

D E C E M B E R 2 0 1 2

# OMA Newsletter

Outcome Measures Application

## Season's Greetings!



### The DIG: Increasing Relevance of Outcome Data

The Achilles heel of outcome reporting has historically been the accuracy and completeness of the data. Often, when managers attempt to find the root cause of this, they discover that service provision is prioritized over outcome collection and reporting, and that one is not really seen as influencing the other.

As we move into 2013, I want to ask three questions:

1. How can we move toward a system where outcomes help inform or improve service delivery?
2. Can outcomes be used as a non-punitive tool in clinical and administrative supervision to motivate staff to ensure measures are collected and used by treatment teams?
3. What would it take to create a shared understanding and appreciation of outcome data by: managers, supervisors, treatment teams, between treatment teams and clients, and between stakeholders and mental health providers?

In the new year, I encourage you to enter into a dialogue with your colleagues about one or more of these questions.

Happy holidays!



**Debbie Innes-Gomberg, Ph.D.**  
District Chief, MHS  
Implementation & Outcomes  
Division, Program Support  
Bureau, County of Los Angeles  
Department of Mental Health



# Kara's Corner



As another year comes to an end, I want to take a few moments to reflect back on 2012 and share my vision for 2013 with you. This year was one of growth for our team.

Regarding Prevention & Early Intervention (PEI) Outcome Measures, training on new measures was added, additional PEI practices were implemented, and PEI Practice Learning Networks and Service Area Data Workgroups were launched. For the Full Service Partnership (FSP) and Field Capable Clinical Services (FCCS) Outcomes, we will soon release our first major upgrade to OMA in years. This release will improve data quality by putting in more upfront validations, and will allow providers to input more data related to FCCS that the system currently does not accept. Also related to FSP was the creation of employment reports. While much clean-up is still needed in the area of employment, putting out the reports was a big achievement for us this year. We have also looked at some of our processes and have tried to streamline communications, create more helpful tools, and really listen to the feedback from all of you.

We have much to look forward to in 2013. It is already looking like a very busy year for us. We will be working on revisions to PEI OMA. These revisions will include adding PEI practices and questionnaires currently missing from the system, adding an administrative module that will allow providers to correct some errors on their own, and fixing some known "bugs." Our team will also work with our Chief Information Office Bureau (CIOB) on a rewrite of FSP/ FCCS OMA to account

for a major revision of the FSP forms and to prepare for the implementation of DMH's electronic health record. Also, look for streamlined reports and tools to help providers make more data-informed treatment decisions. I am fortunate to work with a dedicated and amazing team of people who strive for excellence and consistently rise to any challenge. We will continue to work hard in 2013 to demystify data collection and promote the collection of outcomes that can be used in clinical practice. I look forward to your continued partnership in the New Year. I hope all of you have a wonderful holiday season celebrating with family and friends.



# OMA Version 3.4 Is On The Way

The DMH OMA team is currently testing the new version of the Outcome Measures Application, Version 3.4. This new OMA represents a major upgrade for users working with FSP and FCCS outcomes. It's going to solve a lot of problems that users have been asking us about. For example:

**Do you have clients who have more than one set of FCCS outcomes per I.S. episode?** This has been a big issue for many FCCS providers. OMA 3.4 allows for multiple Baselines and terminations for one Episode.

**Would you like to be able to look at all FCCS Baselines and Updates created for a client?** In OMA 3.4 you will be able to look at past Baselines and Updates from all providers, just like you can for FSP.

**Are you frustrated by inconsistencies on the FSP Living Arrangement column on the KEC?** Version 3.4 corrects the bug on the question about the client's opinion on a move other than jail/hospital. If a change to a hospital or jail is being reported, the column will be disabled.

Some of the new features include:

## For FSP

- A whole new set of "Wizards" to simplify Discontinuation and Re-establishment, and prevent duplicate baselines from being created
- Special "validation" safeguards to help users avoid problematic data
- Minor fixes and enhancements

## For FCCS

- The ability to use the same IS Episode to capture multiple baselines and terminations of FCCS
- Sortable columns
- The ability to look at the outcomes created by your provider and other providers (similar to FSP)

In addition to detailed technical notes, DMH will roll out a whole set of online "upgrade" trainings and step by step instructions to help familiarize users with the new features in OMA Version 3.4.



