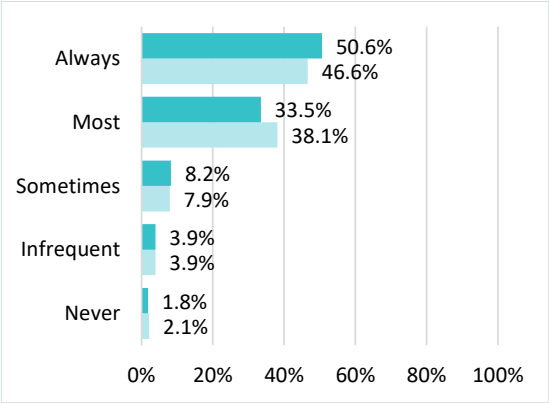
Residential Status at Intake and Latest (%)



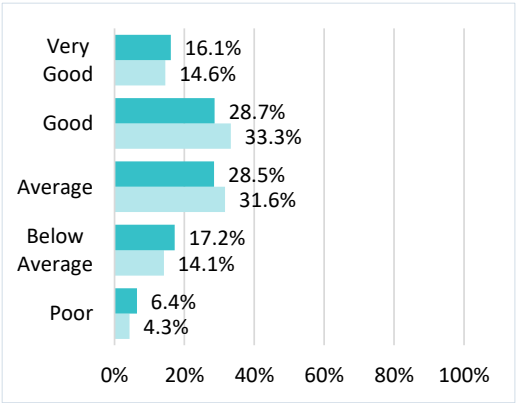
Financial Source at Intake and Latest (%)‡



Attendance at Intake and Latest (%)



Grades at Intake and Latest (%)

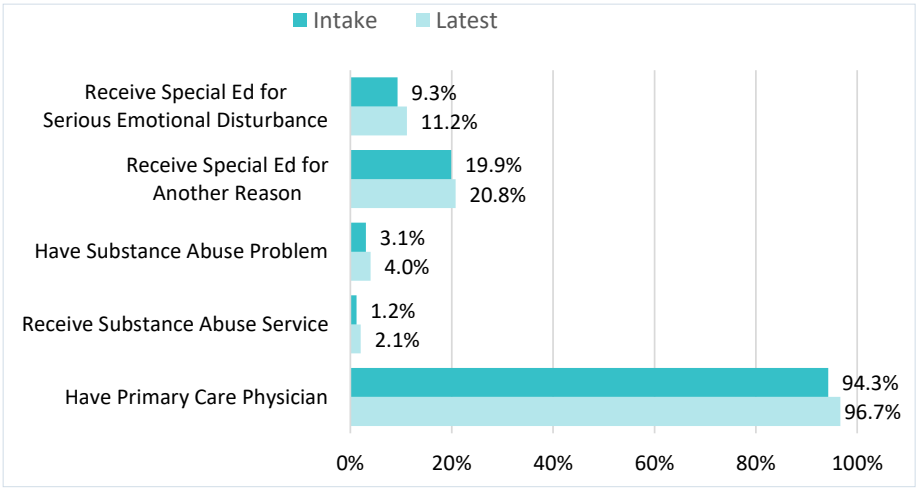


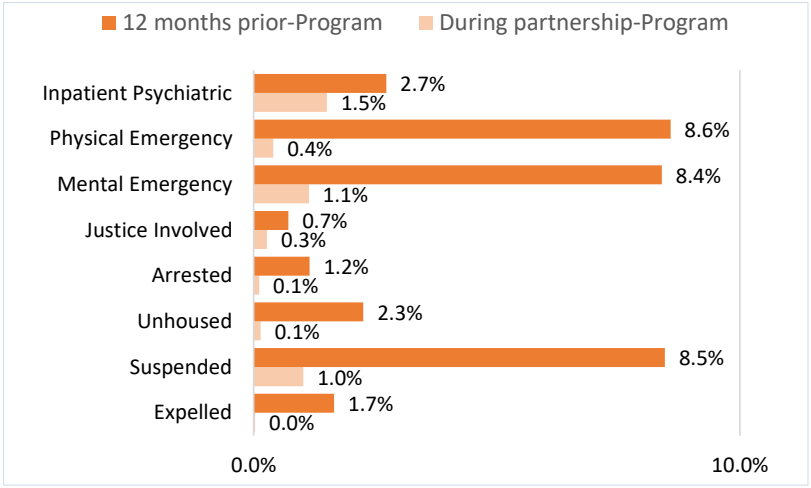
* Outcome data sources: PAF, 3M and KET. Changes in outcomes may be misrepresented for clients with missing PAFs, 3Ms or KET data. † Other categories are listed in the appendix. ‡ Clients may endorse more than one financial source so the data may sum to more than 100%.

