

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU – MHSA IMPLEMENTATION AND OUTCOMES DIVISION**



WELLNESS • RECOVERY • RESILIENCE

**Prevention & Early Intervention: Seeking Safety
Countywide Aggregate Practice Outcomes Dashboard Report**

Outcome Data Submission through September 19, 2012

Participating Legal Entities Include:

Alma Family Services	Foothill Family Services	SSG/OTTP
American Indian Counseling Center	Hathaway Sycamores	Tarzana Treatment Center
Asian American Drug Abuse	Hillsides Family Center	Tessie Cleveland
Assoc League of Mex-American(ALMA)	Hillview MHC	The Guidance Center
Aviva Center CMH	Jewish Family Services	The Help Group
BHC Child Int Community Services	Juv. Justice Transition Aftercare Svcs	Tobinworld
Central Valley Youth & Family Center	LA Child Guidance Clinic	Trinity
Chartwrap Child Int Community Svcs.	Masada Homes	Valley Child Guidance Clinic
Child and Family Center	Mental Health America	Vista Del Mar
Child and Family Guidance Center	Northeast Mental Health Center	LA County Dept. of Mental Health:
Children's Hospital Los Angeles	Optimist Youth Homes	• Arcadia Mental Health Services
Counseling 4 Kids	Pacific Asian Counseling Services	• Coastal API Family MHC
D'Veal Family & Youth Services	Pacific Asian Counseling SVS SFV	• Downtown MHS
Didi Hirsch	Pacific Clinics Family Services	• Hollywood MHS
El Centro de Amistad	Pacific Lodge Youth Services	• Long Beach API Family MHC
El Centro de Pueblo	Pasadena Unified School District	• Long Beach Child & Adolescent
ENKI	Penny Lane	• Long Beach MHS Adult
Ettie Lee Homes	Rosemary Children's Services	• Rio Hondo Community MHS
Exceptional Children's Foundation	San Fernando Valley CMHC	• South Bay MHS
Five Acres	San Gabriel Children's Center	
Florence Crittenton Child & Family	Shields for Families	

Table 1. Seeking Safety Status since inception to September 19, 2012

# of Clients Claimed to Practice	# of Clients entered into PEI OMA	# of Tx cycles in PEI OMA	Clients with Multiple Tx Cycles	Clients Completing Tx	Clients Dropping-Out of Tx
n=8,347	32.05% n=2,675	n=2,741	2.43% (n=65)	11.96% (n=320)	17.35% (n=464)

Note 1: Clients Claimed is reported based on Seeking Safety being selected as the EBP in the PEI Plan and client has ≥ 1 core services claimed to the practice.

Note 2: Completion and Drop-out are reported based on responses indicated of "yes" or "no" in the PEI OMA for EBP completed.

Table 2. Client Demographics – Clients Who Entered Seeking Safety

Total Clients	Age	Gender		Ethnicity					Primary Language		
	Average	Female	Male	African-American	Asian/ Pacific Islander	Caucasian	Hispanic/ Latino	Other	English	Spanish	Other
n=2,675	21	46.09% (n=1,233)	53.87% (n=1,441)	21.68% (n=580)	2.58% (n=69)	12.49% (n=334)	58.02% (n=1,552)	5.23% (n=140)	78.50% (n=2,100)	18.28% (n=489)	3.21% (n=86)

Note1: Age is calculated at the date of the first EBP.

Note2: Percentages may not total 100 due to missing data.

Table 3. Top 5 most frequently reported DSM-IV Primary Axis I Diagnoses – Clients Who Entered Seeking Safety

Total Clients	Depressive Disorder NOS	Oppositional Defiant Disorder	Mood Disorder NOS	Dysthymic Disorder	Disruptive Behavior Disorder NOS	Other Diagnosis
n=2,675	10.43% (n=279)	9.31% (n=249)	7.07% (n=189)	7.07% (n=189)	6.99% (n=187)	59.14% (n=1,582)

Table 4. Seeking Safety Program Process Data – Clients Who Entered Seeking Safety			
Outcome measures administered	Pre-test with scores	Post-test with scores	Clients who completed both a Pre and Post measure with scores
UCLA PTSD-RI - Parent	35.94% (n=647) Ackn=1,800	15.36% (n=84) Ackn=547	2.89% (n=52) Ackn=1,800
UCLA PTSD-RI – Child/Adolescent	61.89% (n=1,226) Ackn=1,981	28.89% (n=171) Ackn=592	6.16% (n=122) Ackn=1,981
UCLA PTSD-RI - Adult	75.37% (n=309) Ackn=410	51.28% (n=20) Ackn=39	4.15% (n=17) Ackn=410
Youth Outcome Questionnaire - 2.01 (Parent)	48.36% (n=870) Ackn=1,799	21.12% (n=109) Ackn=516	4.17% (n=75) Ackn=1,799
Youth Outcome Questionnaire – Self Report – 2.0	73.48% (n=1,466) Ackn=1,995	38.23% (n=216) Ackn=565	8.22% (n=164) Ackn=1995
Outcome Questionnaire – 45.2	77.88% (n=412) Ackn=529	45.76% (n=27) Ackn=59	4.54% (n=24) Ackn=529

Note 1: The % indicated for Pre-test with scores, Post-test with scores, and both a Pre and Post measure with scores is calculated by dividing the n=# w/ scores by the number acknowledge (Ackn=) in the PEI OMA system for each measure.

