



UNDERSTANDING YOUR QSRs

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- PSC-Caregiver
- PSC-Youth
- CANS
- CANS-EC



- **Discharge Measure** = Discharge measure or follow-up measure completed within 60 days prior to a client's discharge date
- Outcomes are examined for clients open at least 60 days (CCBH intake to discharge dates are 60+ days) and are entered into CYF mHOMS
- All QSRs examine outcomes for clients who have a discharge entered into CYF mHOMS in the specified quarter
- If any CANS items or four or more PSC items are missing, those client assessments won't be used in QSR outcome calculations



- ▶ Published literature, statistical analysis, and developer guidelines were used to establish tracking outcomes
 - ▶ Compliance for both measures
 - ▶ Tracking outcomes to establish objectives for next FY
 - ▶ **PSC**
 - ▶ Amount of improvement
 - ▶ Reliable improvement
 - ▶ Clinically significant improvement
 - ▶ **CANS**
 - ▶ Progress on actionable needs

SYSTEM OF CARE EVALUATION
Discharged Clients - Initial to Discharge Assessment Youth PSC Summary
(Administered to youth ages 11 to 18 only)

CCBH Discharge Date between 7/1/2018 and 3/22/2019

9999 - CASRC Test Site

Total CYF mHOMS Discharges N¹ = 52

← All clients w/ a CCBH discharge date entered into CYF mHOMS

Subunits Specified: 9999

Quarterly Status Report Objectives

Program YTD Results

% X of Y

Completion Rate for all clients

1. At Discharge, 75% of clients ages 11-18 whose episode lasted 60 days or longer have Youth PSC data available for both Initial and Discharge assessments² demonstrating **completion rate**.

60.5 % 23 of 38

← **Completion Y:** Clients w/ a CCBH discharge date and open 60 days +

Improvement for all clients

2. Programs shall identify the number of discharged clients ages 11-18 whose episode lasted 60 days or longer, who had the following levels of **treatment improvement**, defined as reductions from initial to discharge on the Youth PSC total scale score.

2a. Percent of clients who reported *no* improvement (0 or 1-point reduction).

4.3 % 1 of 23

2b. Percent of clients who reported a *small* improvement (2-4 point reduction).

17.4 % 4 of 23

2c. Percent of clients who reported a *medium* improvement (5-8 point reduction).

13.0 % 3 of 23

2d. Percent of clients who reported a *large* improvement (9+ point reduction).

39.1 % 9 of 23

2e. Percent of clients who reported an **increase in impairment** (1+ point increase).

26.1 % 6 of 23

← **Improvement Y:** Clients w/ a CCBH discharge date, open 60 days +, and have initial & discharge data

Reliable Improvement for all clients

3. Programs shall identify the number of discharged clients ages 11-18 whose episode lasted 60 days or longer who had at least a 6-point reduction on the Youth PSC total scale score, **demonstrating reliable improvement**.

47.8 % 11 of 23



Impairment Reflected at Intake

4. Number of discharged clients at or above the clinical cutoff score (**indicating impairment at intake**) on any of the three Youth PSC subscales or total scale score at initial assessment.³ 42.0 % 21 of 50

Completion Rate for clients impaired at intake

5. Number of discharged clients ages 11-18 whose episode lasted 60 days or longer, who scored above the clinical cutoff on any Youth PSC subscale or total scale score at initial assessment AND had discharge data available, **demonstrating completion rate.** 88.2 % 15 of 17

Clinically Significant Improvement for clients impaired at intake

5a. Number of discharged clients who scored below the clinical cutoff on at least one scale (which was elevated on their initial assessment) at discharge and who had at least a 6-point reduction on the Youth PSC total scale score demonstrating **clinically significant** improvement. 40.0 % 6 of 15

← **Impairment Y =**
Clients w/ a CCBH
discharge date and
initial score

← **Improvement Y**
Clients w/ a CCBH
discharge date,
open 60 days +,
with initial &
discharge data
whose initial scores
were above the
clinical cutoff

1. Clients with a CCBH discharge date in CYF mHOMS.

2. Discharge PSC score = discharge PSC or follow-up PSC score (if the measure was completed within 60 days prior to the client discharge date).

3. Clients ages 11-18 who started at or above the clinical cutoff with a total score of 30 or higher, attention subscale score of 7 or higher, internalizing subscale score of 5 or higher, or externalizing subscale score of 7 or higher.

Selection Criteria: Clients with CCBH Discharge Date between 7/1/2018 and 3/22/2019.

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Discharged Clients - Initial to Discharge Assessment Youth PSC Summary

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SYSTEM OF CARE EVALUATION

Discharged Clients - Initial to Discharge Assessment CANS Summary

CCBH Discharge Date between 7/1/2018 and 3/22/2019

9999 - CASRC Test Site

Total CYF mHOMS Discharges N¹ = 1867

Subunits Specified: 9999

Program YTD Results

Quarterly Status Report Objectives

% X of Y

Impairment Reflected at intake

1. For discharged clients (ages 6-21), what number of actionable needs (2 or 3) did they have across the Child Behavioral and Emotional Needs, Risk Behaviors and Life Functioning domains at intake?