Program Name: All FSP
Provider ID: Total

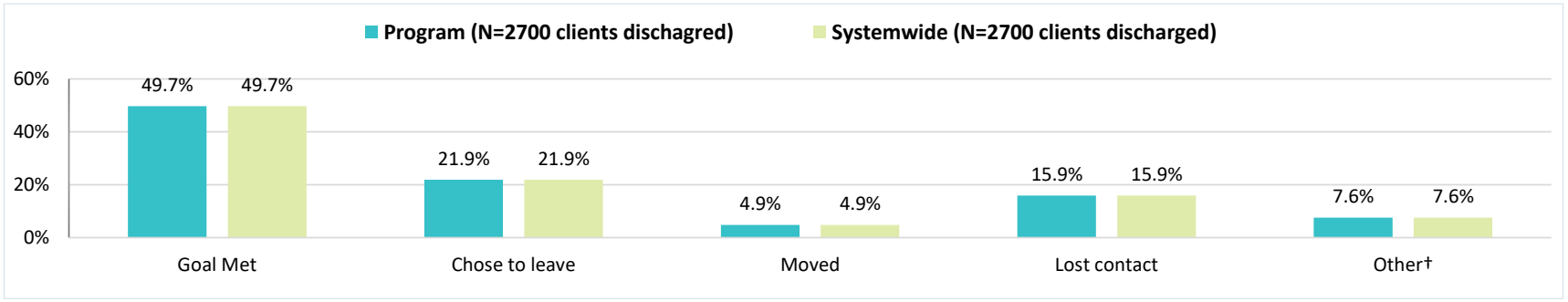
OUTCOME DATA* - Program level (N= 6158 clients)

Risk and Protective Factors (%)





Reasons for Discharge, among Those with A Discharge KET (%)



* Outcome data source: PAF, 3M and KET. Change in outcomes may be misrepresented for clients with missing PAFs, 3Ms or KETS data. † Other categories are listed in the appendix.

Program Name: All FSP
Provider ID: Total

APPENDIX

Data Compliance

	Program level		Systemwide level	
Service events included in compliance outcomes*	**#**	**%**	**#**	**%**
Service events included in compliance outcomes	7083	97.3%	7083	97.3%
Service events not included in compliance outcomes	198	2.7%	198	2.7%
Total service events	7281		7281	

* In cases where clients are served by more than one FSP program at the same time, the program where the client first received services is responsible for entering the DCR data. Compliance is only calculated for programs that are responsible for entering data in the DCR.

Compliance - Eligible service events entered in the DCR	**#**	**%**	**#**	**%**
Service event not entered in the DCR (i.e., non-compliant)	713	10.1%	713	10.1%
Service event entered in the DCR (i.e., compliant)	6370	89.9%	6370	89.9%
Total service events included in compliance	7083		7083	

Quarterly reports (3Ms) submitted	**#**	**%**	**#**	**%**
On Time	5813	91.3%	5813	91.3%
126-200 days late	285	4.5%	285	4.5%
201-365 days late	237	3.7%	237	3.7%
More than 365 days late	35	0.5%	35	0.5%
Total service events matched in the DCR	6370		6370	

Children, Youth and Families FSP Dashboard and Report

Program Name: All FSP
Provider ID: Total

KETs submitted by time in treatment	Program level # of KETs submitted	Program level # of clients in treatment	Program level KET Submission %	Systemwide level # of KETs submitted	Systemwide level # of clients in treatment	Systemwide level KET Submission %
At least 3 months in treatment	520	4807	10.8%	520	4807	10.8%
At least 6 months in treatment	622	2924	21.3%	622	2924	21.3%
At least 9 months in treatment	632	1863	33.9%	632	1863	33.9%
At least 12 months in treatment	472	1141	41.4%	472	1141	41.4%

Clients with KETs submitted in the FY, by type of KET	#	%	#	%
Residential Change	171	2.7%	171	2.7%
Dependent of the Court	5	0.1%	5	0.1%
Conservatorship	9	0.1%	9	0.1%
Suspension	40	0.6%	40	0.6%
Expulsion	1	0.0%	1	0.0%
Physical Health Emergency	11	0.2%	11	0.2%
Mental Health Emergency	46	0.7%	46	0.7%
Arrest	3	0.0%	3	0.0%
Probation	4	0.1%	4	0.1%
Parole	2	0.0%	2	0.0%
Grade Completion	513	8.1%	513	8.1%
Setting Change	0	0.0%	0	0.0%
Total service events matched in the DCR	6370		6370	