Note 2: Number of acknowledged measures (Ackn=) is determined by the number of required measures that receive a score or an unable to collect reason code.

Table 5a. Top Reasons Given for “Unable to Collect”

UCLA PTSD-RI - Parent	PRE (n=1154)	Parent/care provider unavailable	Administration date exceeds acceptable range	Clinician not trained in outcome measure	Outcome measure unavailable	Parent/care provider refused	Other reasons
		43.93% (n=507)	16.46% (n=190)	15.51% (n=179)	11.27% (n=130)	5.03% (n=58)	7.80% (n=90)
	POST (n=463)	Parent/care provider unavailable	Premature termination	Invalid outcome measure	Administration date exceeds acceptable range	Lost contact with parent/care provider	Other reasons
		36.29% (n=168)	25.92% (n=120)	15.33% (n=71)	5.83% (n=27)	4.75% (n=22)	11.88% (n=55)

Table 5b. Top Reasons Given for “Unable to Collect”

UCLA PTSD-RI - Child/Adolescent	PRE (n=755)	Administration date exceeds acceptable range	Clinician not trained in outcome measure	Outcome measure unavailable	Client refused	Client unavailable	Other reasons
		30.07% (n=227)	25.43% (n=192)	16.29% (n=123)	12.45% (n=94)	7.15% (n=54)	8.61% (n=65)
	POST (n=421)	Premature termination	Invalid outcome measure	Client unavailable	Client refused	Lost contact with client	Other reasons
		34.20% (n=144)	19% (n=80)	15.20% (n=64)	9.03% (n=38)	8.08% (n=34)	14.49% (n=61)

UCLA PTSD-RI - Adult	PRE (n=101)	Not available in primary language	Clinician not trained in outcome measure	Client refused	Outcome measure unavailable	Client unavailable	Other reasons
		29.70% (n=30)	23.76% (n=24)	18.81% (n=19)	11.88% (n=12)	5.94% (n=6)	9.90% (n=10)
	POST (n=19)	Premature termination	Lost contact with client	Client unavailable	Clinician not trained in outcome measure	Client refused	Other reasons
		36.84% (n=7)	21.05% (n=4)	15.79% (n=3)	15.79% (n=3)	10.53% (n=2)	0% (n=0)

Youth Outcome Questionnaire - 2.01	PRE (n=929)	Parent/care provider unavailable	Administration date exceeds acceptable range	Clinician not trained in outcome measure	Outcome measure unavailable	Parent/care provider refused	Other reasons
		51.35% (n=477)	19.70% (n=183)	11.41% (n=106)	7.00% (n=65)	4.95% (n=46)	5.60% (n=52)
	POST (n=407)	Parent/care provider unavailable	Premature termination	Invalid outcome measure	Administration date exceeds acceptable range	Lost contact with parent/care provider	Other reasons
		40.54% (n=165)	29.24% (n=119)	11.55% (n=47)	5.65% (n=23)	4.67% (n=19)	8.35% (n=34)

Table 5e. Top Reasons Given for “Unable to Collect”

Youth Outcome Questionnaire – Self Report – 2.0	PRE (n=529)	Administration date exceeds acceptable range	Clinician not trained in outcome measure	Client refused	Outcome measure unavailable	Client unavailable	Other reasons
		41.21% (n=218)	22.12% (n=117)	12.85% (n=68)	11.15% (n=59)	7.18% (n=38)	5.48% (n=29)
	POST (n=349)	Premature termination	Client unavailable	Invalid outcome measure	Lost contact with client	Administration date exceeds acceptable range	Other reasons
		40.11% (n=140)	16.62% (n=58)	14.61% (n=51)	8.31% (n=29)	7.45% (n=26)	12.89% (n=45)

Table 5f. Top Reasons Given for “Unable to Collect”							
Outcome Questionnaire – 45.2	PRE (n=117)	Not available in primary language	Outcome measure unavailable	Client refused	Client unavailable	Clinician not trained in outcome measure	Other reasons
		30.77% (n=36)	20.51% (n=24)	16.24% (n=19)	8.55% (n=10)	7.69% (n=9)	16.24% (n=09)
	POST (n=32)	Premature termination	Client unavailable	Lost contact with client	Invalid outcome measure	Client refused	Other reasons
		40.63% (n=13)	21.88% (n=7)	12.50% (n=4)	9.38% (n=3)	6.25% (n=2)	9.38% (n=3)

Table 6. Service Delivery Data – Clients Who Completed Seeking Safety		
Total Clients	Average Length of Treatment	Average Number of Sessions
(n=318)	32 weeks Range: 2-94 weeks (n=318)	41 sessions Range: 1-334 sessions (n=318)

Note: Completed Seeking Safety is defined as having a ‘yes’ for completion indicated in the PEI OMA.

