## COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU – MHSA IMPLEMENTATION AND OUTCOMES DIVISION





WELLNESS • RECOVERY • RESILIENCE

**Prevention & Early Intervention: Crisis Oriented Recovery Services (CORS)** 

# Countywide Aggregate Practice Outcomes Dashboard Report Outcome Data Submission through May 22, 2013

#### **DIRECTLY OPERATED REPORT**

#### **Participating Legal Entities Include:**

LA County Dept of Mental Health:	Harbor-UCLA Medical Center
Antelope Valley, MHC	Hollywood MHC
Augustus F Hawkins Family MHS	Long Beach MHS Adult Clinic
American Indian Counseling Center	Northeast MHC
Arcadia MHS	Roybal Family MHS
Coastal API Family MHC	San Antonio MHC
Compton Family MHS	San Pedro MHC
Downtown MHC	South Bay MHS

Table 1. CORS Status Since Inception to May 22, 2013								
# of Clients Claimed to Practice	# of Clients Entered into PEI OMA	# of Tx Cycles in PEI OMA	Clients with Multiple Tx Cycles	Clients Completing Tx	Clients Dropping-Out of Tx			
5316	6.41%	341	0.00%	32.55%	27.57%			
n=	341	n=	0	111	94			

Note 1: Clients Claimed was based on CORS being selected as the EBP in a PEI Plan and having  $\geq 1$  core services claimed to the practice starting July 1, 2011.

Note 2: Number of clients Completing Tx or Dropping-Out of Tx was determined by whether the EBP was said to be completed (e.g. answered "yes" or "no") in the PEI OMA.

Table 2. Clie	Table 2. Client Demographics - Clients Who Entered CORS											
	Age	e Gender				Ethnicity				Primary Language		
Total Number of Clients	Average	Female	Male	Unknown	African-American	Asian / Pacific Islander	Caucasian	Hispanic / Latino	Other	English	Spanish	Other
341	28	55.72%	43.99%	0.29%	21.70%	5.57%	12.32%	50.15%	10.26%	74.78%	22.29%	2.93%
	n=	190	150	1	74	19	42	171	35	255	76	10

Note1: Age is calculated at the date of the first EBP.

Note2: Percentages may not total 100 due to missing data and/or rounding errors.

Table 3: Top	Table 3: Top 5 Most Frequently Reported DSM-IV Primary Axis Diagnosis - Clients Who Entered CORS								
Total Treatment Cycles	Depressive Disorder NOS	Mood Disorder NOS	Adjustment Disorder With Anxiety and Depressed Mood	Major Depressive Disorder, Rec., Severe W/O Psychotic Features	Major Depressive Disorder, Recurrent, Moderate	Other*			
341	11.44%	8.21%	6.45%	5.87%	5.28%	62.76%			
n=	39	28	22	20	18	214			

<sup>\*</sup>See breakout of "Other" on the supplemental information page.

Table 4: Program Pro	cess Data - Cli	ents Who Ent	ered CORS
Outcome Measures Administered	Pre-Test with Scores	Post-test with Scores	Clients Who Completed both a Pre and Post Measure with Scores
Youth Outcome Questionnaire - 2.01 (Parent)	88.70%	57.53%	34.78%
n=	102	42	40
Ackn=	115	73	115
Youth Outcome Questionnaire – Self Report – 2.0 (YOQ- SR)	87.72%	54.29%	33.33%
n=	50	19	19
Ackn=	57	35	57
Outcome Questionnaire - 45.2	75.52%	56.45%	17.19%
n=	145	35	33
Ackn=	192	62	192

Note 1: Number of acknowledged measures (Ackn=) is determined by the number of required measures that receive a score or an unable to collect reason code.

Note 2: The % indicated for Pre-test with scores, Post-test with scores, and both a Pre- and Post-test with scores is calculated by dividing the (n=#) by the number acknowledged (Ackn=#) in the PEI OMA system for each measure. The number acknowledged (Ackn=#) for those with Pre and Post scores is an estimate based on the greatest number of matches that could be expected given the number of Pre scores acknowledged.

Table 5a.	Table 5a. Top Reasons Given for "Unable to Collect"								
Questionnaire - 2.01 arent)	Total Pre		Parent/care provider unavailable	Administration date exceeds acceptable range	Lost contact with parent/care provider	Parent/care provider refused	Administered wrong forms		
onr	13	percent	46.15%	23.08%	15.38%	7.69%	7.69%		
esti		n	6	3	2	1	1		
Outcome (P	Total Post		Parent/care provider unavailable	Premature termination	Administration date exceeds acceptable range	Lost contact with parent/care provider	Parent/care provider refused		
Youth	31	percent	58.06%	22.58%	6.45%	6.45%	6.45%		
		n	18	7	2	2	2		

