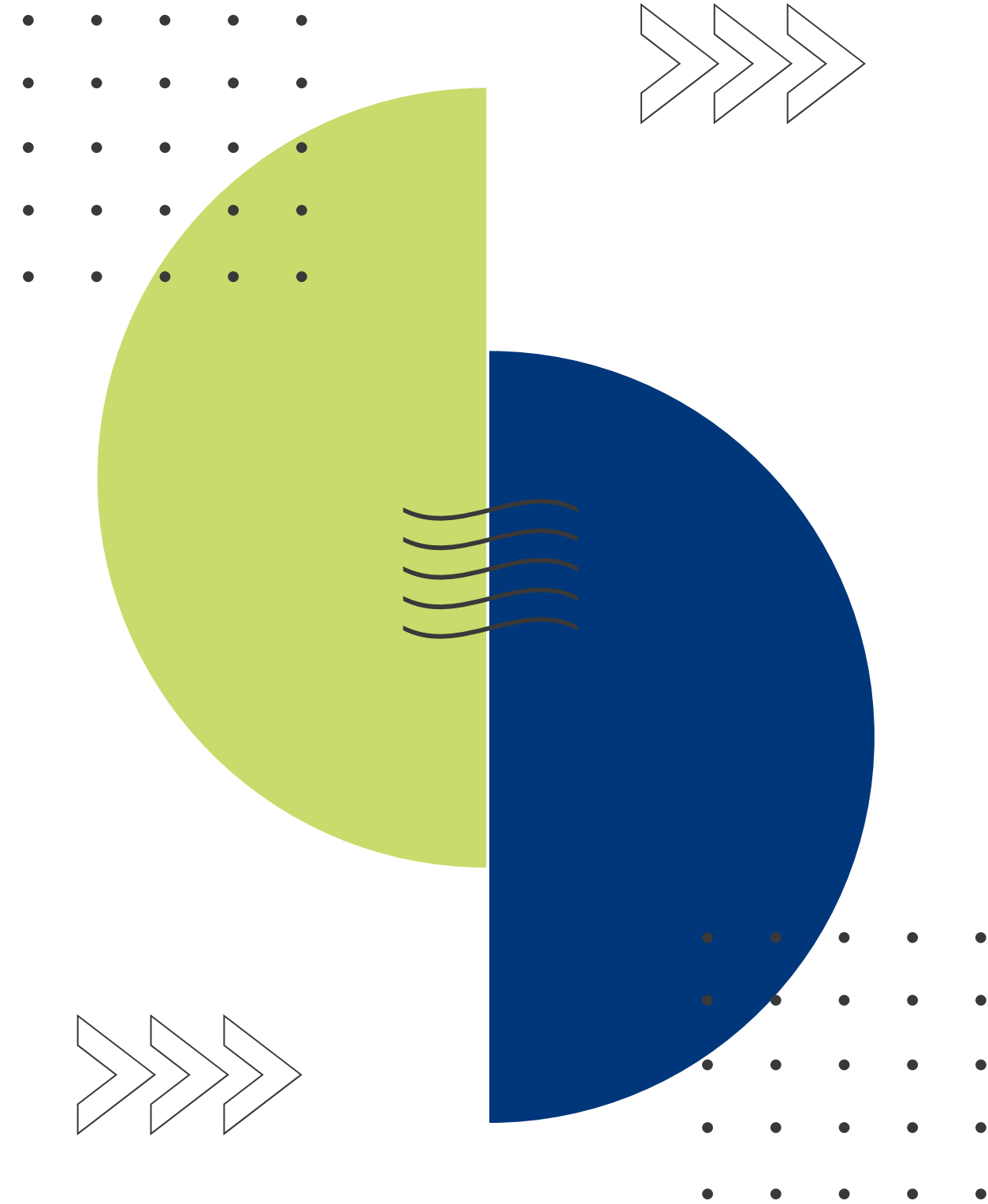
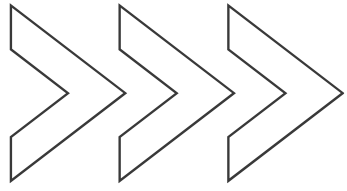