Table 7. Client Outcome Data[±] – Clients who Completed Seeking Safety			
All Clients (n=318)			
	Percent of Clients Showing Reliable Change[±] from Pre-Seeking Safety to Post-Seeking Safety		
	Negative Change	No Change	Positive Change
UCLA PTSD-RI - Parent	1.92% (n=1)	80.77% (n=42)	17.31% (n=9)
UCLA PTSD-RI – Child/Adolescent	0.82% (n=1)	90.16% (n=110)	9.02% (n=11)
*UCLA PTSD-RI - Adult	0.00% NA	0.00% NA	0.00% NA
Youth Outcome Questionnaire - 2.01 (Parent)	16% (n=12)	38.67% (n=29)	45.33% (n=34)
Youth Outcome Questionnaire – Self Report – 2.0	14.63% (n=24)	42.07% (n=69)	43.29% (n=71)
Outcome Questionnaire-45.2	0% (n=0)	70.83% (n=17)	29.17% (n=7)

[±]Please see Appendix A. for a description of the Seeking Safety outcome measures and the outcome indicators (percent improvement in average scores; and, percent of clients showing reliable change).

Note1: Possible PTSD-RI range from 0-68, with a clinical cutpoint of 38.

Note2: Possible YOQ Total Scores range from -16-240, with a clinical cutpoint of 46.

Note3: Possible YOQ-SR Total Scores range from -16-240, with a clinical cutpoint of 47.

Note4: Possible OQ Total Scores range from 0-180, with a clinical cutpoint of 63.

*Aggregate outcome data based on fewer than 20 clients are not reported. Therefore data for the PTSD-RI Adult was not shown.

Note4: Positive Change indicates that the scores decreased from the pre to the post measures.

Appendix

Youth Outcomes Questionnaires (YOQ and YOQ-SR)

The Youth Outcome Questionnaire is a 64-item parent-report that assesses global distress in a child's/adolescent's life from 4-17 years of age. The YOQ-SR is the Self-report version of the YOQ and is completed by the child/adolescent. Total scores on both measures can range from -16 to 240. Total scores of 46 or higher are most similar to a clinical population on the YOQ. A total score of 47 is most similar to that of a clinical population on the YOQ-SR.

Outcomes Questionnaires (OQ)

The Outcome Questionnaire is a 45-item self-report that assesses global distress in a client's life from ages 19 and older. Total Scores on this measure can range from 0 to 180, with scores of 63 or higher indicating clinical significance.

Post-Traumatic Stress Disorder Reaction Index (PTSD-RI)

The UCLA Post-Traumatic Stress Disorder Reaction Index (PTSD-RI) is a 20-items measure that assess the frequency of occurrence of post-traumatic stress disorder symptoms during the prior month according to child/youth/adults self-reports and the reports of their parents/caregivers (for children ages 3-18).

Possible Total PTSD Severity Scores range from 0-68; and scores of 38 or higher have the greatest sensitivity and specificity for detecting PTSD.

Reliable Change Index (RCI)

When comparing Pre and Post scores, it is very helpful to know whether the change reported represents the real effects of the treatment or errors in the system of measurement. The Reliability of Change Index (RCI) is a statistical way of helping to insure that the change recorded between pre and post assessments exceeds that which would be expected on the basis of measurement error alone. The RCI has been calculated using the Jacobson and Truax (1991) method and indicates when change exceeds that which would be expected on the basis of error at the $p < .05$ probability level. For a more in-depth discussion of Reliability of Change see Jacobson, N. S., & Truax, P. (1991). Clinical Significance: A statistical approach to defining meaningful change in psychotherapy research. *Journal of Consulting and Clinical Psychology*, 59, 12-19. Also see Wise, E. A. (2004). Methods for analyzing psychotherapy outcomes: A review of clinical significance, reliable change, and recommendations for future directions. *Journal of Personality Assessment*, 82(1), 50-59.

The number and percent of clients experiencing positive change, no change and negative change are recorded in table 6. Healthful change in each of the measures cited here means that scores have decreased in value from pre to post test administrations (i.e. recorded a negative change on the RCI). To help avoid confusion, healthful reliable change is presented as positive while unhealthful reliable change is presented as negative change.