## OMA Lab

The Outcome Measures Application (OMA) lab is open! Come and get one-on-one support from the MHSA Implementation & Outcomes Division staff for your OMA issues. The staff is available to help you with OMA Full Service Partnership (FSP), Field Capable Clinical Services (FCCS) and Prevention & Early Intervention (PEI) assessments and reports. The lab is for users who have experience using OMA or who have specific questions regarding their OMA Data Change Deletion Requests. This is not an OMA training session. If you are interested in FSP, FCCS, or PEI OMA training, visit the OMA Wiki for more information: <http://dmhoma.pbworks.com>.

OMA labs are held every other Monday, at 10 a.m. at 695 S. Vermont Ave., Room 712 (computer training lab). Go to the OMA Wiki for more information on the next scheduled lab. If you would like to attend an OMA lab, please contact John Flynn at [jflynn@dmh.lacounty.gov](mailto:jflynn@dmh.lacounty.gov) to reserve your spot.



## Technical Assistance Site Visits: An Aid To Transformation

Transformation is a challenging process whether you are a caterpillar or a provider. The good news is that DMH is here to help through the Prevention Early Intervention (PEI) technical assistance site visits. These site visits allow for a friendly “meeting of the minds” among DMH staff. They are led by PEI Administration and help providers focus on the successes and challenges of implementing PEI Evidence Based Practices (EBPs).

The MHS Implementation & Outcomes Division’s participation in the site visits has been a very enjoyable experience. Providers have welcomed DMH to their agencies and have embraced the opportunity to share how EBPs are being implemented. Providers have been forthcoming with successes, challenges, and steps taken to address those challenges. We have enjoyed hearing directly from providers and meeting many of the staff implementing or supervising the PEI EBPs.

Our unit’s role in the visits has been to assist providers with any challenges related to outcomes that are identified by the provider on their pre-visit questionnaire. We are there to help providers think through issues related to data collection and provide information that will facilitate improved data collection and the use of data in the clinical setting. Most importantly, we want to learn about different approaches to data collection. We are trying to find what seems to be working well at successful agencies so we can share those ideas with providers who are still figuring things out.

Data collection remains a challenge for many different reasons. Agencies have very different approaches to the collection and use of outcomes for PEI. Providers who are experiencing more success with measures have a few common practices that are shared below.



### Tips to Improve Data Collection

Select a dedicated EBP Manager. Many agencies have been able to increase the quantity and quality of data collected through use of a dedicated EBP Manager. The manager’s responsibilities often include monitoring outcome measure administration, scoring and data entry, monitoring training needs, and analyzing data collected. These managers are also charged with communicating results with supervisors, local administration and DMH along with EBP practice leads and/or developers. While it might seem to be cost prohibitive at first, the actual savings in terms of increased efficiency and staff morale seems to be more than worth it.

Routinely use outcome data in clinical decision making including supervision. It seems that once outcome measures become an integral part of the

clinical process they are no longer perceived as just another DMH requirement, rather they become an essential facet of treatment. The savvy use of outcome measures in supervision, for example, can help inform clinical decision-making at every level. It can also provide welcome feedback to clients on their progress in recovery.

Good communication is essential. Agencies that communicate their needs or concerns to DMH usually find someone able to help, whether it be in dealing with trouble in Data entry or a billing issue. Providers who choose to consult a practice lead or developer can often find support or suggestions for managing the difficult clinical or administrative issues that can arise unexpectedly in the course treatment or implementation.

## Staff Feature: Mychi Hoang

**What are the “Basics” of Mychi?** I grew up in Los Angeles and come from a large family. I am the youngest of 10 children. I graduated from the University of California, San Diego with a Bachelor of Arts in Visual Arts in Media and am now pursuing a Master in Public Administration. I have a black belt in thumb wrestling.

**What do you do in the MHSA Implementation & Outcomes Division?** I work in the Data Outcomes Unit and mostly provide support to our providers with the Outcome Measures Application. I also coordinate the OMA Users’ Group Meetings and design the OMA Newsletter.

**What were the best, worst, and most unusual foods you have eaten while traveling?** Food adventures are so much fun for me, especially when on vacation. A goal of mine is to try the local cuisine and specialties of that region. In no particular order, my top food and drink adventures for the best, worst, and most unusual are:

**Best** (and most memorable): 1) ceviche four different ways in Lima, Peru; 2) venison steak in Napa, CA; 3) eggnog in Shanghai, China; 4) papaya and avocado salad in Machu Picchu, Peru; and 5) chicken enchiladas in a red and green sauce in Mexico City, Mexico.

**Worst:** 1) lamb pot stickers in Moscow, Russia (I thought it was pork!); and 2) alpaca (a species of llama) burger in Cusco, Peru (the meat was too gamey cooked this way).

**Most unusual:** 1) alligator fritters in Phoenix, AZ; 2) rattlesnake and rabbit wurst in Los Angeles, CA; 3) mystery meat in Xian, China; 4) cui (a.k.a. guinea pig) on the Incan Trails of Písaq, Peru; 5) alpaca steak in Cusco, Peru; and 6) chapulines (grasshoppers) in Los Angeles.



**Can you explain dragon boat racing and your involvement in it?** Dragon boat racing is a water sport that consists of 22 team members paddling in a synchronized fashion in a vessel that is in the shape of a dragon. I have been paddling for seven years. My team practices every Saturday morning at 7am at Mother’s Beach in Long Beach. We practice to compete in domestic and international festivals and have traveled as far as Vancouver, B.C. and Miami, FL to race.

**What started your interest in plants and do you have any secrets you can share with those of us who don’t have a “green thumb?”** I had an interest in plants since I was in the 5<sup>th</sup> grade. The teacher asked us to describe what we wanted to be when we grew up and I stated that I wanted to be a gardener, despite the fact that I was and still am afraid of worms and anything that crawls, slithers, and squirms. Because houseplants usually don’t have worms or creepy crawlers, I can enjoy them very much. My coworkers joke about the “forest” in the office but I know they secretly enjoy the plants, too. Some suggestions for keeping your plants nice and green are: don’t overwater, situate them near natural indirect light, and keep them out of drafts. If those don’t work, there are some very lovely and low maintenance acrylic plants for sale nowadays; they only need a good dusting every now and then. Good luck!

# PEI Outcome Measures Available in More Languages

The MHS Implementation & Outcomes Division now provides Youth Outcome Questionnaire 2.01 (YOQ), Youth Outcome Questionnaire-Self Report 2.0 (YOQ-SR) and Outcome Questionnaire 45.2 (OQ) in each of the County's 13 threshold languages. These languages include: Arabic, Armenian, Cambodian, Chinese (Modern), Chinese (Traditional), English, Farsi, Japanese, Korean, Russian, Spanish, Tagalog, and Vietnamese.

Providers interested in receiving the newly available translations should complete a PEI Outcomes Order Form, available on the OMA Wiki:

<http://dmhoma.pbworks.com/w/page/36104184/PEI%20Outcomes#Documentation/Handouts> and submit it by email to: [PEIoutcomes@dmh.lacounty.gov](mailto:PEIoutcomes@dmh.lacounty.gov)



## Contact Us

### FSP:

[FSPOutcomes@dmh.lacounty.gov](mailto:FSPOutcomes@dmh.lacounty.gov)

### FCCS:

[FCCSOutcomes@dmh.lacounty.gov](mailto:FCCSOutcomes@dmh.lacounty.gov)

### PEI:

[PEIOutcomes@dmh.lacounty.gov](mailto:PEIOutcomes@dmh.lacounty.gov)

## Coming Up

**OMA Forms and Hands-On Trainings** are available to all OMA users. We recommend getting trained or retrained if you have not attended one of these trainings in the last two years, because the system continually changes. Check the OMA Wiki for more information and a schedule of trainings: <http://dmhoma.pbworks.com>

**OMA Users' Group** is for our providers. Take advantage of this opportunity to dialogue with DMH folks about OMA issues. Next meeting: Monday, January 7, 2013 from 1:30 - 3:00 p.m. at 695 S. Vermont Ave, 15<sup>th</sup> Floor Glass Conference Room, L.A., 90005. To participate via Webinar, email John Flynn: [jflynn@dmh.lacounty.gov](mailto:jflynn@dmh.lacounty.gov)

**OMA Lab** is open to all OMA users who want one-on-one assistance from the Data team to tackle some of your pending DCDRs. The lab is open every other Monday from 10am - Noon. Next OMA lab: January 14, 2013. Space is limited so please RSVP with John Flynn: [jflynn@dmh.lacounty.gov](mailto:jflynn@dmh.lacounty.gov)

**PEI Outcomes Questionnaire and Data Entry Trainings** are available to all PEI providers. Training schedules are posted on the wiki at:

<http://dmhoma.pbworks.com/w/page/36104184/PEI%20Outcomes#Training>