

## **OPTIONAL PEI OUTCOMES WORKSHEET**

General Track: Managing and Adapting Practice (MAP)

ADMINISTRATIVE INFORMATION			
Client ID			
Client Last Name	(	Client First Name	
Provider ID	ī	herapist ID/NPI #	
BEGINNING OF TREATMENT INFORMATION			
Date of First Session MAP (Track 0)			
First Focus of Treatment (Track 1) (eg., Depression, Anxiety, etc.)			
BEGINNING OF TREATMENT QUESTIONNAIRES			
Youth Outcome Questionnaire® (Parent) Clients Ages 4-17	Questionna (Self-Repo	ire® rt)	Outcome Questionnaire® Clients Ages 19+
Admin. Date	Admin. Date		Admin. Date
Intrapersonal Distress (ID)	Intrapersonal Distress (ID)		Symptom Distress (SD)
Somatic (S)	Somatic (S)		Interpersonal Relations (IR)
Interpersonal Relations (IR)	Interpersonal Relations (IR)		Social Role (SR)
Social Problems (SP)	Social Problems (SP)		TOTAL SCORE
Behavioral Dysfunction (BD)	Behavioral Dysfunction (BD)		If "Unable to Collect," Enter Number from
Critical Items (CI)	Critical Items (CI)		Below
TOTAL SCORE	TOTAL SCORE		
If "Unable to Collect," Enter Number from Below	If "Unable to Collect," Enter Number from Below		

## Reasons for "Unable to Collect"

- 1. Administered Wrong Form
- 2. Administration Date Exceeds Acceptable Range
- 3. Client Refused
- 1. Client Unavailable
- 5. Clinician not Trained in Outcome Measure
- 6. Invalid Outcome Measure
- 7. Lost Contact with Client
- 8. Lost Contact with Parent/Caregiver
- 9. Not Available in Primary Language
- 10. Outcome Measure Unavailable
- 11. Parent/Caregiver Refused
- 12. Parent/Caregiver Unavailable
- 13. Premature Termination
- 14. Therapist did not Administer Tool
- 15. Never Collected (CiMH) (Only for Treatment Cycles Starting Before 2/1/14)



