PA CARE Partnership

Data Collection Training

Monica Payne

Evaluation Director, Youth and Family Training Institute

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DEVELOPING SYSTEMS THAT CARE

Meet the Evaluation Team

Monica Walker Payne – Evaluation Director

- Training and technical assistance
- Supervision
- Data presentations

Samantha Pulleo – Systems Analyst

- Project management, training, technical assistance and iDashboards creation

William McKenna – Database Manager

- Data management and quality assurance

Eileen Domin – Assistant Evaluation Coordinator

- Participant Payments
- Data entry

Ed McKenna – Family Member Interviewer

- Interviewer to collect data from enrolled youth and caregivers
- York, Carbon, Monroe, and Pike Counties

Michele Penner – Family Member Interviewer

- Interviewer to collect data from enrolled youth and caregivers
- Crawford County

Overview of System of Care

A network of effective, community-based services and supports for children and youth with or at-risk for mental health or other challenges and their families…

…is organized into **coordinated networks;**

…addresses **cultural and linguistic needs**

…builds meaningful **partnerships** with families and youth;

…in order to help families function better at home, in school, in the community, and throughout life.

Stroul, B., Blau, G., & Friedman, R. (2010). Updating the system of care concept and philosophy. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health.

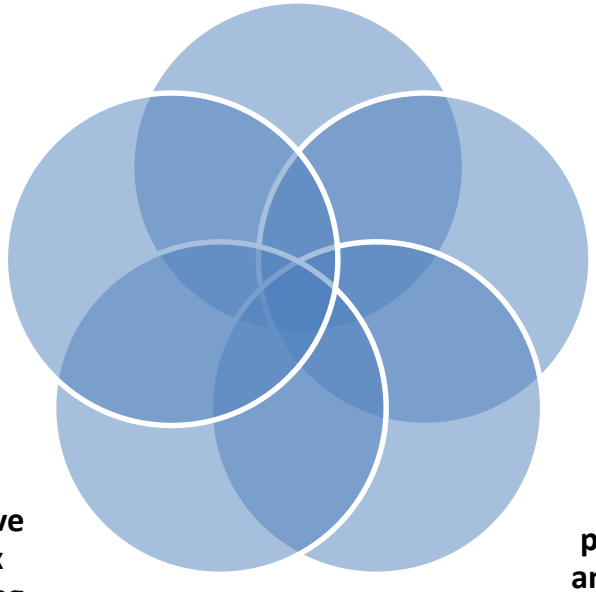
Three Levels of Data Collection

System Level Data	•**IPPS** – SAMHSA's Infrastructure Development, Prevention, and Mental Health Promotion – collected quarterly from counties by the Project Director at the State Level.
Individual Youth and Family Level Data (NOMS)	•**Baseline Descriptive and Demographic Form (BDD) -** Provides demographic and descriptive information to SAMHSA and for counties to use to assess their system integration and potential cultural or linguistic disparities. •**National Outcome Measures Interview (NOMS) -** Evaluates individual outcomes, satisfaction, and progress that youth and families experience because the county is implementing a System of Care.
National Evaluation	•Assesses how the System of Care grants across the country are being implemented. •There are 3 self-reports for caregivers and 2 self-reports for youth to fill out at the same time as the NOMS interviews.

Why Is This Evaluation Important?

Provides the nation with information about systems of care, how they develop, and how they are sustained across time

Information may be used locally and nationally to support requests for additional funding



Provides detailed information about the youth served, their families, and their experiences with systems of care

Provides a quantitative view of the complex work that is happening

Offers an objective picture of what works and what doesn't work locally and nationally

University of Pittsburgh

PA CARE Partnership contracted with the Evaluation Team at the Youth and Family Training Institute, which is part of the University of Pittsburgh.

We have approval from the University of Pittsburgh Institutional Review Board (IRB) to conduct the evaluation in collaboration with the PA CARE Partnership (IRB # PRO17100006).

We are approved to receive referrals from each county's chosen providers (High Fidelity Wraparound teams, Case Management, Mobile Psych Rehab, Family Based, FGDM with Family Peer Support, BHRS, and/or others) so that we can conduct interviews, enter the data into the local and national databases, and provide the data back to the county and providers for continuous quality improvement.

Eligibility for the Evaluation

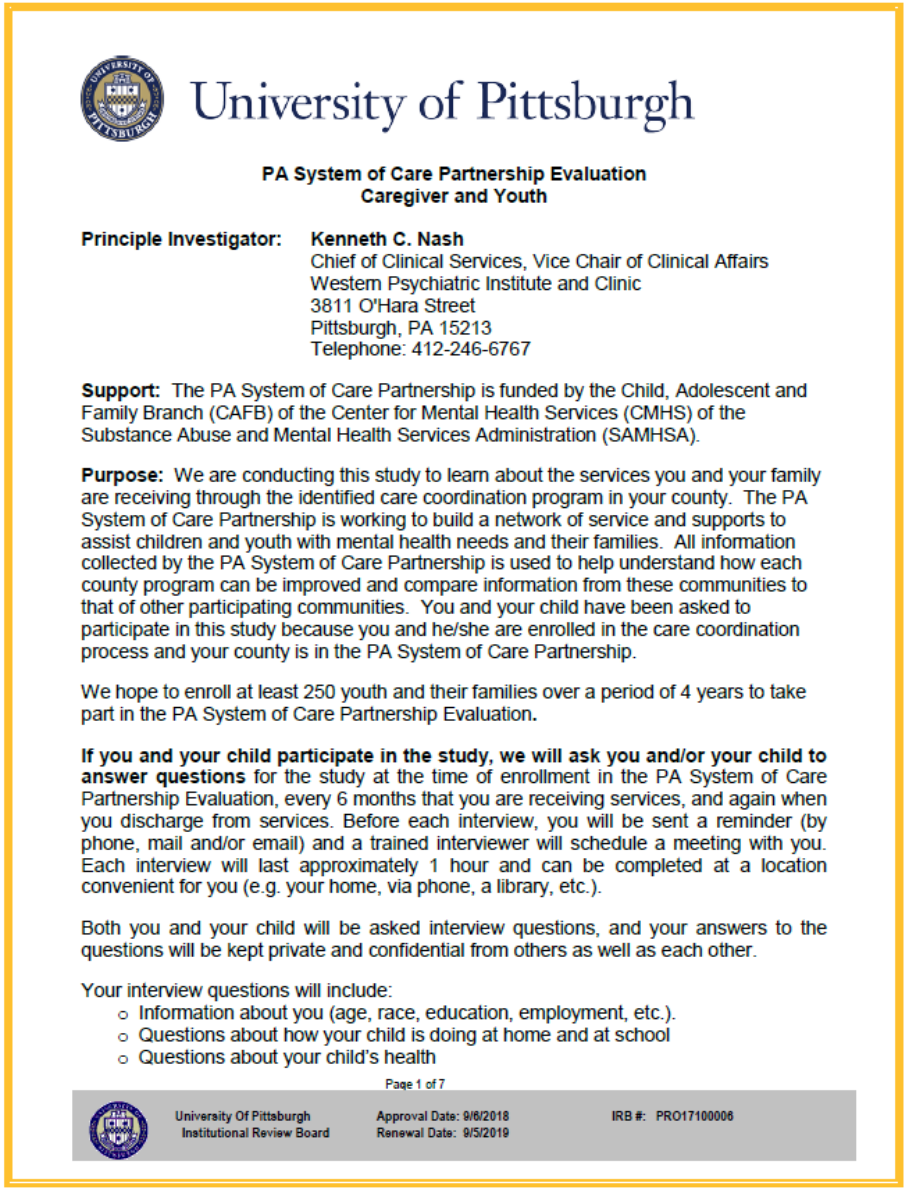
Youth can be enrolled between the ages of 5-21 but can only participate in the evaluation when they are 11 years old and older.

A caregiver is asked to participate if the youth is between 5-18 years old and is optional between 18-21 depending on the family situation.

Youth enrolled must have a mental health diagnosis but should also have other system involvement.

A biological parent or legal guardian with a copy of the court order must be able to provide consent for the youth to participate.

Consent Form



University of Pittsburgh

PA System of Care Partnership Evaluation
Caregiver and Youth

Principle Investigator: **Kenneth C. Nash**
Chief of Clinical Services, Vice Chair of Clinical Affairs
Western Psychiatric Institute and Clinic
3811 O'Hara Street
Pittsburgh, PA 15213
Telephone: 412-246-6767

Support: The PA System of Care Partnership is funded by the Child, Adolescent and Family Branch (CAFB) of the Center for Mental Health Services (CMHS) of the Substance Abuse and Mental Health Services Administration (SAMHSA).

Purpose: We are conducting this study to learn about the services you and your family are receiving through the identified care coordination program in your county. The PA System of Care Partnership is working to build a network of service and supports to assist children and youth with mental health needs and their families. All information collected by the PA System of Care Partnership is used to help understand how each county program can be improved and compare information from these communities to that of other participating communities. You and your child have been asked to participate in this study because you and he/she are enrolled in the care coordination process and your county is in the PA System of Care Partnership.

We hope to enroll at least 250 youth and their families over a period of 4 years to take part in the PA System of Care Partnership Evaluation.

If you and your child participate in the study, we will ask you and/or your child to answer questions for the study at the time of enrollment in the PA System of Care Partnership Evaluation, every 6 months that you are receiving services, and again when you discharge from services. Before each interview, you will be sent a reminder (by phone, mail and/or email) and a trained interviewer will schedule a meeting with you. Each interview will last approximately 1 hour and can be completed at a location convenient for you (e.g. your home, via phone, a library, etc.).