New Clinical QSR Goals FY 2022-23

Emily Trask, Ph.D.
May 12th, 2022





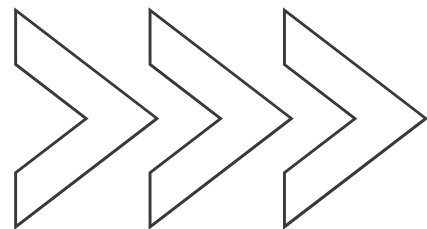
Purpose

To establish clinical outcome standards, using the Pediatric Symptom Checklist (PSC), for San Diego County CYFBHS Programs



Background

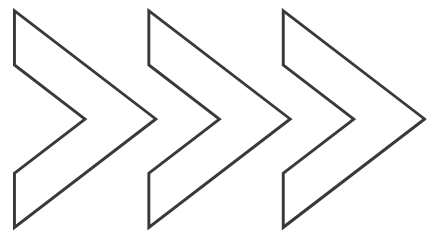
History of the Pediatric Symptom Checklist



Implementation of the PSC occurred in FY 2018-19, as directed by the California Department of Health Care Services. The PSC has two versions: (1) the PSC: Caregiver report for youth ages 3-8, and (2) the PSC-Y: Self-report for youth ages 11-18.

For the past three and a half years this tool has been used to measure the mental health symptoms of youth clients receiving County Behavioral Health services.

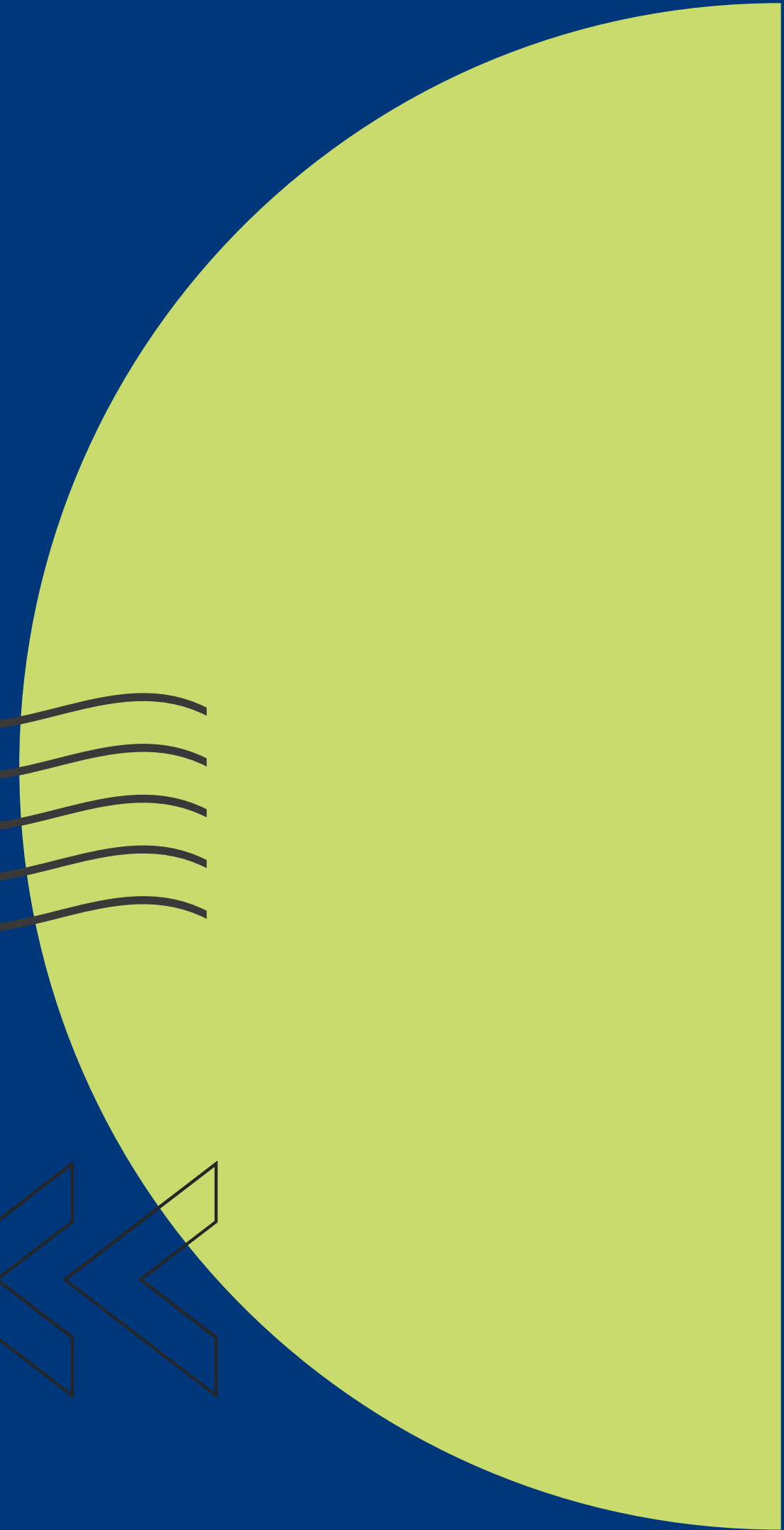
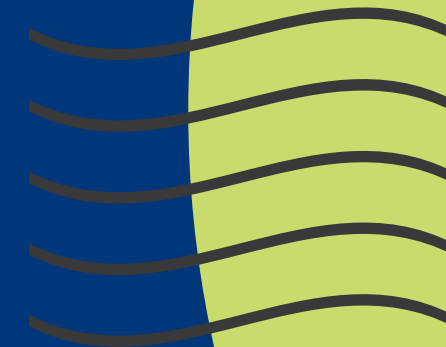
Current QSR Objectives



