

**Office of Mental Health and Addiction Services
Children's Mental Health System Change Initiative**

**Outcomes
Policy Five
September 22, 2004**

It is the policy of the Office of Mental Health and Addiction Services (OMHAS) to monitor the Community Mental Health Programs (CMHPs), and the Mental Health Organizations (MHOs) performance regarding child, family and system outcomes and measures. Each CMHP, MHO and all subcontractors will track specific outcomes and performance measures and report them on a regular basis to OMHAS and Advisory Councils. Outcomes and performance measures will be gathered by OMHAS, CMHPs and MHOs, using available resources, according to this procedure:

1. Process Measures:
 - **Admission and** readmission to a more restrictive level of care
 - Average length of stay (PRTS, PDTS, OSH & SCIP)
 - Delivery of **non-traditional** community-based services, such as respite and family support.
 - Track use of **funds designated for children's services**
 - Service penetration by age group, **gender**, and ethnicity
 - Percent of mental health overlap with child welfare
 - Percent of mental health overlap with juvenile justice (**including arrests and re-arrests**)
 - Percent of children receiving evidence-based practices
2. Family Perception of Outcomes (**using Youth Services Survey-Family**)
 - Percent of children whose family is involved in treatment planning
 - Percent of children whose family feels services are appropriate
 - Percent of children whose family reports positive perceptions of functional outcomes
3. Level of Need Determination Outcomes (**using CASII**)
 - Scores from the level of need determination tool (CASII)
 - Average length of time between determination and service
 - Profile of services based on level of need determination scores
4. Integrated Service Array Outcomes
 - School: attendance, behavior/self management, & academic functioning

- Home Life/Family: home stability, parent/guardian involvement, home/family functioning, & family treatment progress
- Client Functioning: clinical tool scores (high, medium, & low)
- **Critical Incidents including:**
 - **Seclusion/restraint usage,**
 - **Runaway,**
 - **Outside intervention,**
 - **Suicide attempts or completions,**
 - **Assaults.**

Other Procedures:

1. MHOs (and subcontractors) **will use the Mental Health Statistics Improvement Program’s Youth Services Survey for Families.** This survey instrument shall be administered at least annually on a representative sample of families of children who receive mental health services. The Youth Services Survey for Families shall be administered at least every six months or at significant service transition points for all children who receive ISA services.
2. MHOs will **use OMHAS reviewed and approved** standardized instruments to collect clinical outcome data. A specific instrument will not be prescribed.
3. OMHAS will **immediately develop a Quality Data Implementation workgroup (as a sub-committee of the Children’s Mental Health Advisory Council) to develop detailed methodology and a timeline for implementation. Membership will be representative of OMHAS, CMHPs, MHOs, providers, and family members**