Both you and your child will be asked interview questions, and your answers to the questions will be kept private and confidential from others as well as each other.

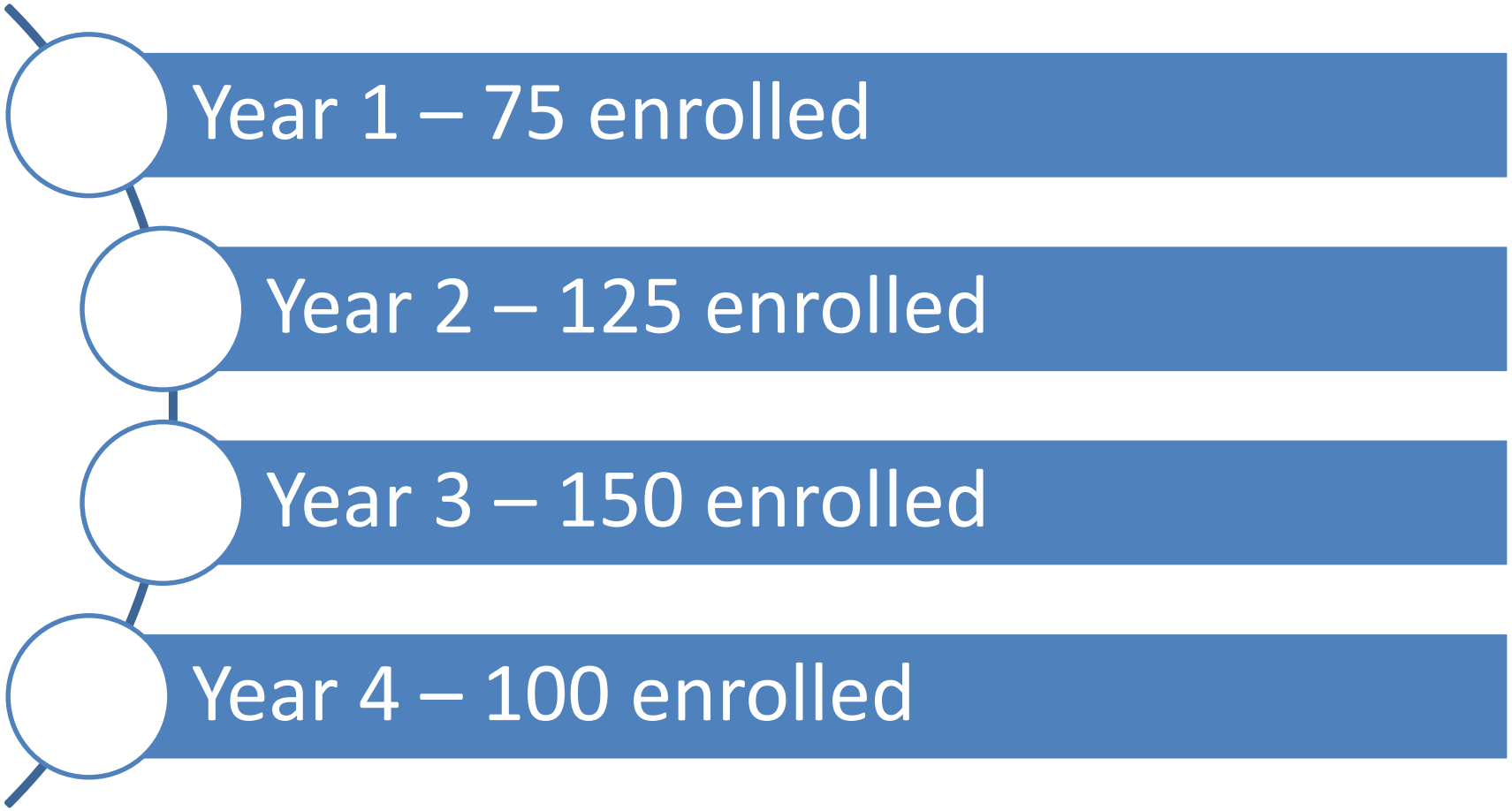
Your interview questions will include:
- Information about you (age, race, education, employment, etc.).
- Questions about how your child is doing at home and at school
- Questions about your child's health

Page 1 of 7

University Of Pittsburgh Institutional Review Board | Approval Date: 9/6/2018 Renewal Date: 9/5/2019 | IRB #: PRO17100006

The interviewer will go over the informed consent document with youth/families over the phone and provide them a written document to sign when they arrive for the interview that explains the study and gives them information about who to call for questions.

Evaluation Targets



Targets are split between the counties (25-30 per county each year).
All youth enrolled must be reassessed every 6 months until discharge from the program.

Data Collection Process

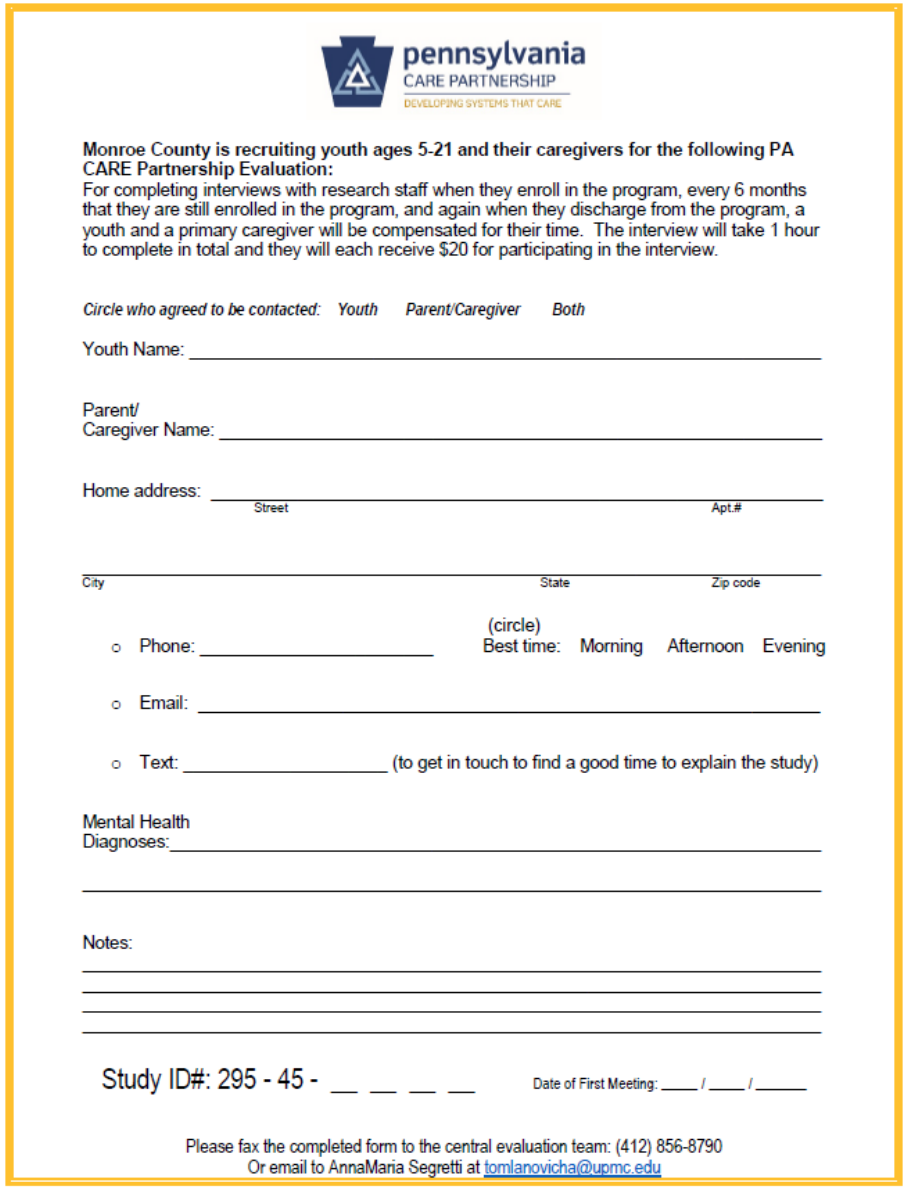
All youth and caregivers who agree to participate in the process/treatment will be asked to participate in the data collection process.

The provider staff members will ask them to complete a Permission to Contact Form that will be faxed to the Evaluation Team.

An interviewer will contact the family to schedule the interviews in their home or community location depending on the family preference.

Data collection with the youth and caregiver will take around one hour to complete in total.

Permission to Contact Form



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Monroe County is recruiting youth ages 5-21 and their caregivers for the following PA CARE Partnership Evaluation:
For completing interviews with research staff when they enroll in the program, every 6 months that they are still enrolled in the program, and again when they discharge from the program, a youth and a primary caregiver will be compensated for their time. The interview will take 1 hour to complete in total and they will each receive $20 for participating in the interview.