Table 5b.	able 5b. Top Reasons Given for "Unable to Collect"								
Questionnaire 2.0 (YOQ-SR)	Total Pre		Client unavailable	Outcome measure unavailable	Administered wrong forms				
stio	7	percent	42.86%	28.57%	28.57%				
Que		n	3	2	2				
Youth Outcome ( Self Report – 2	Total Post		Client unavailable	Premature termination	Clinician not trained in outcome measure	Lost contact with client	Administered wrong forms	Other Reasons	
	16	percent	62.50%	12.50%	6.25%	6.25%	6.25%	6.25%	
		n	10	2	1	1	1	1	

Table 5c.	Top Rea	asons Give	n for "Unable to	o Collect"				
e - 45.2	Total Pre		Outcome measure unavailable	Client refused	Client unavailable	Premature termination	Administration date exceeds acceptable range	Other Reasons
nair	47	percent	23.40%	21.28%	21.28%	12.77%	8.51%	12.77%
ion		n	11	10	10	6	4	6
Outcome Questionnaire	Total Post		Client unavailable	Lost contact with client	Outcome measure unavailable	Premature termination	Administration date exceeds acceptable range	Other Reasons
	27	percent	40.74%	29.63%	7.41%	7.41%	7.41%	7.41%
		n	11	8	2	2	2	2

Table 6. Service Delivery Data – Clients Who Completed CORS							
Tota Treatm Cycle	ent	Average Length of Treatment in Weeks	Range of 1 We		Average Number of Sessions	Range of	Sessions
111		8	Min 0	Max 48	5	Min 1	Max 16

Note: Completed CORS is defined as having a 'yes' for completion indicated in the PEI OMA.

Table 7a. Outcor	Table 7a. Outcome Data* – Clients who Completed CORS							
		Percent Improvement	Percent of Clients Showing Reliable Change* from Pre-CORS to Post-CORS					
		from Pre to Post	Positive Change	No change	Negative Change			
Youth Outcome Questionnaire (YOQ) - 2.01	TOTAL	35.88%	47.50%	45.00%	7.50%			
(Parent)		(n=40)	19	18	3			
Youth Outcome								
Questionnaire - Self Report - 2.0	TOTAL	Not Enough	0.00%	0.00%	0.00%			
(YOQ-SR)		Data	NA	NA	NA			
Outcome Questionnaire –	TOTAL	11.69%	22.58%	64.52%	12.90%			
45.2		(n=31)	7	20	4			

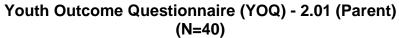
<sup>&</sup>lt;sup>‡</sup>Please see Appendix A. for a description of the CORS outcome measures and the outcome indicators (percent improvement in average scores; and, percent of clients showing reliable change).

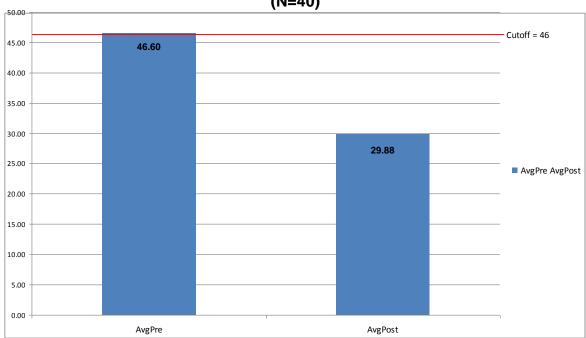
Note 2 Possible YOQ-Parent Total Scores can range from -16 -240, with a clinical cutpoint of 46

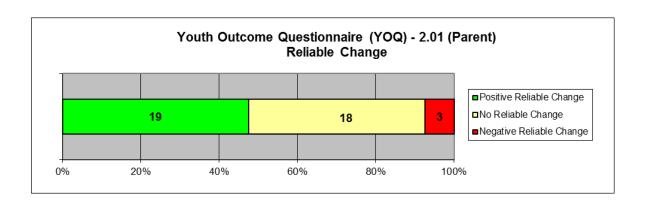
Note 3: Possible YOQ-SR Total Scores can range from -16-240, with a clinical cutpoint of 47.

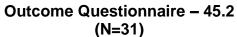
Note 4: Aggregate outcome data based on fewer than 20 clients are not reported.

Note 5: Positive Change indicates that the scores decreased from the pre to the post measures.

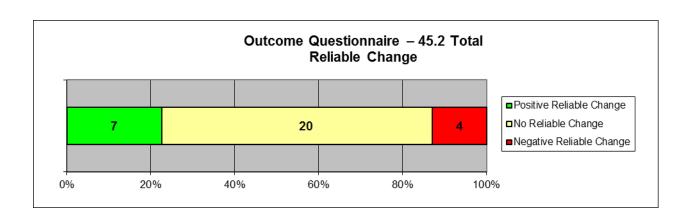












#### <u>Appendix</u>

#### Youth Outcomes Questionnaires ( YOQ (Parent) and YOQ-SR)

The Youth Outcome Questionnaire is a 64-item parent-report that assesses global distress in a child's/adolescent's life from 4-17 years of age. The YOQ-SR is the Self-report version of the YOQ and is completed by the child/adolescent him or herself. Scores on both measures can range from -16 to 240. Scores of 46 or higher are most similar to a clinical population on the YOQ. A score of 47 is most similar to that of a clinical population on the YOQ-SR.

