REMINDER

YOU CAN PARTICIPATE EITHER BY LISTENING
THROUGH THE AUDIO SYSTEM IN YOUR COMPUTER

<u>OR</u>

CALLING IN TO THE CONFERENCE LINE BELOW AND ENTERING THE ACCESS CODE WHEN DIRECTED

- CONFERENCE CALL #: (888) 278-0296
- PARTICIPANT ACCESS CODE: 7079926

MHSA Prevention and Early Intervention Outcomes Measures Application

General Learning Network: Module One

Session Two: Four Reports You Need to Know

George W. Eckart, Ph.D. Alex Silva, Psy.D.





- Four Reports You Need to Know
 - Compliance Stats by Provider Report
 - The Questionnaire Statistics by Billing Provider Report
 - The Detailed Report
 - The Unable to Collect (UCS) Report

The Compliance Report

Individual Provider Data Since Inception

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division

PEI Outcomes Compliance Stats by Provider

SAMPLE

Legal Entity: 00000 SAMPLE LEGAL ENTITY

Provider Name: 0000 SAMPLE AGENCY

		Cilcrits		ricutificit			Heatment	
Focus Name	Practice Name	Claimed Clients	% Compliance	Cycles			Cycles w/≥ 1	
		SInce Entered	(#entered div	Treatment w/Completed	Drop	Open	Pre/Post	
		FY 11-12 In PEI OMA	#Claimed)	Cycles EBP(Yes)	Outs	Tx Cycles	Match	
Trauma	Seeking Safety (SS)	117 78	66.67%	78 11	29	38	0	

Clients

Treatment

Treatment

- You can use this report to...
 - Monitor the entry rate of clients in the your PEI OMA System
 - □ Determine over-all client status in your practice (e.g. Completed, Dropped, In Tx)
 - Monitor the "Drop-out Rate" in your practice (to be discussed more fully in Session Three)

- You can use this report to...
 - Compare your progress in implementation/data collection to countywide numbers
 - □ Generate hypotheses about the health of the implementation/data collection process at your agency, make changes if necessary and then monitor the effectiveness of your changes by examining the data at some future point in time

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division

PEI Outcomes Compliance Stats by Provider

Legal Entity: 00000 SAMPLE LEGAL ENTITY

Provider Name: 0000 SAMPLE AGENCY

Focus and Practice

rauma Seeking Safety (SS)

Clients Claimed SInce FY 11-12	Clients Entered In PEI OMA	% Compliance (#entered div #Claimed)	Dat	Treatment Cycles mpleted (Yes)	Drop Outs	Open Tx Cycles	Treatment Cycles w/≥ 1 Pre/Post Match
117	78	66.67%	78	11	29	38	0

Clients Claimed	Clients	% Compliance		Treatment Cycles			Treatment Cycles w/≥ 1
SInce FY 11-12		(#entered div #Claimed)			Drop Outs	Open Tx Cycles	Pre/Post Match
117	78	66.67%	78	11	29	38	0



