

Name of Community Partner (CP)	MHPS Discharges for mm/yyyy
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Only include MHLA patients that completed a MHPS screening (H0002) and at least one MHPS session (H2014) in this report.

Site Name of CP (For clinics with more than one site)

Patient Last Name	Patient First Name	MHLA PID #	Initial PHQ-9 Score	Last PHQ-9 Score (If none leave blank)	Initial GAD-7 Score	Last GAD-7 Score (If none leave blank)	Complete (C) or Incomplete (I) MHPS Cycle	No. of MHPS sessions (Including the MHPS Screening)
Doe	John	0001	2	1			C	3
Doe	Jane	0002	5	0	2	0	C	4
Eastwood	Clint	0003	3				I	2
Ross	Diana	0004	4	2	2	1	C	3
White	Betty	0005	0	1	0	1	I	5

Site Name of CP (For clinics with more than one site)

Patient Last Name	Patient First Name	MHLA PID #	Initial PHQ-9 Score	Last PHQ-9 Score (If none leave blank)	Initial GAD-7 Score	Last GAD-7 Score (If none leave blank)	Complete (C) or Incomplete (I) MHPS Cycle	No. of MHPS sessions (Including the MHPS Screening)
Washington	George	0007	2		2		I	2
Balboa	Rocky	0008	5	2	1	0	C	6
Bond	James	0009	0	0	0	0	C	2
Gaye	Marvin	00010	6	4	4	3	I	3