Program Name: All FSP
Provider ID: Total

Population Served

	Program level		Systemwide level	
Sex	**#**	**%**	**#**	**%**
Female	3170	51.5%	3170	51.5%
Male	2966	48.2%	2966	48.2%
Unknown/Missing	22	0.4%	22	0.4%
Total unique clients	6158		6158	

Age	#	#
Average Age	11.2	11.2
Age Range	0-20	0-20

Partnership Status	**#**	**%**	**#**	**%**
Clients open on the first day of the FY	3090	42.4%	3090	42.4%
Clients admitted during the FY	4191	57.6%	4191	57.6%
Clients discharged during the FY	3142	43.2%	3142	43.2%
Clients open on the last day of the reporting period	4139	56.8%	4139	56.8%
Average number of days clients were open in the CCBH	229.8	-	229.8	-
Total service events	7281		7281	

Children, Youth and Families FSP Dashboard and Report

Program Name: All FSP
Provider ID: Total

	Program level		Systemwide level	
Referral Sources	**#**	**%**	**#**	**%**
Self	161	5.5%	161	5.5%
Family	632	21.5%	632	21.5%
Friend	14	0.5%	14	0.5%
School	1296	44.1%	1296	44.1%
Medical Office	376	12.8%	376	12.8%
Emergency Room	23	0.8%	23	0.8%
Mental Health Facility	197	6.7%	197	6.7%
Social Service Agency	129	4.4%	129	4.4%
Substance Abuse Facility	1	0.0%	1	0.0%
Faith-based Organization	0	0.0%	0	0.0%
Other County Agency	23	0.8%	23	0.8%
Unhoused Shelter	2	0.1%	2	0.1%
Street Outreach	0	0.0%	0	0.0%
Juvenile Hall	28	1.0%	28	1.0%
Acute Psychiatric	19	0.6%	19	0.6%
Other	32	1.1%	32	1.1%
Unknown/Missing	8	0.3%	8	0.3%
Total PAFs*	2941		2941	

* Only includes new PAFS submitted during the FY

Program Name: All FSP
Provider ID: Total

Outcome Data

Residential Status	Program level				Systemwide level			
	Intake		Latest		Intake		Latest	
	#	%	#	%	#	%	#	%
Living at Home	5671	92.1%	5669	92.1%	5671	92.1%	5669	92.1%
Out of Home	253	4.1%	252	4.1%	253	4.1%	252	4.1%
Unhoused/Shelter	58	0.9%	62	1.0%	58	0.9%	62	1.0%
Inpatient Psychiatric	10	0.2%	25	0.4%	10	0.2%	25	0.4%
Justice Involved	7	0.1%	14	0.2%	7	0.1%	14	0.2%
Medical Hospital	11	0.2%	14	0.2%	11	0.2%	14	0.2%
Other Settings	48	0.8%	49	0.8%	48	0.8%	49	0.8%
Unknown/Missing	100	1.6%	73	1.2%	100	1.6%	73	1.2%
Total unique clients	6158		6158		6158		6158	

Financial Sources*								
	Intake		Latest		Intake		Latest	
	#	%	#	%	#	%	#	%
Family	5582	90.6%	5852	95.0%	5582	90.6%	5852	95.0%
Wages	277	4.5%	413	6.7%	277	4.5%	413	6.7%
Savings	124	2.0%	190	3.1%	124	2.0%	190	3.1%
Loans	44	0.7%	58	0.9%	44	0.7%	58	0.9%
Housing	142	2.3%	202	3.3%	142	2.3%	202	3.3%
General Relief	201	3.3%	289	4.7%	201	3.3%	289	4.7%
Food Stamps	1560	25.3%	1795	29.1%	1560	25.3%	1795	29.1%
TANF	196	3.2%	298	4.8%	196	3.2%	298	4.8%
SSI/SSDI	439	7.1%	535	8.7%	439	7.1%	535	8.7%
Other	711	11.5%	882	14.3%	711	11.5%	882	14.3%
None	207	3.4%	258	4.2%	207	3.4%	258	4.2%
Total unique clients	6158		6158		6158		6158	