#### Outcomes Questionnaires (OQ)

The Outcome Questionnaire is a 45-item self-report that assesses global distress in a client's life from ages 19 and older. Total Scores on this measure can range from 0 to 180, with scores of 63 or higher indicating clinical significance.

#### Reliable Change Index

When comparing Pre and Post scores, it is very helpful to know whether the change reported represents the real effects of the treatment or errors in the system of measurement. The Reliability of Change Index (RCI) is a statistical way of helping to insure that the change recorded between pre and post assessments exceeds that which would be expected on the basis of measurement error alone. The RCI has been calculated using the Jacobson and Truax (1991) method and indicates when change exceeds that which would be expected on the basis of error at the p<.05 probability level. For a more in-depth discussion of Reliability of Change see Jacobson, N. S., & Truax. P. (1991). Clinical Significance: A statistical approach to defining meaningful change in psychotherapy research. *Journal of Consulting and Clinical Psychology*, 59, 12-19. Also see Wise, E. A. (2004). Methods for analyzing psychotherapy outcomes: A review of clinical significance, reliable change, and recommendations for future directions. *Journal of Personality Assessment*, 82(1), 50-59.

The number and percent of clients experiencing positive change, no change and negative change are recorded in table 6. Healthful change in each of the measures cited here means that scores have <u>decreased</u> in value from pre to post test administrations (i.e. recorded a negative change on the RCI). To help avoid confusion, healthful reliable change is presented as positive while unhealthful reliable change is presented as negative change.

### Supplemental Information for Table 3 "Other" Diagnosis Category

DSM-IV Primary Axis Diagnosis - Clients Who Entered CORS	n	Percent
Post-Traumatic Stress Disorder	16	4.69%
Anxiety Disorder NOS	14	4.11%
Psychotic Disorder NOS	13	3.81%
Adjustment Disorder With Depressed Mood	13	3.81%
Major Depressive Disorder, Rec., Severe With Psychotic Features	12	3.52%
Generalized Anxiety Disorder	12	3.52%
Disruptive Behavior Disorder NOS	11	3.23%
Attention-Deficit/Hyperactivity Disorder, Combined Type or Hyperactive Impulse	0	2.640/
Type	9	2.64%
Adjustment Disorder Unspecified	9	2.64%
Adjustment Disorder W/Mixed Disturbance Emotion and Conduct	8	2.35%
Major Depressive Disorder, Single Episode, Moderate	7	2.05%
Schizophrenia, Paranoid Type	7	2.05%
Dysthymic Disorder	7	2.05%
Schizoaffective Disorder	7	2.05%
Major Depressive Disorder, Recurrent, Mild	6	1.76%
Bipolar Disorder NOS	6	1.76%
Major Depressive Disorder, SE, Severe W/O Psychotic Features	5	1.47%
Adjustment Disorder With Anxiety	4	1.17%
Panic Disorder Without Agoraphobia	4	1.17%
Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type	3	0.88%
Panic Disorder With Agoraphobia	3	0.88%
Disorder of Infancy, Childhood, or Adolescence NOS	3	0.88%
Attention-Deficit/Hyperactivity Disorder NOS	3	0.88%
Major Depressive Disorder, Single Episode, Mild	3	0.88%
Oppositional Defiant Disorder	3	0.88%
Major Depressive Disorder, Single Episode, Unspecified	2	0.59%
Brief Psychotic Disorder	1	0.29%
Bipolar I Disorder, Single Manic Episode, Moderate	1	0.29%
Drug Induced Psychotic Disorder, With Delusions	1	0.29%
Drug Induced Mood Disorder	1	0.29%
Major Depressive Disorder, SE, Severe With Psychotic Features	1	0.29%
Major Depressive Disorder, Recurrent, In Partial Remission	1	0.29%
Impulse-Control Disorder NOS	1	0.29%
Mood Disorder Due to(Indicate Medical Condition)	1	0.29%
Bipolar I Disorder, Single Manic Episode, Unspecified	1	0.29%
Identity Problem	1	0.29%

DSM-IV Primary Axis Diagnosis - Clients Who Entered CORS	n	Percent
Bereavement	1	0.29%
Unspecified Mental Disorder (Nonpsychotic)	1	0.29%
Pervasive Developmental Disorder NOS/Asperger's Disorder/Rett's Disorder	1	0.29%
Diagnosis Deferred (code invalid as Secondary/Axis II Diagnosis)	1	0.29%
Bipolar I Disorder, MRE, Manic, Severe With Psychotic Features	1	0.29%
Acute Stress Disorder	1	0.29%
Psychotic Disorder Due to(Indicate Medical Condition) with Delusions	1	0.29%
Schizophrenia, Undifferentiated Type	1	0.29%
Drug Induced Psychotic Disorder, With Hallucinations	1	0.29%
Major Depressive Disorder, Recurrent, Unspecified	1	0.29%
Parent-Child Relational Problem	1	0.29%
Occupational Problem	1	0.29%
Obsessive-Compulsive Disorder	1	0.29%
Drug Related Disorder NOS	1	0.29%
Total Other	214	62.76%