Circle who agreed to be contacted: Youth Parent/Caregiver Both

Youth Name: _____

Parent/
Caregiver Name: _____

Home address: _____
Street Apt.#

_____
City State Zip code

- Phone: _____ (circle) Best time: Morning Afternoon Evening
- Email: _____
- Text: _____ (to get in touch to find a good time to explain the study)

Mental Health
Diagnoses: _____

_____

Notes:
_____
_____
_____
_____

Study ID#: 295 - 45 - __ __ __ __ Date of First Meeting: ____ / ____ / _____

Please fax the completed form to the central evaluation team: (412) 856-8790
Or email to AnnaMaria Segretti at tomlanovicha@upmc.edu

National Child ID comes from:

- First 3 digits are 295 (Grant ID)
- Second 2 digits are County ID numbers
  - Carbon is 13
  - Monroe is 45
  - Pike is 52
- Last 4 digits are assigned by the provider
  - XXX Program is 0000-0999
  - XXX Program is 1000-1999
  - XXX Program is 2000-2999

295 - _ _ - _ _ _ _

Provider Cheat Sheet Guide - Monroe

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Eligibility for the PA CARE Partnership Study:

- Youth can be enrolled between the ages of 5-21 but can only participate in the interview when they are 11 years old and older.
- A caregiver is asked to participate if the youth is between 5-18 years old and is optional between 18-21 depending on the family situation.
- Youth enrolled must have a mental health diagnosis but should also have other system involvement.
- A biological parent or legal guardian with a copy of the court order must be able to provide consent for the youth to participate.

Introducing the PA CARE Partnership Study:

- Monroe County is inviting you to learn more a research study opportunity. By participating, you will have an opportunity to help us learn more about the services that you and other families like yours receive.
- Youth and caregivers/parents can earn money by being interviewed - $20 each per interview.
- If you agree to be contacted, I will write down your name, your child's name, your phone number and the best time to reach you, your e-mail address if you have one, and a number that we can send text messages to when setting up a time for you to speak with someone working in the study. That person will call you to explain the study more.
- If you give me permission to write down this information and share it with an interviewer, it does not commit you to anything – you can decide when he/she calls if you wish to participate.

How to create an ID number: 295 - 45 - _ _ _ _

- **First 3 digits are 295 (Grant ID)**
- **Second 2 digits are County ID numbers - Monroe is 45**
- **Last 4 digits are assigned chronologically by the provider**
  - Pathways BHRS Program is 0000-0999
  - YAP BHRS Program is 1000-1999
  - Devereux BHRS program is 2000-2999
  - Merakey FBMHS program is 3000-3999
  - Concern FBMHS program is 4000-4999
  - Scranton Counseling Center FBMHS Program is 5000-5999
  - Merakey CRR Program is 6000-6999
  - PA Mentor CRR Program is 7000-7999
  - BHA BHRS Program is 8000-8999
  - Warwick House FBMHS Program is 9000-9999

Fill out the Permission to Contact Form:

- Please fax the completed form to the Evaluation team: (412) 856-8790
- Or email to AnnaMaria Segretti at tomlanovicha@upmc.edu
- We will send a confirmation email to let you know that it was received.

Provider Cheat Sheet Guide - Pike

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Eligibility for the PA CARE Partnership Study:

- Youth can be enrolled between the ages of 5-21 but can only participate in the interview when they are 11 years old and older.
- A caregiver is asked to participate if the youth is between 5-18 years old and is optional between 18-21 depending on the family situation.
- Youth enrolled must have a mental health diagnosis but should also have other system involvement.
- A biological parent or legal guardian with a copy of the court order must be able to provide consent for the youth to participate.

Introducing the PA CARE Partnership Study:

- Pike County is inviting you to learn more a research study opportunity. By participating, you will have an opportunity to help us learn more about the services that you and other families like yours receive.
- Youth and caregivers/parents can earn money by being interviewed - $20 each per interview.
- If you agree to be contacted, I will write down your name, your child's name, your phone number and the best time to reach you, your e-mail address if you have one, and a number that we can send text messages to when setting up a time for you to speak with someone working in the study. That person will call you to explain the study more.
- If you give me permission to write down this information and share it with an interviewer, it does not commit you to anything – you can decide when he/she calls if you wish to participate.

How to create an ID number: 295 - 52 - _ _ _ _

- **First 3 digits are 295 (Grant ID)**
- **Second 2 digits are County ID numbers - Pike is 52**
- **Last 4 digits are assigned chronologically by the provider**
  - Pathways BHRS Program is 0000-0999
  - Devereux BHRS Program is 1000-1999
  - YAP BHRS program is 2000-2999
  - Merakey FBMHS program is 3000-3999
  - Scranton Counseling Center FBMHS Program is 4000-4999
  - Merakey CRR Program is 5000-5999
  - PA Mentor CRR Program is 6000-6999

Fill out the Permission to Contact Form:

- Please fax the completed form to the Evaluation team: (412) 856-8790
- Or email to AnnaMaria Segretti at tomlanovicha@upmc.edu
- We will send a confirmation email to let you know that it was received.

Provider Cheat Sheet Guide - Carbon

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Eligibility for the PA CARE Partnership Study:

- Youth can be enrolled between the ages of 5-21 but can only participate in the interview when they are 11 years old and older.
- A caregiver is asked to participate if the youth is between 5-18 years old and is optional between 18-21 depending on the family situation.
- Youth enrolled must have a mental health diagnosis but should also have other system involvement.
- A biological parent or legal guardian with a copy of the court order must be able to provide consent for the youth to participate.

Introducing the PA CARE Partnership Study:

- Carbon County is inviting you to learn more a research study opportunity. By participating, you will have an opportunity to help us learn more about the services that you and other families like yours receive.
- Youth and caregivers/parents can earn money by being interviewed - $20 each per interview.
- If you agree to be contacted, I will write down your name, your child's name, your phone number and the best time to reach you, your e-mail address if you have one, and a number that we can send text messages to when setting up a time for you to speak with someone working in the study. That person will call you to explain the study more.
- If you give me permission to write down this information and share it with an interviewer, it does not commit you to anything – you can decide when he/she calls if you wish to participate.

How to create an ID number: 295 - 13 - _ _ _ _

- **First 3 digits are 295 (Grant ID)**
- **Second 2 digits are County ID numbers - Carbon is 13**
- **Last 4 digits are assigned chronologically by the provider**
  - Pathways BHRS Program is 0000-0999
  - CLIU 21 BHRS Program is 1000-1999
  - BHA BHRS program is 2000-2999
  - Merakey FBMHS program is 3000-3999
  - Concern FBMHS program is 4000-4999
  - Merakey CRR Program is 5000-5999
  - PA Mentor CRR Program is 6000-6999
  - Scranton Counseling Center FBMHS Program is 7000-7999
  - Warwick House FBMHS Program is 8000-8999

Fill out the Permission to Contact Form:

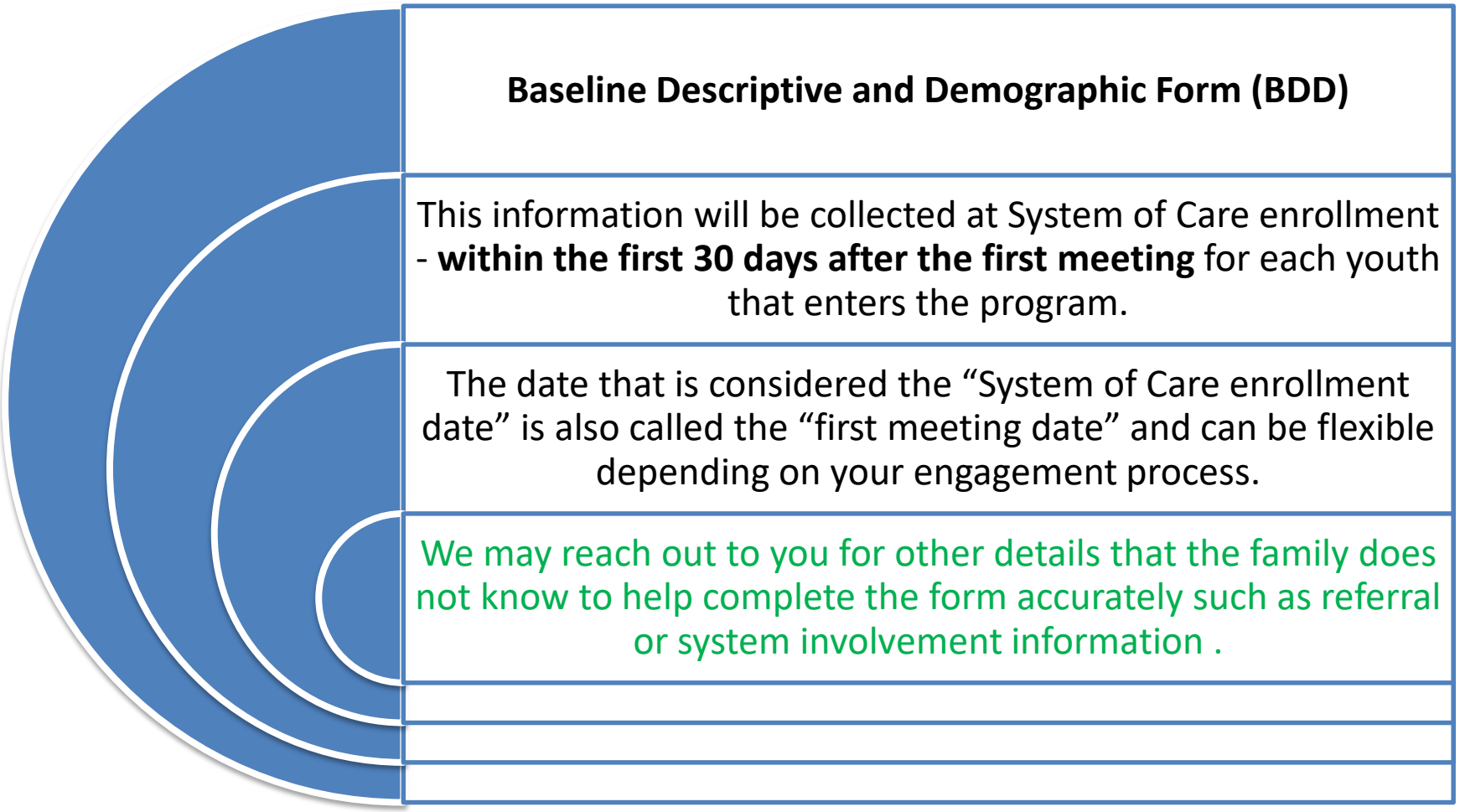
- Please fax the completed form to the Evaluation team: (412) 856-8790
- Or email to AnnaMaria Segretti at tomlanovicha@upmc.edu
- We will send a confirmation email to let you know that it was received.