In FY 2019-20, PSC completion rate objectives were established for the PSC and PSC-Y:

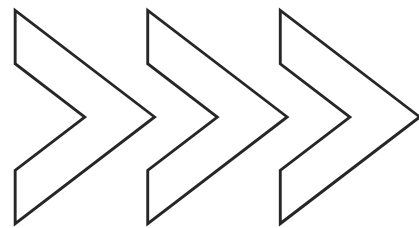
- 75% of discharged clients have two timepoints of data entry on the PSC and PSC-Y

Adding Clinical QSR Standards





New QSR Standards

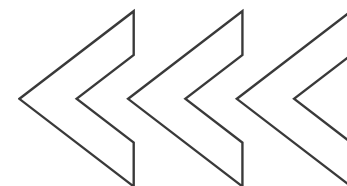
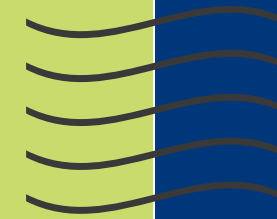
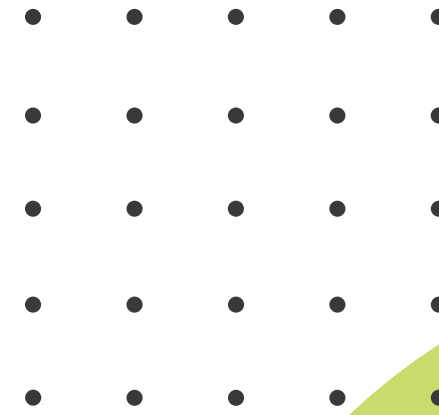


Starting in FY 2022 -23, programs will begin reporting on their QSR two PSC clinical outcomes, defined by the measure's developers, located on existing CYF mHOMS QSR reports:

- 1. Reliable Improvement**
- 2. Clinically Significant Improvement**

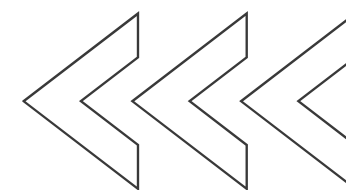
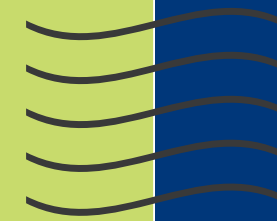
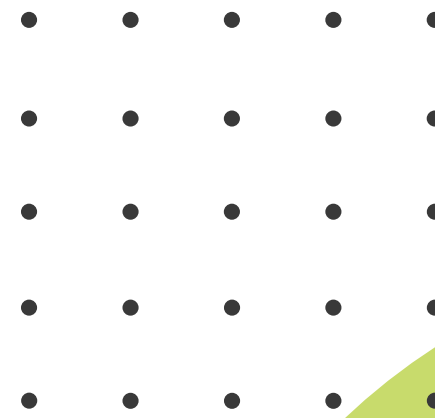
Reliable Improvement

Reliable improvement means that the client improved by a *statistically* reliable amount and it wasn't due to chance.

