

OPTIONAL PEI OUTCOMES WORKSHEET

Parenting and Family Difficulties: Families OverComing Under Stress (FOCUS)

ADMINISTRATIVE INFORMATION

Client ID	<input type="text"/>	Client First Name	<input type="text"/>
Client Last Name	<input type="text"/>	Therapist ID/NPI #	<input type="text"/>
Provider ID	<input type="text"/>		

BEGINNING OF TREATMENT INFORMATION

Date of First EBP Treatment Session

BEGINNING OF TREATMENT QUESTIONNAIRES

**McMaster Family
Assessment Device**
Clients Ages 12+

Admin. Date	<input type="text"/>
Problem Solving	<input type="text"/>
Communication	<input type="text"/>
Roles	<input type="text"/>
Affective Responsiveness	<input type="text"/>
Affective Involvement	<input type="text"/>
Behavioral Control	<input type="text"/>
General Functioning	<input type="text"/>
If "Unable to Collect," Enter Number from Below	<input type="text"/>

Reasons for "Unable to Collect"

- | | | |
|---|---|---------------------------------------|
| 1. Administered Wrong Form | 4. Client Unavailable | 8. Not Available in Primary Language |
| 2. Administration Date Exceeds Acceptable Range | 5. Clinician not Trained in Outcome Measure | 9. Outcome Measure Unavailable |
| 3. Client Refused | 6. Invalid Outcome Measure | 10. Premature Termination |
| | 7. Lost Contact with Client | 11. Therapist did not Administer Tool |