

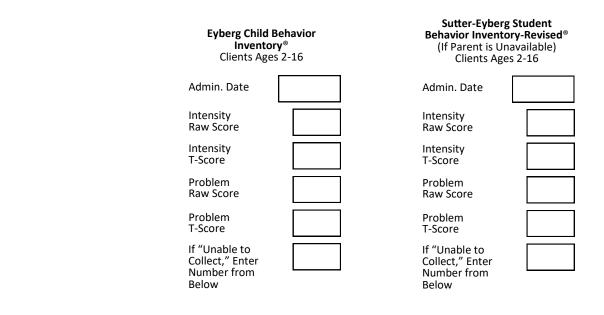
LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH Quality, Outcomes, & Training Division



OPTIONAL PEI OUTCOMES WORKSHEET

Disruptive Behavior Disorders: Aggression Replacement Training-Skillstreaming (ART)

ADMINISTRATIVE INFORMATION		
Client ID		
Client Last Name	Client First Nar	ne
Provider ID	Therapist ID/NI	א ד
END OF TREATMENT INFORMATION		
Date of Last (EBP Treatment) Session Total Number of EBP Treatment Sessions		
Completed EBP? Yes No If YES, Client's Treatment Success? Significant Partial		
If Client COMPLETED EBP, Please Check One for Disposition		
🗆 Began New EBP	□ Linked to MHS at Another Agency	Case Closed
□ Continued in Concurrent EBP	🗆 Began Non-PEI MHS	Linked to Non-MHS in Community
If Client DID NOT COMPLETE EBP, Please Check One for Disposition		
□ New EBP with Different Focus	Deceased	Foster Care/Residential Placement
New EBP with Same Focus	Psychiatric Hospitalization	Continued in Concurrent EBP
□ Arrested	□ Moved	Linked to Non-MHS in Community
Detained by DCFS	Unable to Contact	□ Linked to MHS at Another Agency
Medical Hospitalization	□ Withdrew	Began Non-PEI MHS
END OF TREATMENT QUESTIONNAIRES		



Reasons for "Unable to Collect"

- 1. Administered Wrong Form
- 2. Administration Date Exceeds Acceptable Range
- 3. Clinician not Trained in Outcome Measure
- 4. Invalid Outcome Measure





- 5. Lost Contact with Parent/Caregiver
- 6. Not Available in Primary Language
- 7. Not Required (SESBI Only)
- 8. Outcome Measure Unavailable
- 9. Parent/Caregiver Refused
- 10. Parent/Caregiver Unavailable
- 11. Premature Termination
- 12. Teacher Refused (SESBI Only)
- 13. Teacher Unavailable (SESBI Only)
- 14. Therapist did not Administer Tool