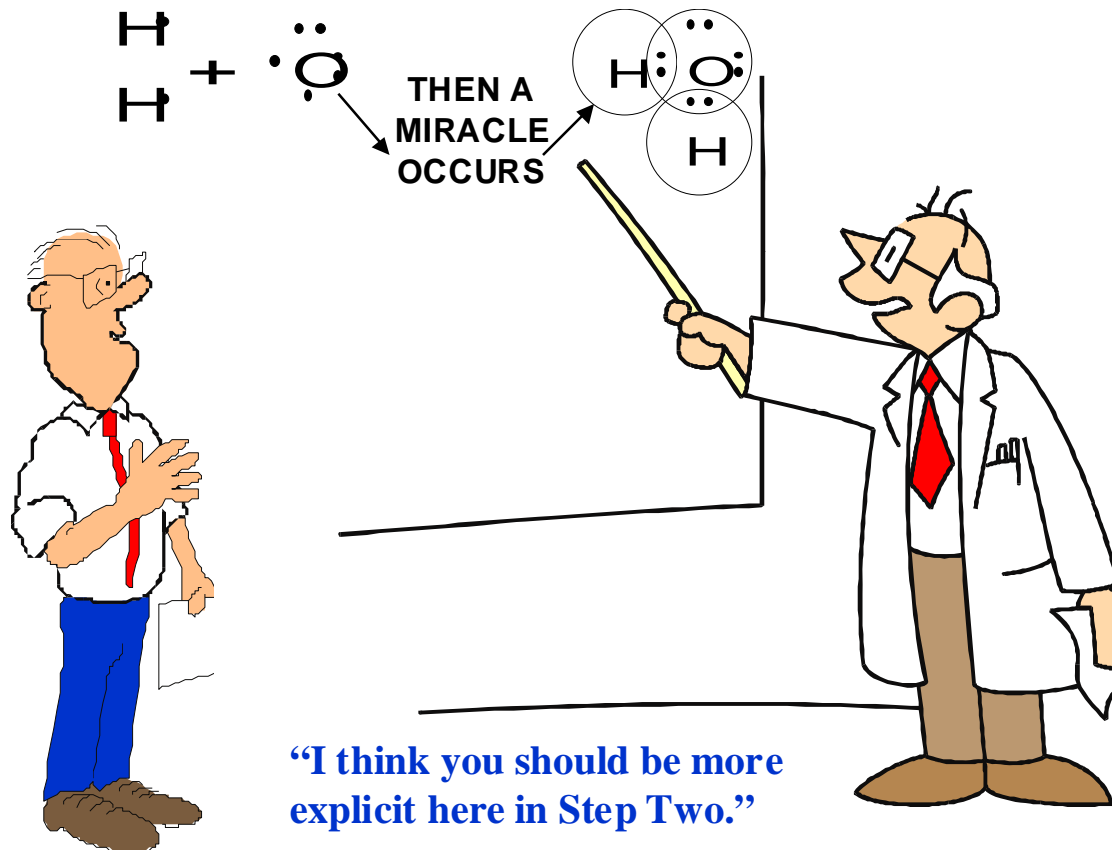


Making Sense of Performance Measures



Contact Information

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Materials

- You will find the following materials at:
 - DARMHA Documents –
<https://dmha.fssa.in.gov/DARMHA/mainDocuments>
 - SFY 2016 Performance Measure Definitions Manual
 - Understanding Scorecard Raw Data document
 - New User Form (form to get access to DARMHA)
 - DARMHA Provider Page –
<https://dmha.fssa.in.gov/DARMHA/ProviderPage>
 - Webinar Slides
 - Outcome Reports
 - In DARMHA,
<https://dmha.fssa.in.gov/DARMHA/>
 - Monthly Scorecard
 - Scorecard Export

Motivation to Make Changes

- Improvement in One Domain
 - Provider Comments - Measure not sensitive to change. Many items could have improved for the person but the change was not equal or greater than the Reliable Change Index (RCI) so therefore it is not counted as improvement.
- Employment Measure
 - Provider Comments - Not really adding value the way it is calculated
- Substance Abuse, Criminal/Juvenile Justice, School Performance Outcomes
 - Provider Comments - Lots of variability between providers. Very small numbers included in measure. Difficult to show improvement

Measures Removed for SFY 2016

- Employment - SMI
- Employment - CA
- School Behaviors - SED
- Criminal Justice - SMI
- Criminal Justice - CA
- Juvenile Justice Involvement – SED
- Substance Abuse - SMI
- Substance Abuse - CA
- Substance Abuse - SED

What are CANS and ANSA?

- CANS – Child and Adolescent Needs and Strengths - Indiana utilizes 2 CANS Tools
 - **Birth to 5 years** (Contains 59 required questions and 41 extension module questions)
 - **5 – 17 years** (Contains 66 required questions and 97 extension module questions)
- ANSA – Adult Needs and Strengths Assessment
 - **For 18 year olds and older** (Contains 57 required questions and 70 extension module questions)

Purpose for the CANS and ANSA

The CANS and ANSA are holistic assessment tools designed to support individual treatment plans, to monitor progress and to evaluate and improve services.