Evaluation Requirements

Youth data that must be collected:

- **Descriptive Information** (Ex. Referral source, system involvement, presenting issues, mental health diagnoses, people involved in the planning/treatment process, etc.)
- **Demographic Information** (Ex. Race, ethnicity, gender, sexual orientation, income, education, language, disability status, etc.)
  - **Based on National Culturally and Linguistically Appropriate Services (CLAS) Standards**
- **Outcomes information** (Ex. Functioning, Stability in Housing, Education/Employment, Crime/Criminal Justice, Retention, Perception of Care, Social Connectedness, Services Received)

Descriptive and Demographic Data



Outcomes Data

National Outcome Measures Interview (NOMS)

All youth who are enrolled into the program will be interviewed to collect outcomes data.

- Note: Youth are not interviewed individually until they are 11 years old.

30 minute interviews with a youth **OR** caregiver for each family enrolled.

- **Youth/caregivers will receive their first interview (baseline) within 30 days after enrollment or the "first planning meeting".**
- **Youth/caregivers will be reassessed every 6 months they are enrolled in the program and again at discharge to see what changes have been made.**

National Evaluation Self-reports

There are 3 caregiver self-reports and 2 youth self-reports that must be given out and completed at the same time of each NOMS interview

Baseline (within 30 days of the first meeting), every 6 months they are still enrolled, and again at discharge

These are standardized assessments that are often used in research studies so that they can collect functional outcomes that are comparable nationally.

Caregivers

The Columbia Impairment Scale (CIS)

Pediatric Symptom Checklist (P-PSC-17)

Caregiver Strain Questionnaire (CGSQ)

Youth (11 years of age or older)

The Columbia Impairment Scale (CIS)

Pediatric Symptom Checklist (Y-PSC-17)

Interview Payments

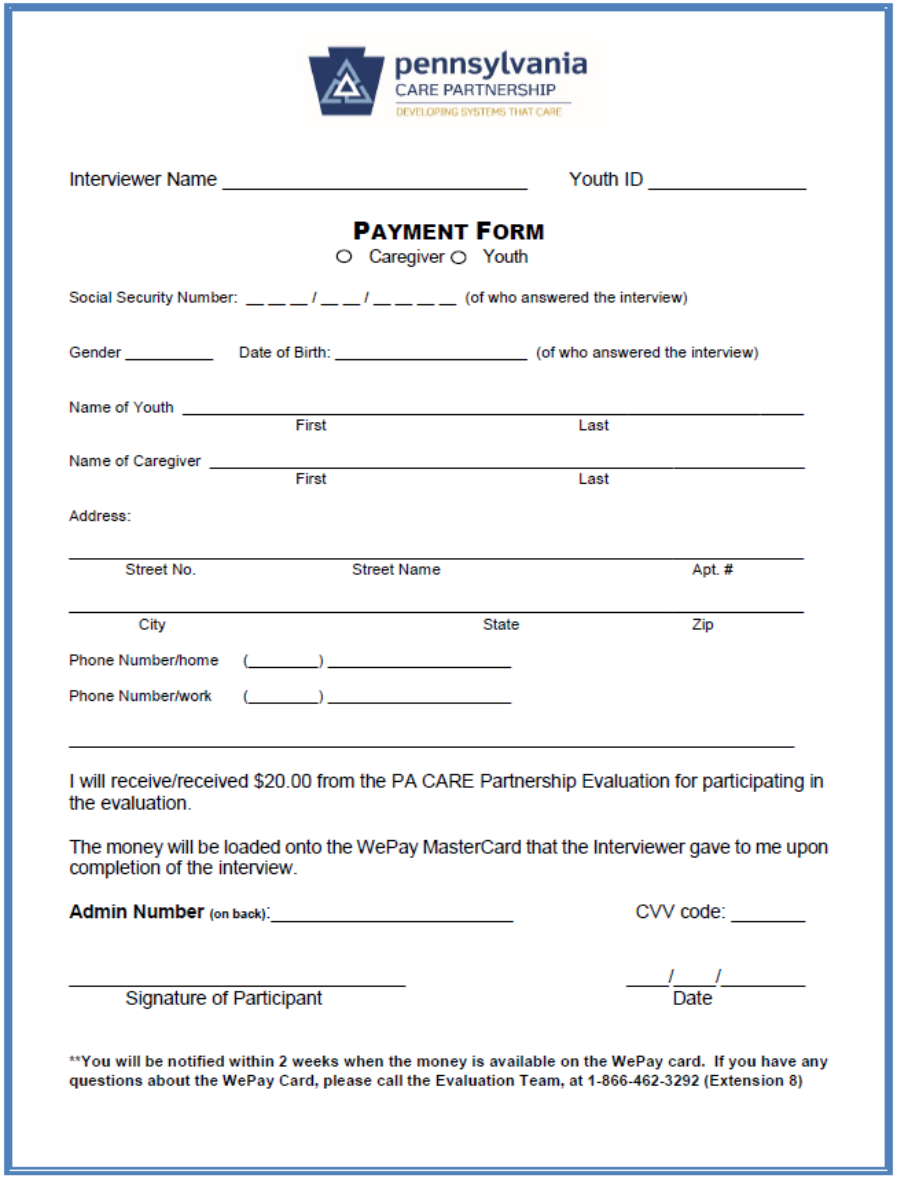
The family member (youth and caregiver) who complete the interview/self-reports will each receive $20 on separate cards.

They will be paid for EACH interview that they participate in (baseline, 6-month follow-ups, and discharge).

All payments will be made on University of Pittsburgh debit cards.

- Money can be withdrawn at any **surcharge-free ATM** with no fee for the first withdrawal or it can be used as a debit card as many times as they want.
- PIN numbers are 0+CVV code on back or they can call the 1-800-number on the back to set up their own PIN.

Payment Receipt Form



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Interviewer Name _____ Youth ID _____

PAYMENT FORM

○ Caregiver ○ Youth

Social Security Number: __ __ __ / __ __ / __ __ __ __ (of who answered the interview)

Gender _____ Date of Birth: _____ (of who answered the interview)

Name of Youth _____
First Last

Name of Caregiver _____
First Last

Address:

_____
Street No. Street Name Apt. #

_____
City State Zip

Phone Number/home (_____) _____

Phone Number/work (_____) _____

I will receive/received $20.00 from the PA CARE Partnership Evaluation for participating in the evaluation.

The money will be loaded onto the WePay MasterCard that the Interviewer gave to me upon completion of the interview.

Admin Number (on back): _____ CVV code: _____

_____ ____/____/_____
Signature of Participant Date

**You will be notified within 2 weeks when the money is available on the WePay card. If you have any questions about the WePay Card, please call the Evaluation Team, at 1-866-462-3292 (Extension 8)

Participants will receive a copy of this receipt to show that they received payment and has our number to call for questions if the card does not work.

Information about the interviewers

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Ed McKenna

Interviewer

Ed has been a member of The Pennsylvania CARE Partnership and the University of Pittsburgh Medical Center since 2012 and has been working in the Mental Health field for the last 15 years since retiring from his career as an Executive in the Staffing Industry for over 25 years.

He was born in Newtown Square in Delaware County Pennsylvania and spent most of his adult life in West Chester in Chester County, PA where he has raised his 4 children. Ed and his wife Susan currently reside in Morgantown, Pa in Berks County with their 2 adopted children Natalie (17) and Jordan (15). Ed also has two birth daughters, Sheila (31) and Meghan (34) and 4 grandsons ages 3 through 13.

Ed has had his own personal experiences with the mental health system due to the special needs of his adopted children and his oldest grandson who was diagnosed with Autism. He and his wife Sue have spent much of the last 14 years navigating the MH/IDD and educational systems for their children but Ed has also been an Advocate for families requiring help in these same areas.

Along with conducting interviews in several counties in the eastern half of PA for the System of Care, Ed also serves as a Hearing Officer for nearly half of the State presiding over Grievances filed by families regarding their MH/IDD benefits.

Throughout these last 14 years, Ed brings with him significant knowledge that can be a great help to families as they begin their journey in this sometimes confusing field of Mental Health. He has conducted dozens of these interviews and prides himself on being very flexible to accommodate each family's timetable and also has a keen awareness of what a family is going through during these, sometimes, very trying and difficult times.

Contact Information:

Name Ed McKenna
Title: Interviewer
Cell: (610) 241-2139
Email: mckennae2@upmc.edu

Feel free to give out these brochures to families so they feel comfortable and know who to expect at their home.

Words of wisdom from our interviewers

- They can be very flexible with the time, location, etc. for caregivers and youth. And can do youth and caregiver interviews on different days if needed.
- Any information that you can give them about how it is best to contact the family, any tips about how to find the house, any safety concerns, etc. are very appreciated!
- Feel free to make notes on the Permission to Contact Forms or reach out to them directly with any information that you have.
- Ask them any questions that you might have about the process – the more that we understand ahead of time, the better that we can make this experience a positive one for families and youth!