Client Status

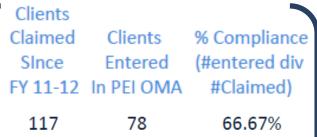
Treatment

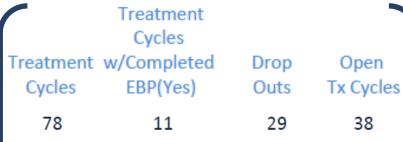
Cycles w/≥ 1

Pre/Post

Match

0

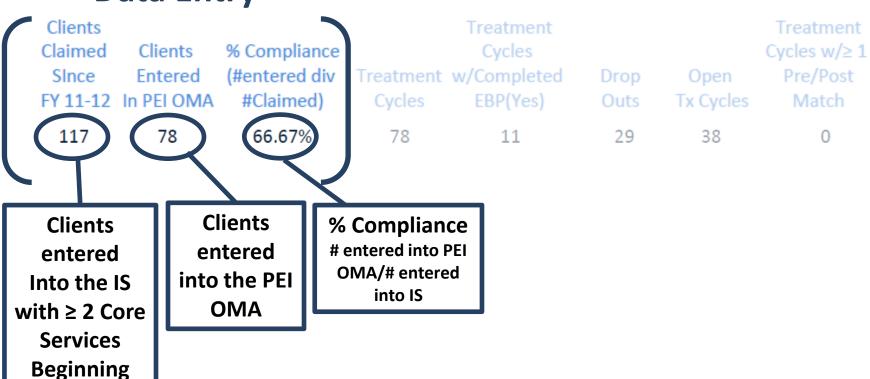


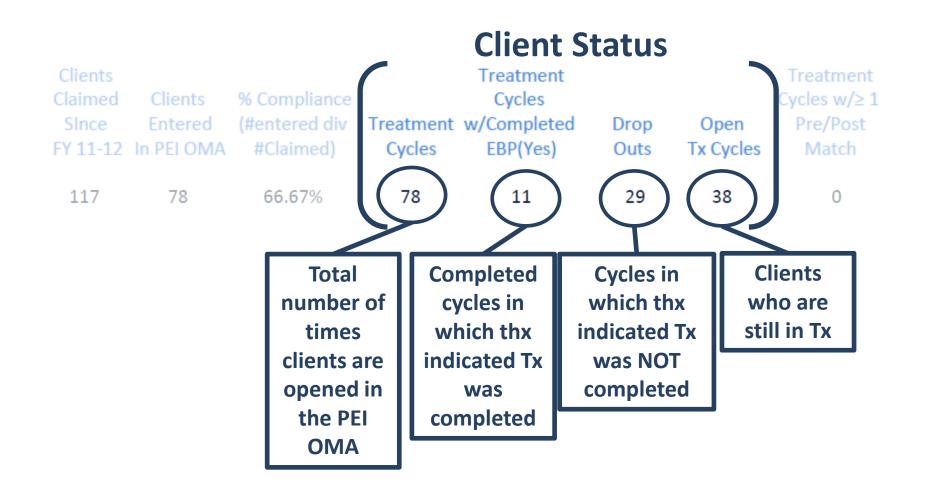


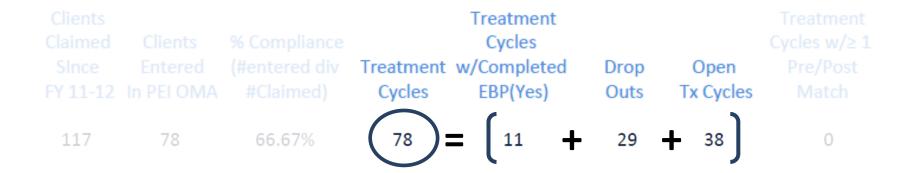
Data Entry

7/1/2011

(IBHIS)*







The relationship between these variables makes it possible to calculate status in program percentages and then compare results to the aggregate data.

Let's pause and take some

Questions?

Presentation resumes in



Questionnaire Stats by Billing Provider Report

Individual Report Since Inception

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division

Questionnaire Statistics by Billing Provider

Service Area: 1 – 8

LegalEntityNum: 123456

ProviderName: My Favorite Provider

Practice Name Group Cognitive Behavioral Therapy for Major Depression (Group CBT for Major Depression)

													Completed	l EBP	52
						_				MAX	Avg				
Questionnaire Name	Subscale Name	Scored Pres				Pre Score	Scored Post						Matched Pairs	Avg Pre	Avg Post
Outcome Questionnaire – 45.2*	Total	202	8	19	154	96	51	102	9	128	71	50	44	89	66
Patient Health Questionnaire (PHQ-9)	Total Score	174	35	0	27	17	69	85	0	27	11	68	38	15	8

- This report will help you to...
 - Monitor the process of data collection/entry in the PEI OMA System
 - Monitor the number of clients completing the practice per outcome measure who also have matched pre-post scores
 - □ Determine the effectiveness of an EBP in an agency, track outcomes over time and compare site specific outcomes to countywide averages

- This report will help you to...
 - □ Generate hypotheses about the health of the implementation/data collection process at your agency, make changes if necessary and then monitor the effectiveness of your changes by examining the data at some future point in time