1a. Percent of clients who had no actionable needs on their initial assessment	9.6%	180	of	1867
1b. Percent of clients who had 1-5 actionable needs on their initial assessment	48.8%	912	of	1867
1c. Percent of clients who had 6+ actionable needs on their initial assessment	41.5%	775	of	1867

← All clients with a CCBH discharge date entered into CYF mHOMS

← **Impairment Reflected Y:** Clients w/ a CCBH discharge date and initial score

Completion Rate

2. At Discharge, 95% of clients ages 6-21 whose episode lasted 60 days or longer, have CANS data available for both initial and discharge assessments.²

92.9% 1044 of 1867

← **Completion Y:**
Clients w/ a CCBH discharge date and open 60 days +

3. Actionable Needs at Intake					4. Progress at Discharge				
Number of clients who entered services with an actionable need ('2' or '3') in the following areas:					Number of clients who moved from a '2' or '3' to a '0' or '1' in the following areas:				
	%	X	of	Y		%	X	of	Y
3a. Life Functioning	73.3%	765	of	1044	4a. Life Functioning	72.5%	555	of	765
3b. Risk Behaviors	66.9%	698	of	1044	4b. Risk Behaviors	67.2%	469	of	698
3c. Child Behavioral and Emotional Needs	78.8%	823	of	1044	4c. Child Behavioral and Emotional Needs	42.2%	347	of	823

← **4. Improvement Rate Y**
Clients w/ a CCBH discharge date, open 60 days +, had initial & discharge data who also had an 'actionable' need (score of 2/3) at intake on one of the listed domains

1. Clients with a CCBH discharge date in CYF mHOMS.

2. Discharge CANS completed at discharge or follow-up (if the measure was completed within 60 days prior to the client discharge date).

Selection Criteria: Clients with CCBH Discharge Date between 7/1/2018 and 3/22/2019.

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Discharged Clients - Initial to Discharge Assessment CANS Summary

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QSR OUTCOMES – YTD DISCHARGES



2. OUTCOMES DATA: Attach copies of YTD CYF mHOMS CANS and PSC QSR Reports (Total of 4 reports - CANS; CANS-EC; PSC Parent; PSC Youth)		
		Total
A	YTD Discharges - ADC Report	0
B	YTD Discharges - CYF mHOMS CANS-EC Report (Ages 0-5)	0
C	YTD Discharges - CYF mHOMS CANS Report (Ages 6-21)	
D	YTD Discharges - CYF mHOMS PSC Report (Ages 3-18)	
E	YTD Discharges - CYF mHOMS Youth PSC Report (Ages 11-18)	
Provide explanation if there is a discrepancy between discharges reported in CCBH Report and CYF mHOMS QSR Reports (For example: medication only, out-of-age range, still completing CAMS/CFARS or other reason).		
CANS Discrepancy Explanation (B + C does not equal A)		PSC Discrepancy Explanation (D does not equal A)

QSR OUTCOMES – CANS AND CANS-EC



Number	OUTCOME OBJECTIVES	YTD Results	
		%	X of Y
		Green = Meets Expectation Red = Provide Mitigation Plan	
1	CANS Completion Rate		
a)	At Discharge, 95% of clients ages 6-21 whose episode lasted 60 days or longer have CANS data available for both initial and discharge assessments.	0%	
b)	At Discharge, 95% of clients ages 0-5 whose episode lasted 60 days or longer have CANS-EC data available for both initial and discharge assessments.	0%	
c)	Please provide explanation below if completion rate is below 95% :		
2	IMPAIRMENT REFLECTED AT INTAKE (Item 1a in CYF mHOMS CANS Report)		
a)	Percent of clients who had no actionable needs on their initial assessment (CANS; ages 6-21)	0%	
b)	Percent of clients who had no actionable needs on their initial assessment (CANS-EC; ages 0-5)	0%	
c)	How does program address clients reporting no actionable needs on the Life Functioning, Risk Behaviors and Behavioral Emotional Needs domains at the initial assessment? Please provide explanation below.		

QSR OUTCOMES – PSC



3	PSC Completion Rate (Parent and Youth)			
a)	At Discharge, 75% of clients ages 3-18 whose episode lasted 60 days or longer have Parent PSC data available for both Initial and Discharge assessments demonstrating completion rate.	0%		
b)	At Discharge, 75% of clients ages 11-18 whose episode lasted 60 days or longer have Youth PSC data available for both Initial and Discharge assessments demonstrating completion rate.	0%		
c)	Please provide explanation below if completion rate is below 75% :			
4	IMPAIRMENT REFLECTED AT INTAKE (Item 4 in the CYF mHOMS PSC report)			
a)	Number of discharged clients at or above the clinical cutoff score (indicating impairment at intake) on any of the three Parent PSC subscales or total scale score at initial assessment.	0%		
b)	Number of discharged clients at or above the clinical cutoff score (indicating impairment at intake) on any of the three Youth PSC subscales or total scale score at initial assessment.	0%		
c)	How does program address clients who did not meet the clinical threshold on any of the three subscales or total scale scores at intake? (For example, do subsequent measures for those same clients reflect impairment?) Please provide explanation below.			

HOW TO ACCESS REPORTS TO COMPLETE YOUR QSRs



- Staff who have been trained on CYF mHOMS (data entry staff or program managers):
 1. Log into CYF mHOMS
 2. Click on Reports – Go to **County QSR Reports**
 3. Click on the specific '**Discharged Client Report**' you need (e.g., PSC or CANS)
 4. Enter the **Unit** and **Subunit** for your program, as well as the dates for the specific quarter you are reporting on
 5. Click **Run Report**
 6. Click **Print**

CYF mHOMS training (under Training Forms header), can be accessed here:
<https://medschool.ucsd.edu/som/psychiatry/research/CASRC/resources/SOCE/Pages/CYFmHOM S-DES.aspx>

QUESTIONS?



- ▶ Please contact Antonia Nuñez for questions about understanding your CYF mHOMS QSR report data:
Antonia@ucsd.edu
- ▶ Please contact your COR for other QSR-related questions