# Office of Mental Health and Addiction Services
# Required Outcome Measure Collection Points for
# Children's System of Care
June 30, 2004

## State Data Responsibility

Reduce the negative consequences of children's mental health disorders

Percent of children receiving community-based treatment who are involved in age-appropriate community activities

1. Percent of children who improve level of functioning

2. Average length of stay in facility-based care

3. Percent of children who are readmitted to facility-based care within 180 days of discharge from treatment

4. Percent of children meeting integrated service array criteria who receive community-based treatment services prior to admission to facility-based intensive treatment services

5. Percent of children and families who receive flexible home and community-based mental health services

6. Percent of children receiving intensive treatment services whose clinical needs match their level of care

Number of community-based services provided to Medicaid eligible children with serious mental health disorders and their families

Provision of timely, evidence-based, culturally appropriate, individualized, family-driven mental health services in the most appropriate natural environment to Medicaid-eligible children with serious emotional disorders and their families

## Mental Health Organization Data Responsibility

Data regarding "Level of Need" Assessment, including CALOCUS scores and other pertinent data

For children determined for Integrated Service Array (ISA) performance indicators will be collected by the MHO at the date of **entry** into service.

As children **leave** ISA, performance indicators will once again be collected by the MHO.

Intention is to create of a profile of children entering and leaving Integrated Service Array (ISA)

**Office of Mental Health and Addiction Services**
**Proposed Indicators to be collected by the Mental Health**
**Organizations for Children Entering Integrated Service Array (ISA)**
June 30, 2004

**A School**
  a) Attendance (previous month). The data collected for the child will be the **expected** attendance of the child. Expected will be defined by the child's Individual Education Plan (IEP) or Individual Plan of Care (IPC)
  b) Behavior/ Self-management
  c) Academic functioning

**B  Home Life/ Family**
  a) Home stability
  b) Parent/Guardian involvement
  c) Home/Family functioning *(Family functioning should be rated independently of the problems experienced by the child.)*
  d) Family Treatment Progress

**C  Community**
  a) Hospitalization
    • *State will track Hospitalization to profile programs and look at hospitalizations prior six month, during, and six months after discharge.*
  b) Juvenile Justice or Police involvement
    • *State will develop tracking methodology for before and after program participation. Will work with OYA and their JJIS database.*
  c) Child Welfare Program involvement
    • *State will develop tracking methodology for before and after program participation.*

**D  Client Functioning**
  a) CGAS, CAFAS, CALOCUS, CANS or CAPI scores
    • *Depending on tool used by program, state will work with providers to operationalize high, moderate, and poor.*
  b) Social behavior functioning
  c) Drug and Alcohol usage

**E  Level of Care**
  a) Length of Stay
    • *State will track & Programs will report*
  b) Seclusion/Restraint usage
  c) Number of children who AWOL or runaway.