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division

Questionnaire Statistics by Billing Provider

Service Area: 1 - 8

LegalEntityNum: 123456

ProviderName: My Favorite Provider

Practice Name Group Cognitive Behavioral Therapy for Major Depression (Group CBT for Major Depression)



Outcome Questionnaire – 45.2*

Total

Patient Health Questionnaire (PHQ-9

Total Scor



Process & Outcome Data

												Complete	d EBP	52
	Scored Pres				Pre	Scored Post		Post				Matched Pairs	Avg Pre	Avg Post
OQ 4	202	8	19	154	96	51	102	9	128	71	50	44	89	66
PHQ-	174	35	0	27	17	69	85	0	27	11	68	38	15	8

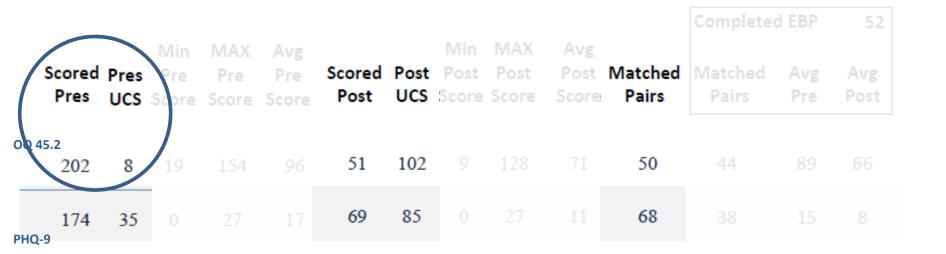
Process & Outcome Data

												Complete	d EBP	52
			Pre	Pre	Pre		Post	Post		Post	Matched Pairs	Matched Pairs		Avg Post
OQ 45.2	02	8	19	154		51	102		128	71	50	44		
17 PHQ-9	74	35	0			69	85			11	68		15	

Process Data

*	With	ı Sco	f Pres res o Coll	_							Complete	d EBP	52
Scored Pres		Pre	MAX Pre Score	Avg Pre Score			Post	MAX Post Score	Avg Post Score	Matched Pairs	Matched Pairs	Avg Pre	Avg Post
202	8	19	154		51	102		128	71	50	44		
174	35	0			69	85			11	68		15	

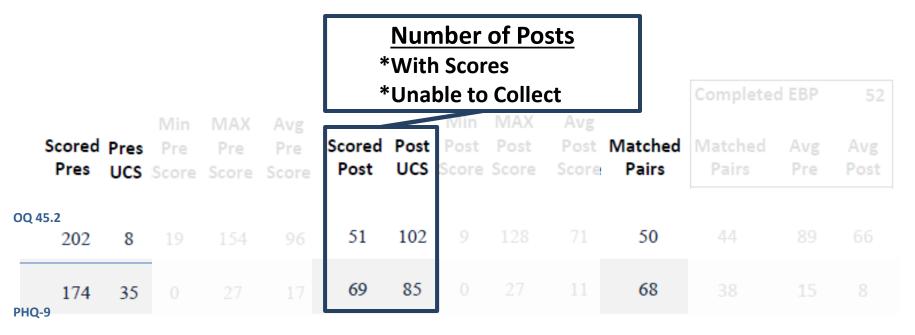
You can use this data to determine the percent of Scored Pres that have been collected.



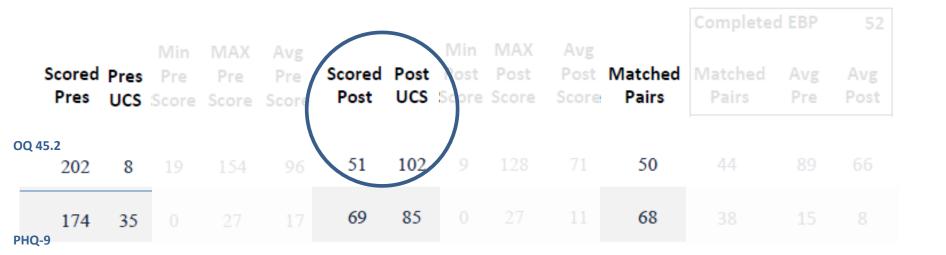
$$\frac{Scored (Pres)}{Scored (Pres) + UCS (Pres)}$$