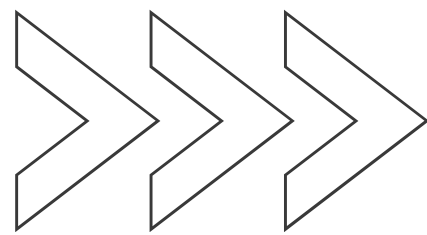


Clinically Significant Improvement

Clinically significant improvement means that the treatment had a noticeable, genuine effect on a clients' daily life. Those clients are now functioning like nonimpaired youth.



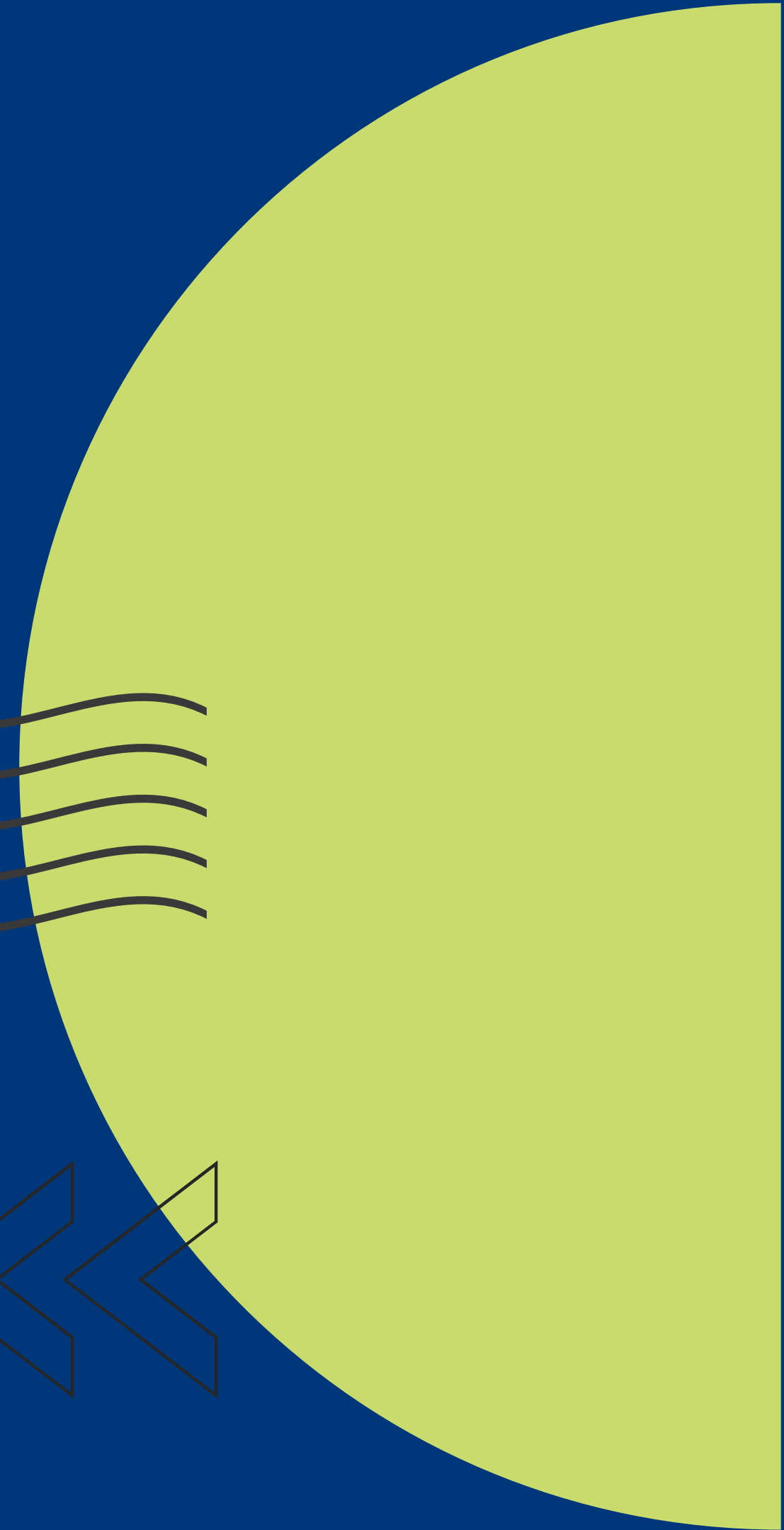
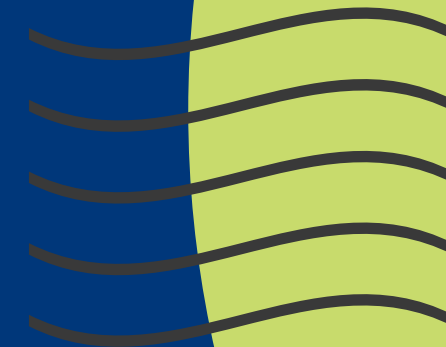
What This Means for Programs