Collecting Data for Outcomes

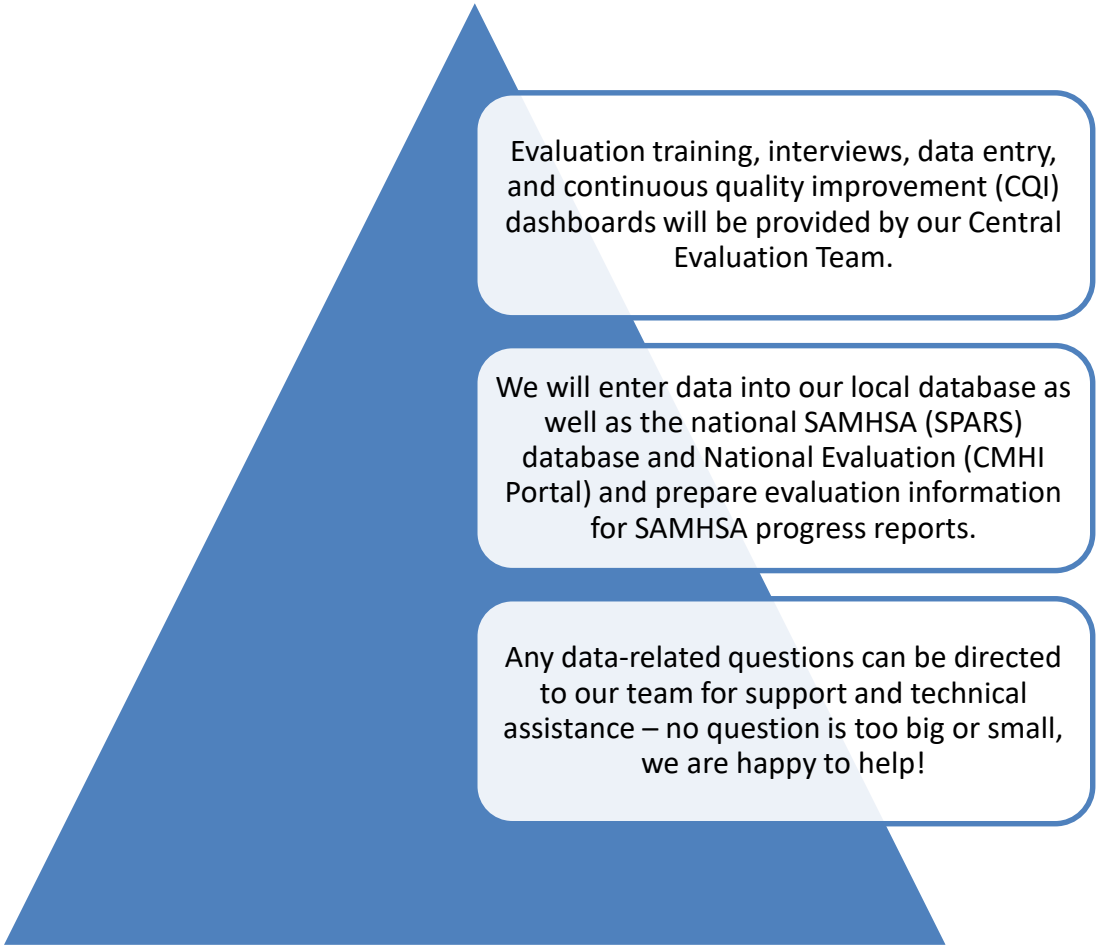
6-month Follow-up Interviews

- If families have moved or have different contact information, please inform Ed as soon as possible so that he is able to locate them to collect the outcomes data.
- There is data that Ed must collect from staff at the follow-up points so he will be reaching out to the point person at each agency to find out:
  - which services the youth has participated in since the last interview was completed
  - if they have an updated mental health diagnosis
  - what systems/agencies they are currently involved with

Discharge Interviews

- Ed has to complete a discharge interview (should be within 2 weeks of discharge) so please let him know if anyone is discharged from the program or if you have lost contact with them for more than 90 days so he can reach out to schedule the interview.
  - He will need to gather the same information as above from agency staff to complete the discharge interview (regardless of whether he is able to reach the family, he must still submit this part of the paperwork).

Evaluation Technical Assistance



Data Dashboards

We use a Data Dashboard software through iDashboards

- Web-based site for each county to view their own data with security-based login and password information
- Connection to our database so that data is updated in real time
- Compatible with all web browsers and mobile devices
- Easy to use and manipulate visual graphics to see the big picture or drill down to individual (de-identified) youth data
- Graphics, tables, and charts can be saved/printed/emailed/embedded in reports for easy distribution of data

Enrollment Oversight

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Welcome to the PA CARE Partnership Project Dashboards

General Info

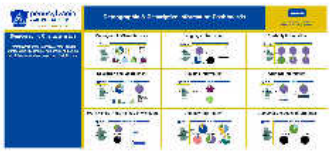
Click here for more information on how to use the dashboards.

Outcomes Dashboards

Psychological Distress
Daily Functioning
Social Connectedness
Perception of Care
Trauma and Suicide
Health and Coping
Other Outcomes

Enrollment, Tracking, and Reassessment Dashboards

Demographic and Descriptive Information Dashboards



Mental Health Dashboards

Substance Use, Trauma, and Recovery Dashboards

Outcomes Dashboards

Longitudinal Outcomes Coming Soon

National Evaluation Dashboards

Demographics

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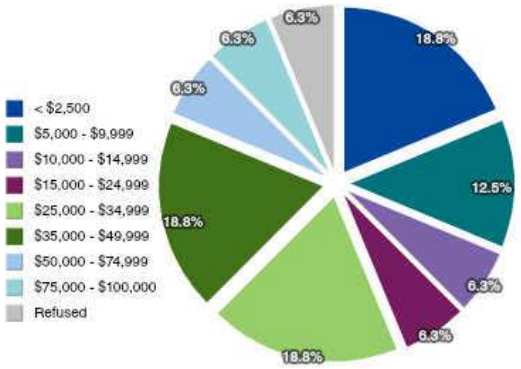
Total # of Enrollments: 16

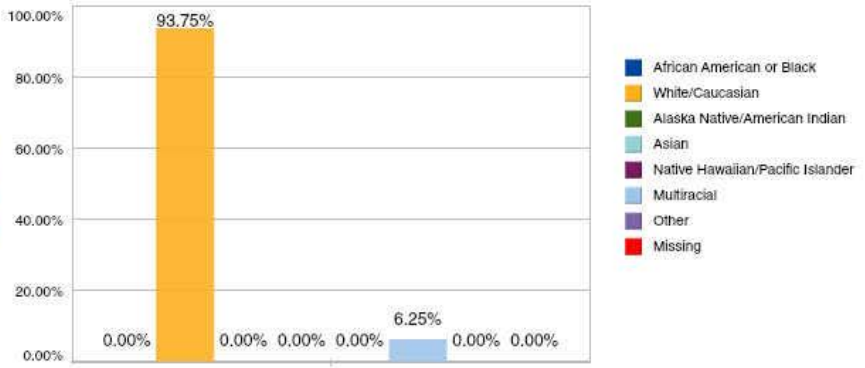
Grant Year	Year 1,Year 2
County	Crawford,Yor
Agency	Crawford-BCM,Crawfo
Gender	Male,Female,Transgender Male
Ethnicity	Non-Hispanic,His
Age Group	Birth to 3 years,4 t
Race	African American or Black,White
Income	< $2,500,$2,500 - $4,9
Sexual Orientation	Heterosexual,Gay

Demographic Characteristics

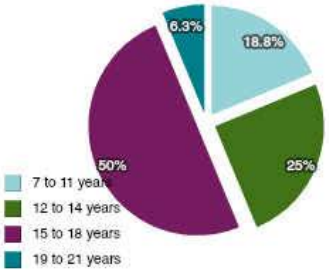
Income



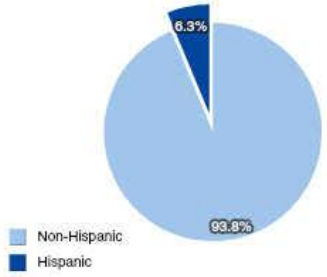
Race



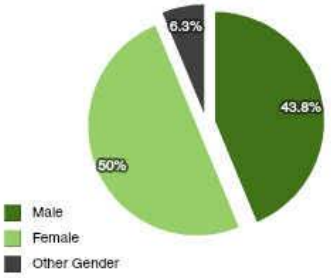
Age Group



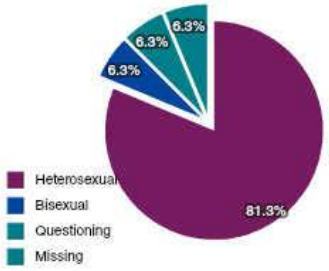
Ethnicity



Gender Identity

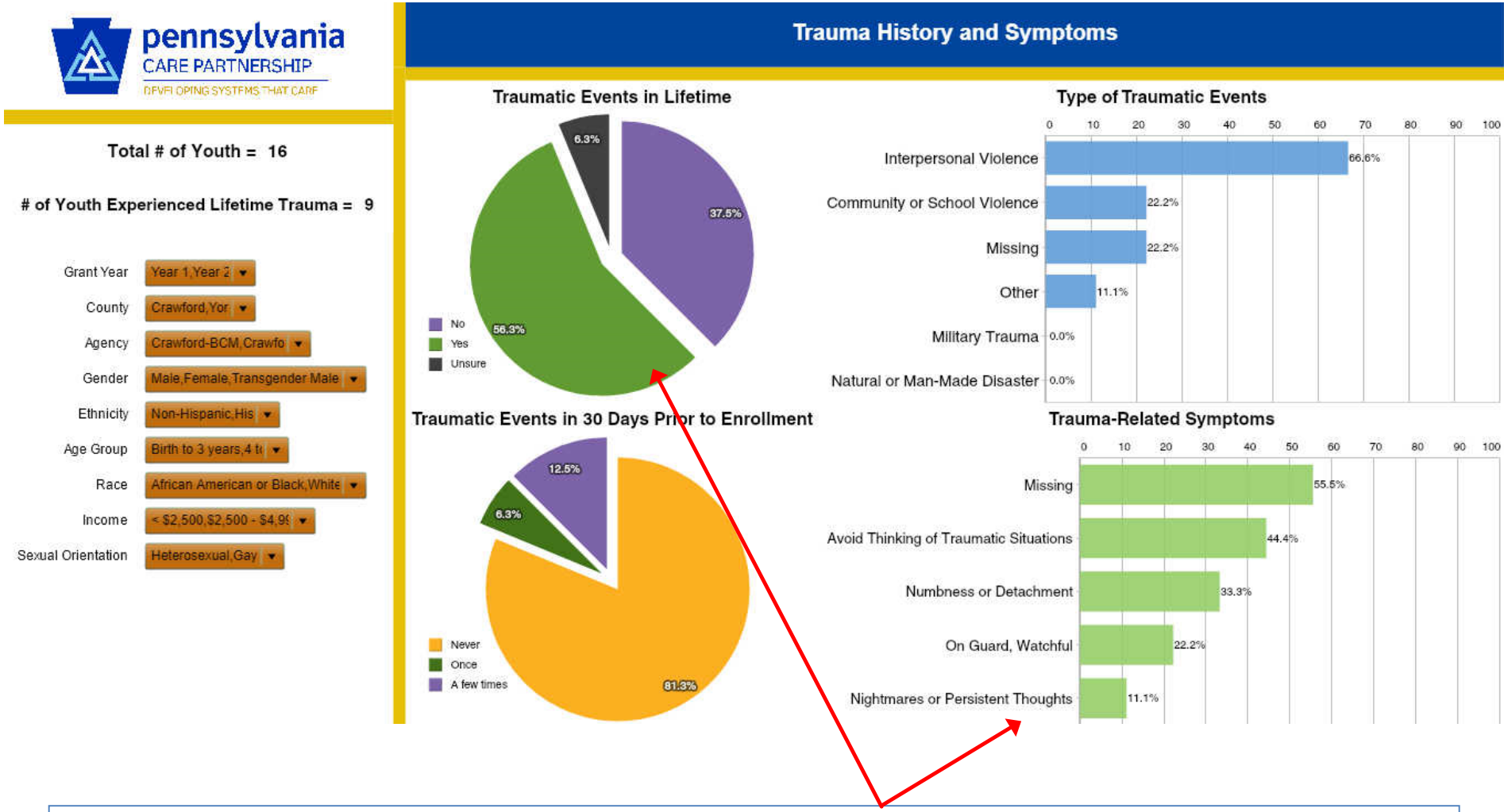


Sexual Orientation



Check to see if the population that you are engaging in the grant is representative of your county. If not, what can you do to make sure that minority groups have equal access?

Trauma



Use this information to look for trauma prevalence and symptoms. This can help you to make a case for more training around trauma-informed care to all levels of your systems and county services and supports.

Outcomes

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Psychological Distress Outcomes

Psychological Distress Outcomes Summary
Psychological Distress Outcomes Summary by Timepoint
Psychological Distress Outcomes Symptoms and Summary for Youth IDs
Psychological Distress Outcomes All Symptoms for Youth IDs

Outcomes Dashboards

General Info

Click here for more information on how to use the dashboards.

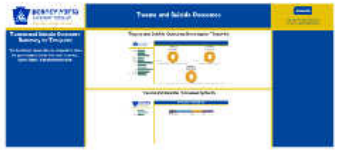
Psychological Distress Outcomes

Daily Functioning Outcomes

Social Connectedness Outcomes

Perception of Care Outcomes

Trauma and Suicide Outcomes



Health and Coping Outcomes

Other Outcomes

Data Coming Soon

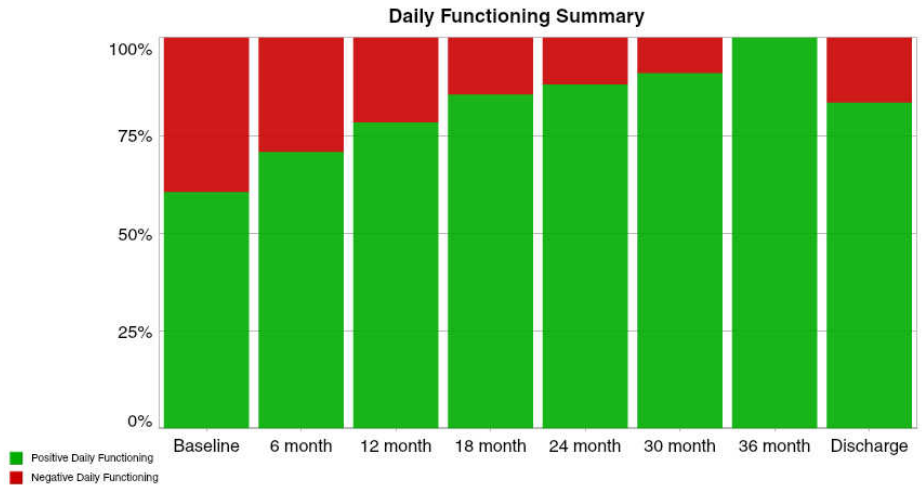
Outcomes

PA HEALTHY TRANSITIONS PARTNERSHIP

Daily Functioning Outcomes
(Baseline to Discharge)

Grant Year	Year 1,Year 2
County	Berks,Bucks,W
Agency	Berks-Mobile Psych R
Gender	Male,Female,Transgender Male
Ethnicity	Non-Hispanic,His
Age Group	Birth to 3 years,4 t
Race	African American or Black,White
Income	$0- $9,999,$10,000-$
Sexual Identity	Heterosexual,Ga
ELSA	No,Yes

Youth were asked a series of questions regarding how well they function in daily life:
(Questions were answered on a scale of 1-5 with 5 being the highest level of functioning)
Youth is considered to have a positive outcome when the mean of the total valid values is greater than 3.5



Number of Youth with Valid Score

Timepoint	# of Youth
Baseline	301
6 month	147
12 month	92
18 month	48
24 month	25
30 month	11
36 month	3
Discharge	36

CLICK HERE

For a more detailed view

We used the criteria for positive and negative outcomes for each section of the NOMS to show progress of youth enrolled over time. These are easy to read and understand in red/green.

Pay close attention to the number of youth that have data available in each time-point to make sure you are using data appropriately. A sample of less than 10 in any column is not enough to make decisions.

Look for buttons to "drill down" to look for data from each youth ID number.

Outcomes

PA HEALTHY TRANSITIONS PARTNERSHIP

Daily Functions by Youth ID

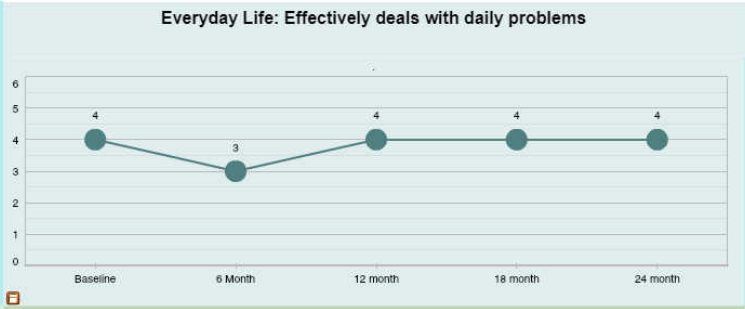
County Berks,Bucks,W | Agency Berks-Mobile Psych R | YouthID 338630003

5 = Strongly Agree
4 = Agree
3 = Neutral
2 = Disagree
1 = Strongly Disagree

How well were you able to deal with everyday life during past 30 days?