X 100

Process Data



You can use this data to determine the percent of Scored Posts that have been collected.



$$\frac{Scored (Posts)}{Scored (Posts) + UCS (Posts)} X 100$$



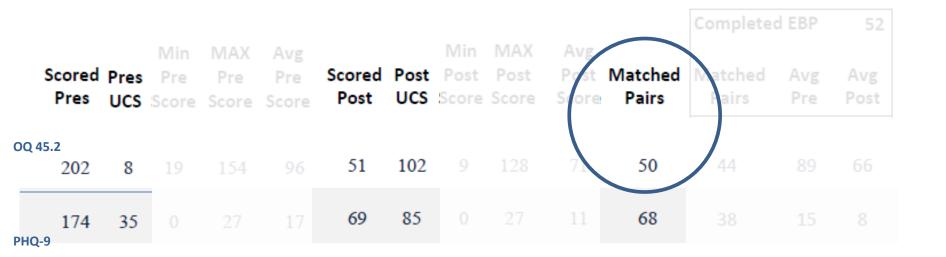
Number of Pre-Post

Matched Pairs

(completed or not)

	cored Pres		Pre	Pre	Pre	Scored Post	Post	Post				/latched Pairs	Avg Pre	Avg Post
OQ 45.	.2 202	8	19	154		51	102		128	71	50	44		
PHQ-9	174	35	0			69	85			11	68	38	15	

You can use this data to determine the percent of Matched Pairs with scores that have been collected.



$$\frac{Scored (Matched)}{Scored (Pres) + UCS (Pres)} X 100$$

The Aggregate Report

Table 4: Program		Clients Who E	_
Outcome Measures Administered	Pre-Test with Scores	Post-test with Scores	Clients Who Completed both a Pre and Post Measure with Scores
Patient Health Questionnaire (PHQ-9)	88.83%	52.49%	25.17%
n=	660	200	187
Ackn=	743	381	743
Youth Outcome Questionnaire – Self Report – 2.0 (YOQ-SR)	33.33%	0.00%	0.00%
n=	1	0	0
Ackn=	3	2	3
Outcome Questionnaire - 45.2	83.17%	42.63%	19.61%
n=	598	162	141
Ackn=	719	380	719

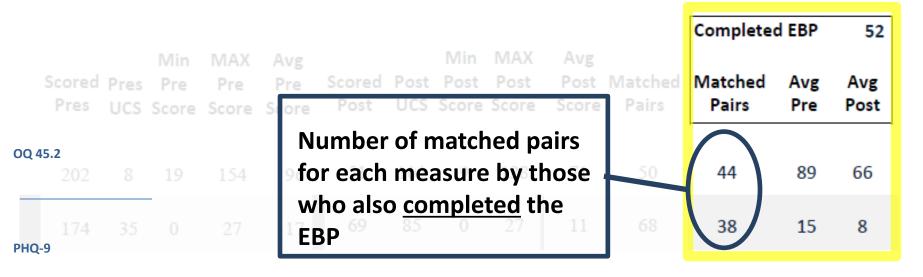
Outcome Data

												Complete	d EBP	52	
:			Pre	Pre		Scored	Post	Post		Post	Matched Pairs	Matched Pairs	_	Avg Post	
OQ 45	202	Q	19	154	96	51	102	9	128	71	50	44	89	66	
	202		-	154	70		102		120			•••			
PHQ-9	174	35	0	27	17	69	85	0	27	11	68	38	15	8	

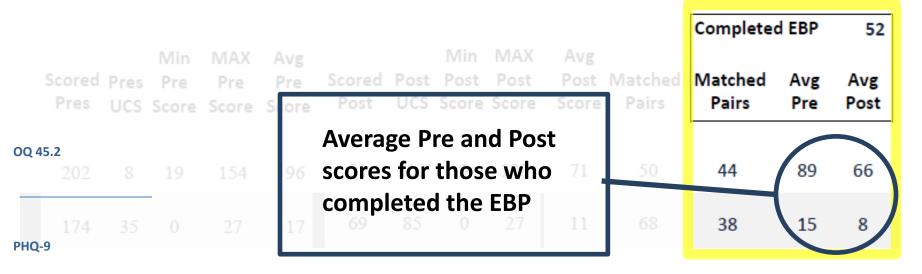
Outcome Data whether client completed the EBP or not