The county QSR standards for the percentage of clients that are expected to see improvement will be lower than in previous years. Achieving reliable and/or clinically significant improvement is not easy, though it is meaningful.

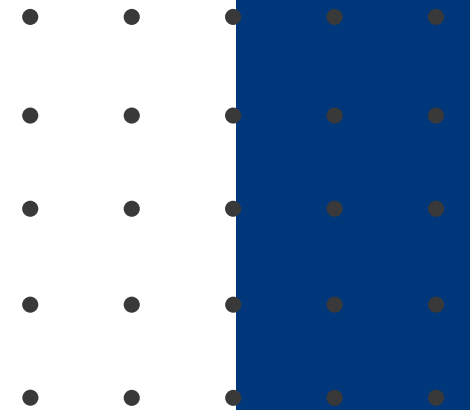
Reliable and clinically significant improvement are specific *levels* of improvement. Clients may still improve as a result of receiving services, but not reach these levels.

What Are The New Standards?





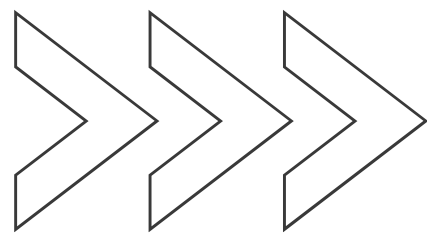
Reliable Improvement Standard



50% reliable client improvement

For example, if a program discharged 100 clients in quarter one, then the goal would be for at least 50 clients or clients' caregivers to report reliable improvement on the PSC-Y or PSC, respectively.

Arriving at the QSR Clinical Standards for Reliable Improvement

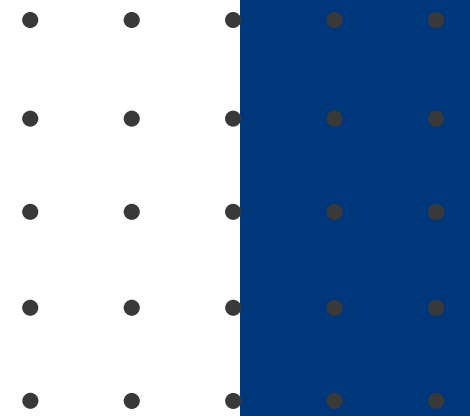


- In FY 2020-21, with three full fiscal years of PSC data available, client outcomes were analyzed.
- The majority of CYF programs met a 50% standard on the Youth *and* Caregiver PSC in FY 2020-21.
 - Specifically, 55-57% of programs had at least half of their discharging clients reporting reliable improvement in mental health symptoms





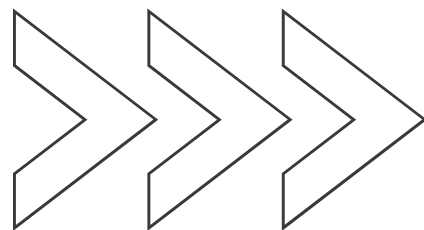
Clinically Significant Improvement Standard



50% clinically significant improvement

For example, if a program discharged 100 clients in quarter one, then the goal would be for at least 50 clients or clients' caregivers to report clinically significant improvement on the PSC-Y or PSC, respectively.

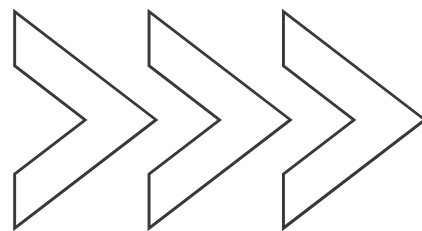
Arriving at the QSR Clinical Standards for Clinically Significant Improvement



- In FY 2020-21, with three full fiscal years of PSC data available, client outcomes were analyzed
- The majority of CYF programs met a 50% standard on the Youth *and* Caregiver PSC in FY 2020-21
 - Specifically, 66-71% of programs had at least half of their discharging clients reporting clinically significant improvement in mental health symptoms