* Clients may endorse more than one financial source

Children, Youth and Families FSP Dashboard and Report

Program Name: All FSP
Provider ID: Total

Attendance	Program level				Systemwide level			
	Intake		Latest		Intake		Latest	
	#	%	#	%	#	%	#	%
Always	3117	50.6%	2872	46.6%	3117	50.6%	2872	46.6%
Most	2061	33.5%	2349	38.1%	2061	33.5%	2349	38.1%
Sometimes	508	8.2%	488	7.9%	508	8.2%	488	7.9%
Infrequent	240	3.9%	239	3.9%	240	3.9%	239	3.9%
Never	112	1.8%	130	2.1%	112	1.8%	130	2.1%
NA/Missing	120	1.9%	80	1.3%	120	1.9%	80	1.3%
Total unique clients	6158		6158		6158		6158	

Grades	Intake		Latest		Intake		Latest	
	#	%	#	%	#	%	#	%
Very Good	991	16.1%	896	14.6%	991	16.1%	896	14.6%
Good	1765	28.7%	2051	33.3%	1765	28.7%	2051	33.3%
Average	1755	28.5%	1949	31.6%	1755	28.5%	1949	31.6%
Below Average	1060	17.2%	871	14.1%	1060	17.2%	871	14.1%
Poor	395	6.4%	266	4.3%	395	6.4%	266	4.3%
NA/Missing	192	3.1%	125	2.0%	192	3.1%	125	2.0%
Total unique clients	6158		6158		6158		6158	

Risk and protective factors	Intake		Latest		Intake		Latest	
	#	%	#	%	#	%	#	%
Receive Special Ed for Serious Emotional Disturbance	575	9.3%	688	11.2%	575	9.3%	688	11.2%
Receive Special Ed for Another Reason	1227	19.9%	1278	20.8%	1227	19.9%	1278	20.8%
Have Substance Abuse Problem	190	3.1%	245	4.0%	190	3.1%	245	4.0%
Receive Substance Abuse Service	74	1.2%	127	2.1%	74	1.2%	127	2.1%
Have Primary Care Physician	5805	94.3%	5955	96.7%	5805	94.3%	5955	96.7%
Total unique clients	6158		6158		6158		6158	

Program Name: All FSP
Provider ID: Total

Risk and protective factors	Program level				Systemwide level			
	12 Months Prior		During Partnership		12 Months Prior		During Partnership	
	#	%	#	%	#	%	#	%
Expelled	102	1.7%	2	0.0%	102	1.7%	2	0.0%
Suspended	521	8.5%	63	1.0%	521	8.5%	63	1.0%
Unhoused	139	2.3%	9	0.1%	139	2.3%	9	0.1%
Arrested	71	1.2%	7	0.1%	71	1.2%	7	0.1%
Justice Involved	44	0.7%	17	0.3%	44	0.7%	17	0.3%
Mental Health Emergency	517	8.4%	70	1.1%	517	8.4%	70	1.1%
Physical Health Emergency	528	8.6%	25	0.4%	528	8.6%	25	0.4%
Inpatient Psychiatric	168	2.7%	93	1.5%	168	2.7%	93	1.5%
Total unique clients	6158		6158		6158		6158	

Reasons for discharge, among those with a Discharge KET	Program level		Systemwide level	
	#	%	#	%
Goal Met	1342	49.7%	1342	49.7%
Target Criteria Not Met	74	2.7%	74	2.7%
Chose to Leave	592	21.9%	592	21.9%
Moved	131	4.9%	131	4.9%
Lost Contact	430	15.9%	430	15.9%
Placed In An Institution	15	0.6%	15	0.6%
Jail/Juvenile Hall/DJJ	11	0.4%	11	0.4%
Deceased	0	0.0%	0	0.0%
Unknown/Missing	105	3.9%	105	3.9%
Total unique clients with a discharge KET	2700		2700	

Children, Youth and Families FSP Dashboard and Report

Program Name: All FSP
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School-based program: No