												Complete	EBP	52
			Pre	Pre		Scored Post		Post		Post		Matched Pairs		Avg Post
OQ 4	45.2 202		19	154	96	51	102		128	71	50	44		
РНО	174	35	0		17					11	68		15	

Outcome Data for those who <u>completed</u> the EBP



Outcome Data for those who <u>completed</u> the EBP



Our "Gold Standard" for evaluating EBP effectiveness

Outcome Data for those who <u>completed</u> the EBP



Our "Gold Standard" for evaluating EBP effectiveness

Let's pause and take some

Questions?

Presentation resumes in



The Detailed Report

Individual Provider Data Since inception

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division List of Clients with Service Summary By Legal Entity

Detailed Report

SAMPLE

Legal Entity Name SAMPLE LEGAL ENTITY

Provider Name 0000 SAMPLE PROVIDER NAME

Status Active

Last Name	First Name	ClientId	Focus of Treatment	Practice	Code Intake	Staff Code	Session Date	Session Date	EBP? Yes/ No or N/A
Doe	John	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	311	VER1544	1/16/2014		N/A
Doe	Sally	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	300.4	VER1544	1/16/2014		N/A
Doe	Bob	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	313.81	STI1422	1/17/2013		N/A

- This report will help you to...
 - Determine which clients are active/inactive in a practice and for how long
 - Monitor "client status" and EBP completion with reference to date of first session, diagnosis and primary therapist (cohort?)
 - Survey the kinds of Dx's are found among our clients

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division
List of Clients with Service Summary By Legal Entity
Detailed Report
SAMPLE

Provider Nam	e 0000 SAMP Active	LE PROVIDER NAM	E						
Last Name		Perso	onal &	Practice Informatio	DSM Code Intake	Staff Code	First Session Date	Last Session ilestoi	Completed EBP? Yes/
Doe	John	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	311	VER1544	1/16/2014		N/A

Legal Entity Name SAMPLE LEGAL ENTITY

Personal & Practice Information

Provider Name Status	Active	E PROVIDER NAME	-			
Last Name	First Name	ClientId	Focus of Treatment	Practice	DSM Code Intake	Staff Code
Doe	John	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	311	VER1544
Doe	Sally	xxxxxxx	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	300.4	VER1544
Doe	Bob	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	313.81	STI1422

Personal & Practice Information

	E PROVIDER NAME				
Active First Name	ClientId	Focus of Treatment	Practice	DSM Code Intake	Staff Code
John	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	311	VER1544
Sally	XXXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	300.4	VER1544
Bob	XXXXXX	Trauma	Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma)	313.81	STI1422
	First Name John Sally	First Name ClientId John XXXXXXX Sally XXXXXXX	First Focus of Treatment John XXXXXXXX Trauma Sally XXXXXXXX Trauma	First Focus of Treatment Practice John XXXXXXX Trauma Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma) Sally XXXXXXX Trauma Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma) Bob XXXXXXX Trauma Individual Cognitive Behavioral Therapy - Trauma	First Focus of Code Name ClientId Treatment Practice Intake John XXXXXXX Trauma Individual Cognitive Behavioral Therapy - Trauma (CBT-Trauma) Sally XXXXXXX Trauma Individual Cognitive Behavioral Therapy - Trauma 300.4 (CBT-Trauma) Bob XXXXXXX Trauma Individual Cognitive Behavioral Therapy - Trauma 313.81

Milestones

First Session Date	Last Session Date	Completed EBP? Yes/ No or N/A
1/16/2014		N/A
1/16/2014		N/A
1/17/2013		N/A

Unable to Collect (UCS) Report

Individual Provider Data Since Inception

- This report will help you to...
 - Identify the most prominent reasons for uncollected Pres, Posts and Updates in your practice
 - Explore what UCS factors seem to be local as opposed to countywide
 - □ Determine whether the percentage of UCS is interpretable (e.g. is there enough n to make a judgment about the UCS percentage?)