Who uses the CANS or ANSA

- DMHA providers
- Department of Child Services
- DCS residential providers
- Some schools

Domains

- **ANSA** - the domains included are Life Functioning, Behavioral Health Needs, Risk Behaviors and Strengths.
- **CANS 5-17** - the domains included are Life Functioning, Behavioral Health Needs, Caregiver Strengths & Needs, Risk Behaviors and Strengths.

Rating Needs in the CANS/ANSA

**Items Stand
Alone -
Clinically
Meaningful**

Rating	Level of Need	Appropriate Action
0	No Evidence of Need	No Action
1	Significant History or possible need which is not interfering with functioning	Watchful Waiting, Prevention, Further Assessment
2	Need Interferes with Functioning	Intervention
3	Need is Dangerous or Disabling	Immediate and/or Intensive Action

Rating Strengths in the CANS/ANSA

**Items Stand
Alone -
Clinically
Meaningful**

Rating	Level of Strength	Appropriate Action
0	Centerpiece Strength	Central to Planning*
1	Strength Present	Useful in Planning*
2	Identified Strength	Must be Built or Developed**
3	No Strength Identified	Strength Creation or Identification may be Indicated

Other Rationale for Change

- The Praed Foundation (2014, August) ‘published’ *TCOM Report Suite: Minimum Standards for Vendors and Systems* detailing standard reporting and use of CANS and ANSA information.
- In February 2015, Dr. Lyons mentioned that another way to measure outcomes with CANS and ANSA is to look at decreasing actionable needs or building strengths.
- Report Workgroup, “Meaningful use of the CANS and ANSA” - this workgroup consists of provider staff (QI, IT and SuperUsers) and the Department of Child Services.
 - The purpose for this group is to improve access to meaningful CANS & ANSA information: to make decisions, monitor progress & improve outcomes.
 - The idea is that the same outcomes and performance measures can be viewed at different levels for different reasons. (Clinician, Program, Team, EBP usage, Provider, Statewide)

New Ways to Measure Change

- ✓ **Resolved Actionable Need (2/3 → 0/1)**
- ✓ **Usable Strength Built (2/3 → 0/1)**

Definitions:

“Actionable Need” = Rating of ‘2’ or ‘3’

“Usable Strength” = Rating of ‘0’ or ‘1’

Improvement in One Domain

Calculation

- First, average the scores in a domain and multiple by 10 for both the Time 1 and Time 2 assessment.
- Second, subtract the Time 2 domain average from the Time 1 domain average.
- Third, compare this number to the RCI. If equal to or greater than the RCI, then there is improvement.

RCI – Reliable Change Index – one method that can be used to determine how much change is large enough to be categorized as real change

Improvement in One Domain with Additional Calculation

- **Step 4: Within the improved domain,** look for resolved Actionable Needs, scores of “2” or “3” in Time 1 and scores of “0” and “1” at Time 2. If there are resolved actionable needs within the domain, then record would count as improvement.

SMI Example – Not RCI Improvement

Time 1 – 5/27/14

Time 2 – 5/20/15

Life Functioning Domain		
Physical/Medical	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 ✓
Family Functioning	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 ✓
Employment	<i>Vocational/Career Module is required.</i> <input type="radio"/> NA <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3	<i>Vocational/Career Module is required.</i> <input type="radio"/> NA <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3
Social Functioning	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3
Recreational	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 ✓
Intellectual/Developmental	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Sexuality	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Independent Living Skills	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 ✓
Residential Stability	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Legal	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Sleep	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 ✓
Self-Care	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3
Decision-Making (Judgment)	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Involvement In Recovery	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Transportation	<input type="radio"/> 0 <input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Medication Involvement	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Parental/Caregiver Role Functioning	<input checked="" type="radio"/> NA <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input checked="" type="radio"/> NA <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3

Time frame for Improvement in One Domain

- With this measure, all agreements will have six month time frame (SMI no longer has a year time frame).
- Time 1 is the assessment immediately prior to the Time 2 assessment, unless the date for that assessment is less than 120 days before Time 2, then look for an assessment more than 120 days before Time 2, generally the next prior assessment. If there is not an assessment greater than 120 days before, the oldest assessment is used.

Questions

- What modules are used for Improvement in One Domain?
 - The data used for this calculation did not change. We use the main domains (Functioning, Behavioral Health, Risks, Strengths and Caregiver (for children)).
- Are there new Reliable Change Indexes (RCI)?
 - Yes, you can find the new RCIs in the Performance Measure Definitions Manual.
- Does there have to be improvement in the score averages between T1 and T2 for a domain, in order to have resolved actionable needs count as improvement?
 - Yes, T2 domain has to have a lower average score in order for resolved actionable needs to count as improvement.

New Measure - Improvement in One Domain for Episodes Closed During the Reporting Period

- Calculated for episodes that closed during the reporting period.
- Uses the initial assessment or the calculated baseline

Reset Baseline Strategy



- Reset Baseline = Time 1 (T1) or Time 2 (T2)
- The assessment with the highest level of identified needs = Mean [Behavioral Health Symptoms, Life Functioning, Risk Behaviors, Caregiver (for youth)]

New Measure - