Riverside County Department of Mental Health
Mental Health Services Act (MHSA)

Data Collection Guidelines
Three Types of Outcomes Assessments:
- Initial (Baseline/History) - Partnership Assessment Form (PAF)
- Periodic Follow-Up on Outcomes – Quarterly Assessment Form (3M)
- Continuous Follow-up on Core Outcomes – Key Event Tracking Form (KET)

It is important that information be collected as accurately and completely as possible. Forms should be completed by the Personal Service Coordinator (PSC) to ensure that the data accurately reflects what is occurring for the Partner.

Four Target Populations:
FSP data is collected according to four age groups: Child/Youth (0-15), Transition Age Youth (16-25), Adult (26-59), Older Adult (60+).
- Four age groups each with a set of PAF, 3M, and KET forms to select from depending on the age of the Partner.
- Forms are selected based entirely on the age of the Partner, not their involvement in a particular program.
- Once a Partner reaches the maximum age for a particular set of assessments, the next set of 3M or KET assessments are selected for use based on the next appropriate age range.
For example: A Partner enters the FSP program at age 25 and a Transition Age Youth Partnership Assessment Form (TAY PAF) is completed. The Partner turns 26 years old one month later and then moves from his parent’s home to an apartment a few weeks later. Since the change in residency is a key event a Key Event Tracking Form would be completed. The appropriate KET form would be the Adult KET (not the TAY KET).

Full Service Partnership Outcomes Assessment Forms:
Please access form copies ONLY from PDF files available on ImageNet or from RCDMH Research and Evaluation.

Partnership Assessment Form- Collects initial baseline history
The initial baseline history on the PAF is collected only once when the client is enrolled into an FSP program. Exception: A second PAF form should be completed on a client when there has been a lengthy break in service of a year or more. PAF data can be collected over more than one session with a client. PAF forms must be collected before any other outcome assessment forms (3M, KET). PAF data collection must be completed within 60 days of the partnership enrollment date: which is the date the Partner was enrolled into a Full Service Partnership program. Programs will need to determine the exact date the client is determined to be a Full Service Partnership client. The Partnership Date will be used when completing the PAF form.

PAF Sections: Complete all sections
Residential Status-
Tonight - Select the ONE setting that best describes where the Partner will be residing on the evening of the day the partnership is established. This is the Partnership Date described above.
**Yesterday** – Select the ONE setting that best describes where the Partner was residing the day before the Partnership date (as of 11:59pm). The day before the **Partnership Date**.

**Last 12 months** – Record the number of occurrences and the number of days the Partner resided in each setting. The total number of days must equal 365. At least one day must be in the one setting that was selected for **Yesterday**.

**Prior to last 12 months** – Record any residential setting the Partner resided in over his/her lifetime. Mark all that apply.

“During the last 12 months” is defined as the 12 months prior to the **Partnership Date**. If the Partner cannot report residential status for any timeframe use the unknown category.

**Education**
Record the highest level of education COMPLETED. For Adults indicate any education involvement.

The Child/Youth and TAY PAF forms have two data sections for educational status depending on whether the Partner is required to attend school. Clinical staff determines whether school attendance is required.

- **Youth required to attend school** – Estimate attendance level currently and during the past 12 months. NOTE: During the summer break; focus on estimating attendance based on when the youth was last in school.
- **Youth not required to attend school** – Estimate the number of weeks for each educational setting. Indicate the number of weeks for all categories that apply. The total number of weeks in any one category cannot exceed 52 weeks. The total number of weeks across all categories can exceed 52 weeks.

**Employment**
Two sections to collect employment information (during the last 12 months and current employment).

- Record the number of weeks for each employment setting.
- The total number of weeks in any one category cannot exceed 52 weeks.
- The total number of weeks across all categories can exceed 52 weeks.
- Estimate the average hours per week and the average wage per week for each category.
- If a Partner had two different jobs within the same category with different wages, calculate the average hourly wage using both wages.
  Example: A Partner is paid $10/hour at one job in supported employment and $8/hour at another job in supported employment so the average hourly wage would be “$9 hour” ($10 + $8 divided by 2 jobs).
- **NOTE for Current Employment** – There is a section to indicate if the Partner is not currently employed.

**Sources of Financial Support**
Mark all sources of financial support that apply.

**Legal Issues/Designations**
Two sections recording information for legal issues and status over several time frames (currently, during the past 12 months, prior to the last 12 months). A third section records the dependent status (W & I code 300, Foster Care, Adoption, Reunification) of the Partner and the Partner’s child(ren). The Partner’s current dependent status is recorded only for Child/Youth and TAY Partners. Most questions require a simple “YES” or “NO” answer.

- **Justice system involvement** –
  If the Partner has never been arrested fill in a “0”.

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• Conservatorship / Payee Information – Conservatorship is determined by court order and a conservator is appointed to oversee the care of the individual. Payee is an authorized representative who oversees the revenue resources on behalf of the Partner.
• Dependent (W&I Code 300 Status) information (Child/Youth and Transition Age Youth forms) indicates whether the Partner is CURRENTLY a dependent of the court.
• For custody information on the children of the Partner indicate the total number of children the Partner has in each of the categories. The response options refer to the current custody information, as of the partnership enrollment date.

**Emergency Intervention (emergency room visit, crisis stabilization)**
There are two categories for recording emergency intervention information
- Physical Health - Record the total number of times a Partner received an emergency intervention during the past 12 months.
- Mental Health/Substance Abuse - Record the number of times a Partner received a mental health and/or substance abuse related emergency intervention over the past 12 months.

**Health Information**
This section gathers information about whether the Partner has a primary care physician. A primary care physician for the purposes of this assessment is the licensed medical professional the Partner would contact with regard to his or her health care.

**Substance Abuse**
This section gathers information about whether the Personal Service Coordinator has determined that the Partner has an active co-occurring mental health and substance abuse problem.
- Substance abuse services also include participation in Narcotics Anonymous and Alcoholics Anonymous.

**Quarterly Assessment Form (3M)**
The Quarterly Assessment Form is completed every three months after the partnership is established. Updated information is collected about changes in education, sources of financial support, legal/issues/designations, health status, substance abuse, and ADL / IADL (Older Adults only).
- The first quarterly assessment is due three months (90 days) after the date the partnership was established. The next assessment is due 6 months after the partnership was established, then again at 9 months, at 12 months, at 15 months and so on.
- The Quarterly Assessment Forms can be completed 15 days prior to the due date and up to 30 days after the due date.
- If the Partner is unavailable during the 45 day window surrounding the 3M due date, skip that Quarterly Assessment Form and complete one in the next cycle.

**Key Event Tracking (KET)**
The KET provides a snapshot of changes in key quality of life areas that are tracked on a continuous basis throughout the course of the Full Service Partnership. The following key areas are tracked on the KET: administrative information, residential, education, employment, legal issues/designations and emergency interventions.
- There is no limit to the number of KET forms that can be submitted.
- KET forms should be submitted after submitting the Partnership Assessment Form (PAF). ImageNet will allow a partially completed PAF to be saved and then a KET form can be submitted and saved in ImageNet. The date of any KET event should fall after the Partnership date on the PAF.
- KET forms should be completed as soon as events are known or reported to the Partnership Service Coordinator.
- When completing a KET, complete only the sections where a change has occurred for the Partner.
- Key events that occur in different domains concurrently can be reported on one form. For Example: A Partner who was unemployed and living in a board and care facility at the time the PAF was completed obtains a job and moves to an apartment about two weeks later. In this case there are changes in two different domains but one KET can be completed because these changes happened in two different domains at the same time.
- When two key events occur in one domain, a KET must be submitted for each instance. For example: A Partner moves from a homeless shelter to a foster home and then to a group home after the PAF is completed. A KET should be completed each time the client’s address changes. Do not put two residential status changes on one form.
- Changes in Administrative Information:
  This section is used to record changes in RU, changes in Full Service Partnership Program, changes in Partnership Service Coordinator, and Partnership Status Changes (Discontinuance or Re-establishments).
  - RU Changes- A KET should be completed if a client changes RU within an FSP Program. e.g. if a client in the Mid-County MDFT FSP Program changes to the Western MDFT program. More than likely when the RU changes the Partnership Service Coordinator will also change. If there is no break in service it is not necessary to indicate discontinuance/re-establishment.
  - FSP Program changes- A KET should be completed if a client changes FSP Program for example changes from the Multidimensional Family Therapy FSP to Integrated Service Recovery Center FSP. In this case the RU, FSP Program Id and Personal Service Coordinator will change. If there is no break in service it is not necessary to indicate discontinuance/re-establishment.
  - Partnership Status Change- A KET should be completed when the client discontinues the FSP program or comes back into service to an FSP program (re-establishment). Discontinuance is used to indicate a break in service (client drops out of FSP Program, or completes services). Re-establishment is used to indicate when a partner has re-enrolled in the FSP program. A KET form is used to indicate re-establishment as long as the break in service is not more than one year from discontinuance. If discontinuance has been longer than one year than a new PAF initial form is submitted rather than re-establishment with a KET form.
**Additional KET examples:**
A Partner moves from one address to a different address but the type of residence does not change. A KET would be completed each time the Partner moves from one address to another.

A Partner is admitted into an acute psychiatric hospital and then is released 5 days later. A KET would be completed when the Partner is admitted and another KET would be completed upon release from the facility to reflect the changes in residential status.

**Appendix**

**3M Quarterly Assessment: Month Due Chart**

A Quarterly Assessment (3M) should be filled out every three months on every enrolled Partner. The date the partnership was established is the due date (AB2034 consumers the due date is the enrollment date).

Use the 3M chart below to determine the months in which the due date would occur. There is a 45 day window (15 days prior and 30 days after) the three month due date to complete the 3M. If the form is not completed and entered into ImageNet by the end of the 30th day after the due date, skip that 3M and complete the next one when it is due.

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