OPTIONAL PEI OUTCOMES WORKSHEET

General Focus: Managing and Adapting Practice (MAP)

ADMINISTRATIVE INFORMATION

Client ID					
Client Last Name		Client Firs	t Name		
Provider ID		Therapist	ID/NPI #		
UPDATE TREATMENT QUESTIONNAIRES					
Youth Outcom Questionnaire (Parent) Clients Ages 4-1	8	Youth Outcome Questionnaire® (Self-Report) Clients Ages 12-18		Outcome Questionnaire® Clients Ages 19+	
Admin. Date	Admin.	Date	Admin. Date		
Intrapersonal Distress (ID)	Intrape Distres:	rsonal s (ID)	Symptom Distress (SD)		
Somatic (S)	Somati	c (S)	Interpersonal Relations (IR)		
Interpersonal Relations (IR)	Interpe Relatio	rsonal ns (IR)	Social Role (SR)		
Social Problems (SP)	Social F (SP)	Problems	TOTAL SCORE		
Behavioral Dysfunction (BD)	Behavio Dysfun	oral ction (BD)	If "Unable to Collect," Enter Number from Below		
Critical Items (CI)	Critical (CI)	Items	Below		
TOTAL SCORE	IATOT	SCORE			

Reasons for "Unable to Collect"

1. Administered Wrong Form

If "Unable to

Collect," Enter

Number from

Below

- 2. Client Refused
- 3. Client Unavailable
- 4. Clinician not Trained in Outcome Measure
- 5. Invalid Outcome Measure

If "Unable to

Collect," Enter

Number from

Below

- 6. Lost Contact with Client
- 7. Lost Contact with Parent/Caregiver
- 8. Not Available in Primary Language
- 9. Outcome Measure Unavailable
- 10. Parent/Caregiver Refused
- 11. Parent/Caregiver Unavailable
- 12. Premature Termination
- 13. Therapist did not Administer Tool
- 14. Never Collected (CiMH) (Only for Treatment Cycles Starting Before 2/1/14)