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

Program Support Bureau - MHSA Implementation and Outcomes Division

Unable to Collect Scores Percentage by Practice

PracticeName Seeking Safety (SS)

SA: 1-∞

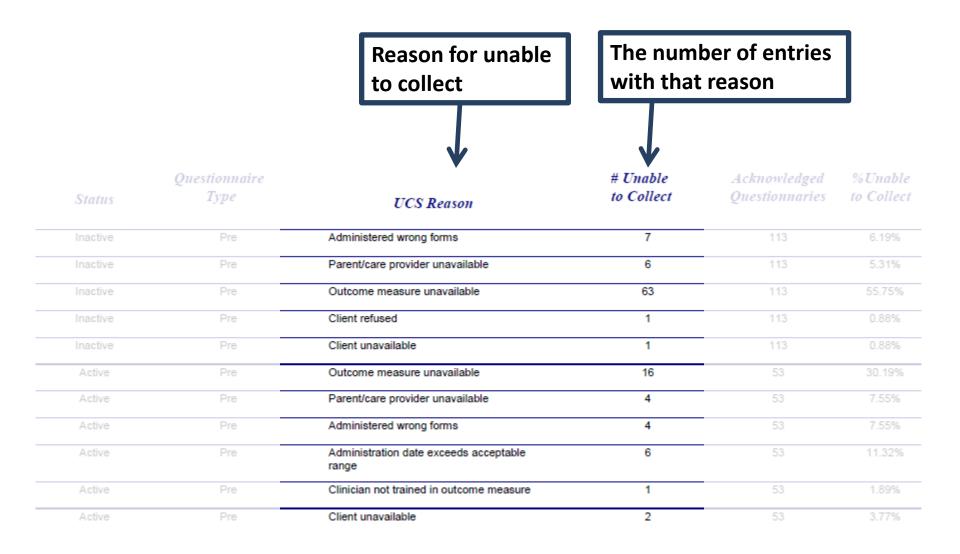
ProviderName Favorite Provider

	Questionnaire		# Unable	Acknowledged	%Unable
Status	Type	UCS Reason	to Collect	Questionnaries	to Collect
Inactive	Pre	Administered wrong forms	7	113	6.19%
Inactive	Pre	Parent/care provider unavailable	6	113	5.31%
Inactive	Pre	Outcome measure unavailable	63	113	55.75%
Inactive	Pre	Client refused	1	113	0.88%
Inactive	Pre	Client unavailable	1	113	0.88%
Active	Pre	Outcome measure unavailable	16	53	30.19%
Active	Pre	Parent/care provider unavailable	4	53	7.55%
Active	Pre	Administered wrong forms	4	53	7.55%
Active	Pre	Administration date exceeds acceptable range	6	53	11.32%
Active	Pre	Clinician not trained in outcome measure	1	53	1.89%
Active	Pre	Client unavailable	2	53	3.77%

	s can be either e or Inactive				
V Status	Questionnaire Type	UCS Reason	# Unable to Collect	Acknowledged Questionnaries	%Unable to Collect
Inactive	Pre	Administered wrong forms	7	113	6.19%
Inactive	Pre	Parent/care provider unavailable	6	113	5.31%
Inactive	Pre	Outcome measure unavailable	63	113	55.75%
Inactive	Pre	Client refused	1	113	0.88%
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Active	Pre	Parent/care provider unavailable	4	53	7.55%
Active	Pre	Administered wrong forms	4	53	7.55%
Active	Pre	Administration date exceeds acceptable range	6	53	11.32%
Active	Pre	Clinician not trained in outcome measure	1	53	1.89%
Active	Pre	Client unavailable	2	53	3.77%