Attendance Performance Outcome Objectives for the QSR*

Number	OUTCOME OBJECTIVES	YTD Results†		
		%	X of Y	
1	Academic performance compliance rates			
a)	At discharge, 95% of clients between the ages of 5 and 18, whose episode lasted 120 days or longer have **school attendance data available** for both the initial and most recent quarterly (3M) assessment	78.75%	1,356	1,722
b)	Please provide explanation below if **compliance rate is below 95%:**			
2	Percent of clients that had sustained "high" academic performance or improved academic performance between intake and discharge - **"High" School Attendance Sustained:** Clients who had ratings of "Always attends school (never truant)" or "Attends school most of the time" at both the initial assessment and the last quarterly (3M) assessment. - **"Low" School Attendance Sustained:** Clients who had the same ratings of "Sometimes attends school "Infrequently attends school", or "Never attends school" at both the initial assessment and the last quarterly (3M) assessment. - **School Attendance Improved:** Clients who had any improvement in attendance ratings between the initial assessment and the last quarterly (3M) assessment (e.g., moving from a rating of "Never attends school" to "Infrequently attends school"). - **School Attendance Declined:** Clients who had any decline in attendance ratings between the initial assessment and the last quarterly (3M) assessment (e.g., moving from a rating of "Infrequently attends school" to "Never attends school").			
a)	**"High" School Attendance Sustained** (2 or fewer unexcused absences a month)	78.9%	1070	1356
b)	**"Low" School Attendance Sustained** (3 or more unexcused absences a month)	3.3%	45	1356
c)	**School Attendance Improved** (movement on the 5-point rating scale)	9.2%	125	1356
d)	**School Attendance Declined** (movement on the 5-point rating scale)	8.6%	116	1356
	TOTAL	100.0%	1356	1356

* This table reflects cumulative FY 2024-25 DCR data and may be used to populate the Q4 FY 2024-25 "Academic Outcome" requirements for the QSR. Please note, not all programs are required to enter these data in the QSR.

† Year-to-Date (YTD) Results are calculated using data submitted to DCR/CCBH in FY 2024-25. Outcomes are calculated for clients who meet the following eligibility criteria: (a) Discharged within the current fiscal year; (b) In services for at least 120 days; (c) Between the ages of 5 and 18; (d) Served by a primary program (i.e., ancillary programs are excluded; (e) Eligible to receive a Partnership Assessment Form (PAF) assessment at intake.

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School-based program: No

Academic Performance Outcome Objectives for the QSR*

Number	OUTCOME OBJECTIVES	YTD Results†		
		%	X of Y	
1	Academic performance compliance rates			
a)	At discharge, 95% of clients whose episode lasted 120 days or longer have academic performance data available for both the initial and most recent quarterly (3M) assessment	78.46%	1,351	1,722
b)	Please provide explanation below if compliance rate is below 95%:			
2	Percent of clients that had sustained "high" academic performance or improved academic performance between intake and discharge - **"High" Academic Performance Sustained:** Clients who had academic ratings of "Very Good" or "Good" at both the initial assessment and the last quarterly (3M) assessment. - **"Average" Performance Sustained:** Clients who had the same rating of "Average" at both the initial assessment and the last quarterly (3M) assessment. - **"Low" Performance Sustained:** Clients who had the same academic ratings of "Below Average", or "Poor" at both the initial assessment and the last quarterly (3M) assessment - **Academic Performance Improved:** Clients who had any improvement in academic ratings between the initial assessment and the last quarterly (3M) assessment (e.g., moving from a rating of "Below Average" to "Average"). - **Academic Performance Declined:** Clients who had any decline in academic ratings between the initial assessment and the last quarterly (3M) assessment (e.g., moving from a rating of "Average" to "Below Average").			
a)	**"High" Academic Performance Sustained** (grades of "As", "Bs", or equivalent)	31.8%	429	1351
b)	**"Average" Academic Performance Sustained** (grades of "Cs or equivalent)	13.0%	176	1351
c)	**"Low" Academic Performance Sustained** (grades of "Ds", "Fs" or equivalent)	6.2%	84	1351
d)	**Academic Performance Improved** (movement on the 5-point rating scale)	30.0%	405	1351
e)	**Academic Performance Declined** (movement on the 5-point rating scale)	19.0%	257	1351
	TOTAL	100.0%	1351	1351

* This table reflects cumulative FY 2024-25 DCR data and may be used to populate the Q4 FY 2024-25 "Academic Outcome" requirements for the QSR. Please note, not all programs are required to enter these data in the QSR.

† Year-to-Date (YTD) Results are calculated using data submitted to DCR/CCBH in FY 2024-25. Outcomes are calculated for clients who meet the following eligibility criteria: (a) Discharged within the current fiscal year; (b) In services for at least 120 days; (c) Between the ages of 5 and 18; (d) Served by a primary program (i.e., ancillary programs are excluded; (e) Eligible to receive a Partnership Assessment Form (PAF) assessment at intake.