Where to Find this Information



CYF County QSR reports:

- Intake to Discharge Parent PSC (PSC-P) Summary
- Intake to Discharge Youth PSC (PSC-Y) Summary

*Each program already prints these reports (usually quarterly) for other QSR items

- Insert percentages from items 3 and 5a into your QSR
- If your program is not at a percentage of 50% or greater on Reliable or Clinically Significant Improvement (items 3 and 5a), your COR is available to brainstorm solutions

SYSTEM OF CARE EVALUATION Discharged Clients - Initial to Discharge Assessment Parent PSC Summary (Administered to caregivers of youth ages 3 - 18 only) CCBH Discharge Date between 1/1/2022 and 3/31/2022				
6000 - CASA DE AMPARO		Total CYF mHOMS Discharges N ¹ = 9		
Subunits Specified: 6001, 6002, 6004, 6005		Program YTD Results		
Quarterly Status Report Objectives		%	X	of Y
Completion Rate for all clients				
1. 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 ² demonstrating completion rate .		<u>60.0 %</u>	3	of 5
Improvement for all clients				
2. Programs shall identify the number of discharged clients ages 3-18 whose episode lasted 60 days or longer, who had the following levels of treatment improvement , defined as reductions from initial to discharge on the Parent PSC total scale score.				
2a. Percent of caregivers who reported no improvement (0 or 1-point reduction).		<u>0.0 %</u>	0	of 3
2b. Percent of caregivers who reported a small improvement (2-4 point reduction).		<u>0.0 %</u>	0	of 3
2c. Percent of caregivers who reported a medium improvement (5-8 point reduction).		<u>0.0 %</u>	0	of 3
2d. Percent of caregivers who reported a large improvement (9+ point reduction).		<u>33.3 %</u>	1	of 3
2e. Percent of caregivers who reported an increase in impairment (1+ point increase).		<u>66.7 %</u>	2	of 3
● Reliable Improvement for all clients				
3. Programs shall identify the number of discharged clients ages 3-18 whose episode lasted 60 days or longer who had at least a 6-point reduction on the Parent PSC total scale score, demonstrating reliable improvement .		<u>33.3 %</u>	1	of 3
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 Parent PSC subscales or total scale score at initial assessment. ³		<u>66.7 %</u>	6	of 9
Completion Rate for clients impaired at intake				
5. Number of discharged clients ages 3-18 whose episode lasted 60 days or longer, who scored above the clinical cutoff on any Parent PSC subscale or total score at initial assessment AND had discharge data available, demonstrating completion rate .		<u>100.0 %</u>	2	of 2
● 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 Parent PSC total scale score demonstrating clinically significant improvement.		<u>50.0 %</u>	1	of 2

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 who started at or above the clinical cutoff with a total score of 28 or higher (ages 6-18) or a total score of 24 or higher (for clients ages 3-5), attention subscale score of 7 or higher, internalizing subscale score of 5 or higher, or externalizing subscale score of 7 or higher.

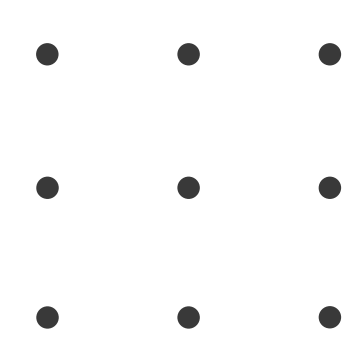
Selection Criteria: Clients with CCBH Discharge Date between 1/1/2022 and 3/31/2022.