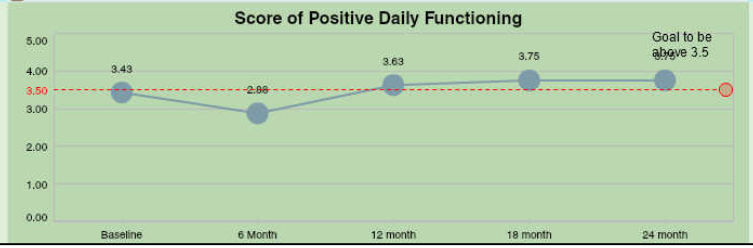
Click on an option from the list below to alter the chart

Effectively deals with daily problems
Able to control own life
Able to deal with crisis
Getting along with own family
Do well in social situations
Do well in school and/or work
Satisfied with housing situation
Own symptoms are not bothering them

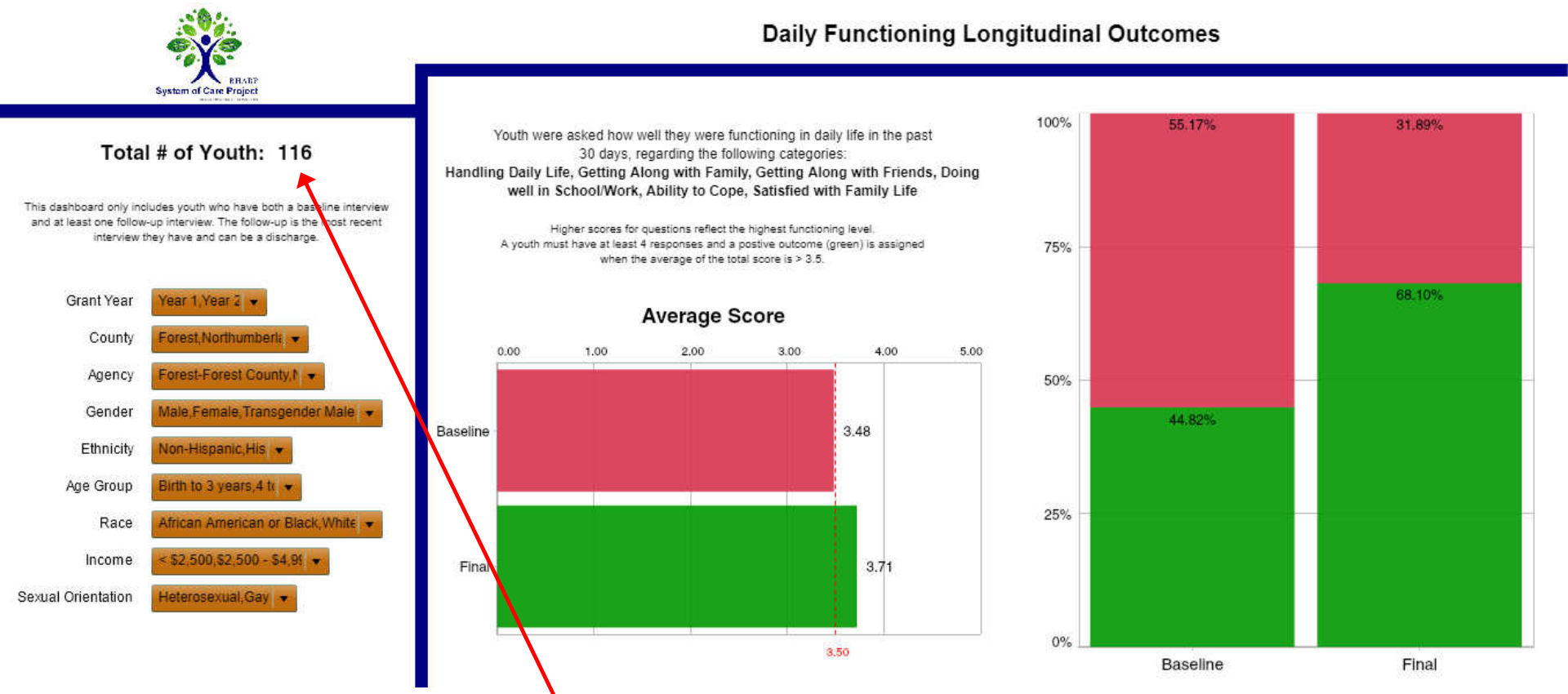


To calculate Score for Positive Daily Functioning at least five of the eight questions have to had valid answers.

Youth to be considered functioning well when the average rating greater than 3.5



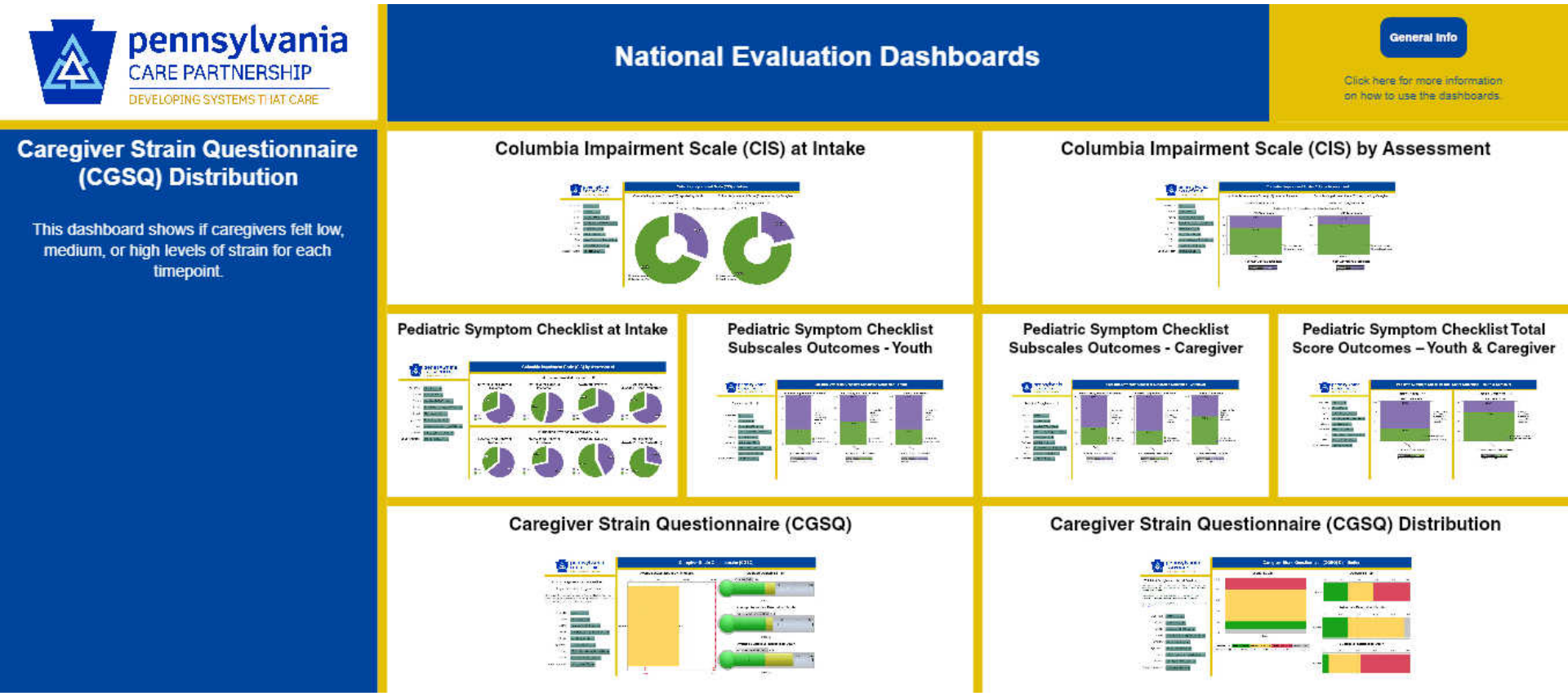
Pre- and Post- Outcomes



You will also be able to assess each outcome from the baseline assessment to the last assessment conducted (regardless of which time-point it was) in one large group to increase the number of youth in the sample and look for overall program outcomes.

This is important because youth needs can be varied so looking at each timepoint separately can make it seem like youth dropped out early. This shows the length of their total treatment.

National Evaluation Outcomes



This menu will provide information about overall functioning, symptoms, impairment, and caregiver stress. These tools are used nationally among research and evaluation projects so they are well-validated assessments with clear scoring criteria for "clinical impairment".

This is the only data where you can see differences in perspective between youth and caregivers when they answer the same questions.

National Evaluation Outcomes

System of Care Project

Grant Year	Year 1,Year 2
County	Forest,Northumberla
Agency	Forest-Forest County,M
Gender	Male,Female,Transgender Male
Ethnicity	Non-Hispanic,His
Age Group	Birth to 3 years,4 t
Race	African American or Black,White
Income	< $2,500,$2,500 - $4,9
Sexual Orientation	Heterosexual,Gay

Columbia Impairment Scale (CIS) by Assessment

Columbia Impairment Score (CIS) reported by Youth

Total # of Youth = 185

A total score of 15 or higher is considered clinically impaired. Range: 0 - 52.

CIS Total Score

# of Youth with Valid Total Score

Timepoint	# of Youth
Baseline	173
6 month	68
12 month	26
18 month	7
Discharge	11

Columbia Impairment Score (CIS) reported by Caregiver

Total # of Caregivers = 187

CIS Total Score

# of Youth with Valid Total Score

Timepoint	# of Youth
Baseline	171
6 month	65
12 month	27
18 month	6
Discharge	8

When you have more data across different time-points, you can look to see whether the (green) clinical impairment is going down.

Do youth and caregivers perceive improvement in functioning/impairment the same way?

Local Data Collection

In addition to helping you collect and effectively utilize the data from the SAMHSA requirements, it is our goal to also provide assistance collecting meaningful local data that aligns with your county goals and priorities.