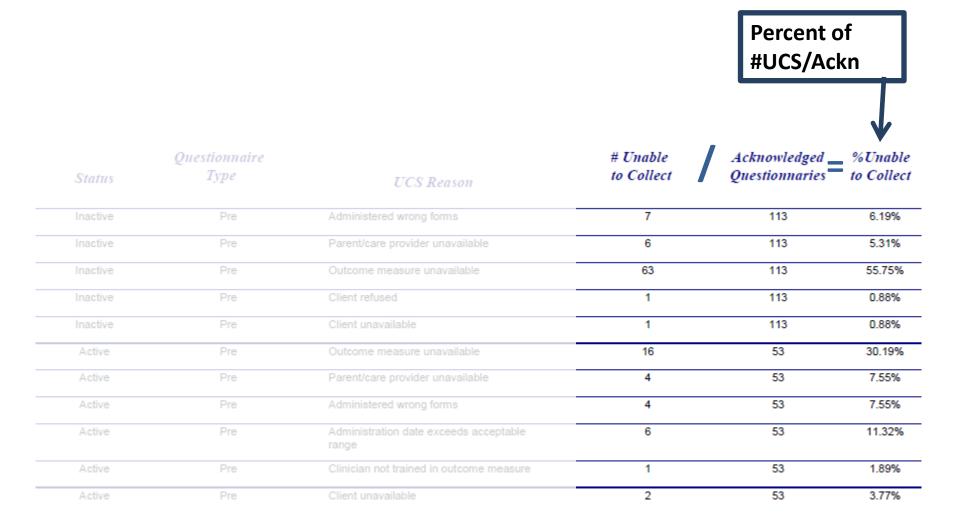
Questionnaire Type can be Pre, Post or Update

	Questionnaire		# Unable	Acknowledged	%Unable
Status	Type	UCS Reason	to Collect	Questionnaries	to Collect
Inactive	Pre	Administered wrong forms	7	113	6.19%
Inactive	Pre	Parent/care provider unavailable	6	113	5.31%
Inactive	Pre	Outcome measure unavailable	63	113	55.75%
Inactive	Pre	Client refused	1	113	0.88%
Inactive	Pre	Client unavailable	1	113	0.88%
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Active	Pre	Administered wrong forms	4	53	7.55%
Active	Pre	Administration date exceeds acceptable range	6	53	11.32%
Active	Pre	Clinician not trained in outcome measure	1	53	1.89%
Active	Pre	Client unavailable	2	53	3.77%



Acknowledged = scored tests + UCS

Status	Questionnaire Type	UCS Reason	# Unable to Collect	Acknowledged Questionnaries	%Unable to Collect
Inactive	Pre	Administered wrong forms	7	113	6.19%
Inactive	Pre	Parent/care provider unavailable	6	113	5.31%
Inactive	Pre	Outcome measure unavailable	63	113	55.75%
Inactive	Pre	Client refused	1	113	0.88%
Inactive	Pre	Client unavailable	1	113	0.88%
Active	Pre	Outcome measure unavailable	16	53	30.19%
Active	Pre	Parent/care provider unavailable	4	53	7.55%
Active	Pre	Administered wrong forms	4	53	7.55%
Active	Pre	Administration date exceeds acceptable range	6	53	11.32%
Active	Pre	Clinician not trained in outcome measure	1	53	1.89%
Active	Pre	Client unavailable	2	53	3.77%



"Outcome measure unavailable" accounts for 56% of ACKN entries for Inactive Pres

Status	Questionnaire Type	UCS Reason	# Unable to Collect	Acknowledged Questionnaries	%Unable to Collect
Inactive	Pre	Administered wrong forms	7	113	6.19%
Inactive	Pre	Parent are provider unavailable	6	113	5>240%
Inactive	Pre	Outcome measure unavailable	63	113	55.75%
Inactive	Pre	Client refused	1	113	0.88%
Inactive	Pre	Client unavailable	1	113	0.88%
Active	Pre	Outcome measure unavailable	16	53	30.19%
Active	Pre	Parent/care provider unavailable	4	53	7.55%
Active	Pre	Administered wrong forms	4	53	7.55%
Active	Pre	Administration date exceeds acceptable range	6	53	11.32%
Active	Pre	Clinician not trained in outcome measure	1	53	1.89%
Active	Pre	Client unavailable	2	53	3.77%

Let's pause and take some

Questions?

Presentation resumes in



Thank You!

For Questions or Additional Information:

PEI Outcomes e-mail address PEIOutcomes@dmh.lacounty.gov

Outcomes Project Website http://dmhoma.pbworks.com

(General Learning Network information, worksheets, Quick Guides, trainings, FAQs and more)