For Internal Use Only

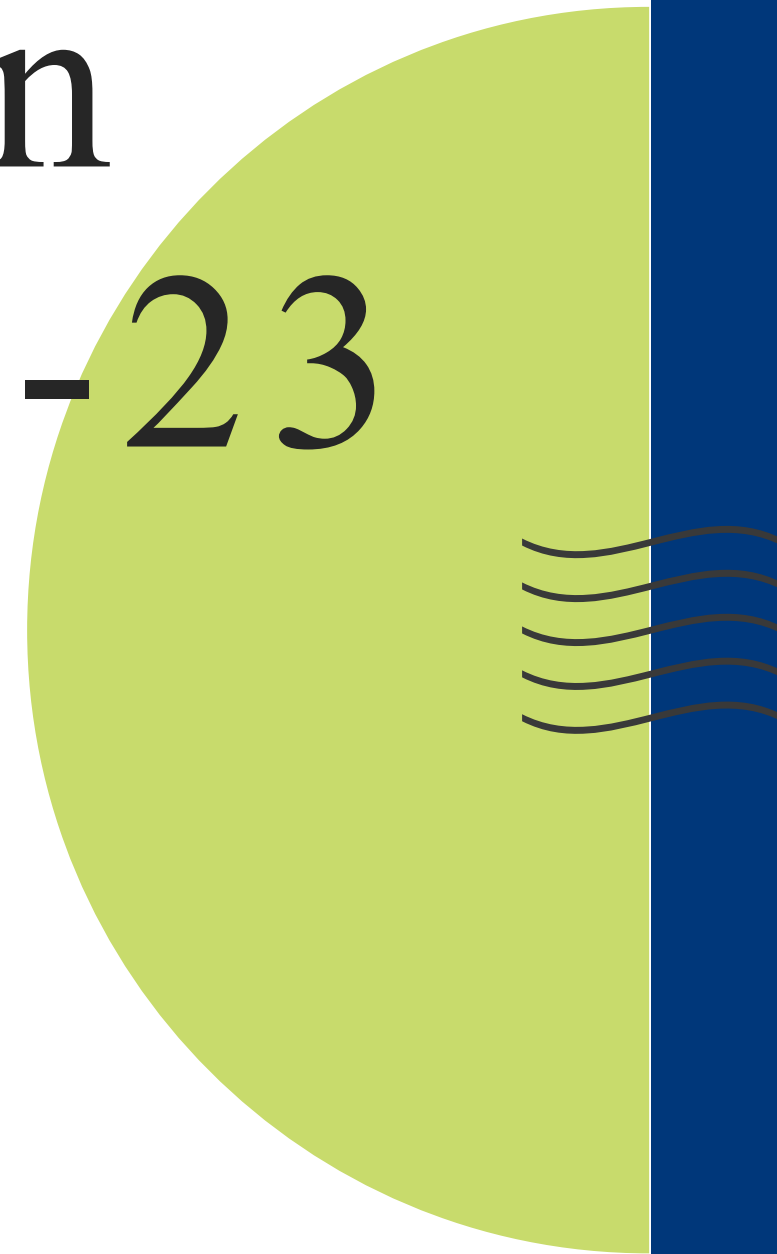
Discharged Clients - Initial to Discharge Assessment Parent PSC Summary

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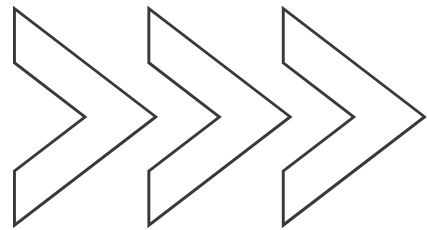
Begin Tracking on QSRs in FY 2022-23





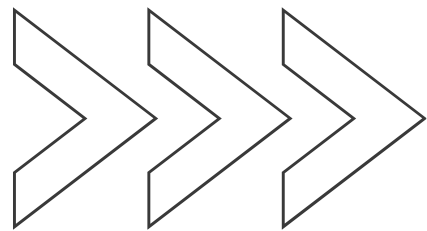
Additional Analysis Slides for County Usage

Year and Clients Per Program



- Data from FY 2019-20 did not differ notably from FY 2020-21, so only the most recent fiscal year data is presented for clarity.
- Compared to all programs, programs with 25+ clients who had intake and discharge data had **slightly** more clients (1-2%) achieving reliable improvement per caregiver and youth report.

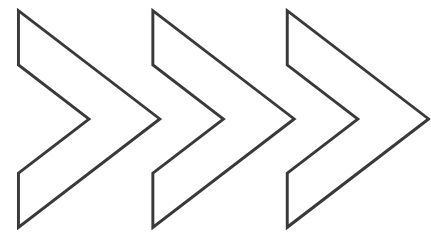
Differences by Level of Care



- Report of reliable and clinically significant improvement was lower among caregivers and youth from WRAP and STRTP+ programs, which may warrant lower threshold goals for these types of programs.



Amount of Change



- Amount of change on the PSC was not included in this analysis because it is unclear what percentage of clients are expected to experience ‘no’, ‘small’, ‘medium’, or ‘large’ improvement.