- Identify surveys and assessments used by other communities around particular topics of interest
- Help design qualitative data collection strategies (interviews, focus groups, community cafes, etc.)
- Provide strategies for using public county, state, and national data in your leadership committees to spark discussion and planning

Tip Sheet – County Data Resources

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County Data Resources

United States Census Bureau - access to national, state, county, and city data including:

- Population estimates and projections
- Geographical mobility/migration
- Age, race, ethnicity, language, education, income
- Industry and occupation
- Data visualizations and interactive maps
- https://www.census.gov/2010census/popmap/

SAMHSA: Substance Abuse and Mental Health Services Administration

Access to the latest national research, resources and reports through 2013

- Data on drug use/abuse (detailed list A to Z)
- Drug use in correlation with mental health disorders
- Treatment data
  http://samhsa.gov/data/
- 2015 PA Behavioral Health Barometer Report:
  https://www.samhsa.gov/data/sites/default/files/Pennsylvania_BHBarometer_Volume_4.pdf

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KIDS COUNT Data Center – county, state and national data/rankings on indicators of child well-being

- Demographics
- Economic Well-being
- Education
- Family and Community
- Health
- Safety and Risky Behaviors
- http://datacenter.kidscount.org/

County Health Rankings and Roadmaps (Robert Wood Johnson Foundation) - access to health data, rankings, and roadmaps for every county in the nation including:

- Premature deaths
- Children in poverty
- Access to safe drinking water
- Obesity
- Number of fast food restaurants

http://www.countyhealthrankings.org/app/#/pennsylvania/2013/rankings/outcomes/overall/by-rank

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www.city-data.com – access to community statistics, profiles, interactive maps, and customizable reports on

- Race, Income, Ancestries, Education, Language, Religion, Employment, Geographical data, Crime data, Cost of living, Housing, Businesses, State profiles, etc.

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www.diversitydatakids.org – child demographic and wellbeing indicators (profiles, rankings, and maps) available to:

- Analyze by race/ethnicity; Compare data across states, counties, cities, and large school districts; Compare policy indicators across states; Neighborhood Child Opportunity Index
- Demographics, Education, Neighborhoods, Health, Economic, Policy, etc.

Office of Mental Health and Substance Abuse Services - access to data from PA's behavioral health system:

- HealthChoices goals and performance reports
- Statewide initiatives
- County behavioral health data profiles
- Performance outcomes

http://www.parecovery.org/

PA Department of Human Services

- Child Welfare
- County Block Grant Funds
- Early Childhood Education
- Medical Assistance
- Mental Health
- http://www.dhs.pa.gov/learnaboutdhs/data-dashboard/index.htm

PA Child Stat - Community Outcomes for Pennsylvania's Children and Families including:

- Uninsured children
- Juvenile Crime Arrests
- New child welfare placements
- https://www.humanservices.state.pa.us/CommunityLevelOutcomeIndicators/DataDictionary.pdf

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Juvenile Justice and Corrections/Criminal Justice Data and Reports

- **Juvenile Court Judges Commission** – statistics about juvenile court dispositions and juvenile probation
- http://www.jcjc.pa.gov/Research-Statistics/Pages/default.aspx
- **Pennsylvania Commission on Crime and Delinquency** - county level crime data including:
  - Corrections, Courts, Delinquency Prevention, Juvenile Justice
  - http://pacrimestats.info/About.aspx
- **PA Uniform Crime Reporting Statistics** – sortable by county and jurisdiction
  - http://ucr.psp.state.pa.us/ucr/reporting/ruaware/ruawarecountyui.asp
- **PA Department of Corrections** – reports on recidivism, intermediate punishment, and annual statistics
- http://www.cor.pa.gov/About%20Us/Statistics/Pages/default.aspx

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EPISCenter – implementation and assessment of proven-effective prevention and intervention programs

- **Evidence-Based Programs** – training, resources, research, and tools of 11 programs
- **Juvenile Justice** - Standardized Program Evaluation Protocol and other assessments
- **Communities that Care and PA Youth Survey** - information and resources

http://www.episcenter.psu.edu/

PA Department of Education - access to all Pennsylvania public school statistics including:

- Dropout, enrollment, and graduation information
- District, school, and state report cards
- Early childhood information
- PSSA, SAT and ACT scores
- Home School Statistics
- http://www.education.pa.gov/DataAndReporting/Pages/default.aspx

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PA Bureau of Special Education - PaTTAN (Pennsylvania Training and Technical Assistance Network)

- Training, Educational Initiatives, Resources, Publications
  http://www.pattan.net/
- **PennData** – Early Intervention and Special Education data and reports by district and state overall
  https://penndata.hbg.psu.edu/

https://www.pacarepartnership.org/uploads/PA_County_Data_Resources.pdf

Tip Sheet – How to Use Data

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Tip Sheet - How To Use Data

Goal: Tips for how to use data for continuous quality improvement effectively, and how to make data interesting, relevant, and meaningful to different stakeholders.

1. **Have a Data/CQI standing agenda item at each County Leadership Team meeting.**

2. **Choose a data topic for each meeting – see below for ideas!**
   - Log into your data dashboards https://yftidash.upmc.com/idashboards/ to find information.
   - Look at public county-level data sources – links available on PA CARE website: https://www.pacarepartnership.org/resources/evaluation-resources/
   - Look at census (descriptive and demographic) data to get a better sense of your county's minority populations around race/ethnicity/language/culture.
   - Ask a different leadership team member to choose a topic for the following month's meeting and be responsible for bringing some data (a few slides/charts) to discuss.
   - Let the natural discussion of each meeting identify a topic for the following month.
   - Allow curiosity/questions to arise first, and then the group begins to identify the data that can help to answer the question or illuminate the discussion.
   - Develop a list of important topics and schedule them for the next 6 months of meetings so that everyone can bring something relevant to discuss.

3. **Choose a reason to look at data and how to focus the discussion.**
   - **Strengths-based** – look at positive things, discuss possible strengths of your county that may have led to the positive results, and celebrate successes around the work that your county has done that has made a difference.
   - **Challenges** – look at barriers to positive change, discuss what possible challenges your county has that may have led to the negative results, discuss the elephant in the room, and identify areas for improvement.
   - **Outcomes** – focus on one particular county program, service, support, etc. and look at a small number of outcomes to see how the program is functioning and what is working/not working.
     - ✓ Bring in staff and/or family/youth who have participated to help think about the outcomes.
   - **Confusing/conflicting information** - spark discussion from different perspectives around the table (family, youth, systems, providers, community, etc.) - ask critical questions and reflect about why some information is mixed or conflicting.
   - **Lack of information** – identify areas where there is a need for more data and brainstorm ways that you could obtain more information about the topic.

4. **Develop a plan about next steps.**
   a. Identify what you want to do to make sure that the good work continues.
   b. Choose and prioritize areas that you want to improve or adjust.
   c. Discuss whether you have all the information you need or if you need to brainstorm more ideas/sources of data, etc.
   d. Discuss who, what, when, where, how, why the plan will be developed around CQI.
   e. Decide when updates will be made to the group and how the group will be informed of progress.

What are general tips around presenting data?

- Choose data that are relevant and timely to the issues/needs that are current to your stakeholders.
- Stakeholders are more likely to listen to data if it is coming from a peer.
- Provide data in different formats so there is the ability to multi-task while absorbing information.
- Background information and a key of acronyms and/or definitions are important for the presentation.
- Provide a reference sheet that defines data/evaluation terms and general information to make reading data easier.
- Utilize personal stories and reviews of the program/process to help enhance the numbers/data.
- The role of systems and how they communicate, integrate, use their own language, etc. is often the difficult part to grasp and change for youth/families.

What do youth, family, provider, and system partners look for in data?

Family
- Simple graphs, not lists of numbers, not overly busy with data
- Demographics/System involvement – are these families similar to me and my experience?
- Clearly observable so the untrained eye can easily see the point of the data
- Data to show the importance and impact of Family Voice and Choice
- How will it make a difference in family life? / Improvement in Family Functioning
- Education information – improvement in attendance/performance/discipline
- Data to show lower out of home residential placement/ youth returning home faster
- Family satisfaction / found process helpful and engaging
- Good outcomes for youth – at home, in school, out of trouble, and in the community

Youth
- Demographics/System involvement – are these youth similar to me and my experience?
- See simple information at a glance, with the choice to dig deeper
- Simple graphs – with more visual aspects
- Appeal to a variety of different learning styles
- Send data through Facebook and other social media formats that are already familiar
- More likely to listen to data if it is coming from a peer
- Youth satisfaction – have other youth found it enjoyable/ are they satisfied with outcomes?
- How will it make a difference in my life? / Will I feel better?

Provider
- Where referrals are coming from?
- Who is participating in the process/treatment?
- Can I convince youth/families that they should put the time into the process/treatment?
- Data to help show youth that were engaged and that it was helpful
- Data to show it can reduce length of stay in residential placement
- Data to show cost savings for providers
- Data to convince systems that it is a good investment to increase referrals

System Partners
- Improved access to care
- Lower cost to systems
- Data that is tailored to the needs of each system so that the outcomes are meaningful and specific to their needs
- Data that they can use to compare to their own system data to increase validity
- Cross-system data to show outcomes/cost savings in integrating and coordinating with other systems

https://www.pacarepartnership.org/uploads/How_to_use_data_tip_sheet.pdf

Data-Driven, Quality and Outcomes Oriented Webinar

Tuesday, October 23, 2018 – webinar recorded and available on the website

Data-driven

- Understand the types of data collected through System of Care
- Review the data dashboard menus for our grant data
- Know how to find and utilize other public county, state and national data to supplement your System of Care data

Quality Improvement

- Use the data dashboards to see examples of how data can drive quality improvement efforts
- Learn how data can be used in County Leadership Team meetings

Outcomes Oriented

- Discuss other data that you may want to collect to assess certain outcomes that your county is focusing on

https://www.pacarepartnership.org/community-partners/county-system-training-technical-assistance/county-collaborative-training

Brainstorming

- What barriers do you think there might be for youth and families to participate?
- What support from the Evaluation Team or the County do you think you might need to reduce any barriers to participation?
- Do you have any other questions or concerns that we can address?

Evaluation Contact Information

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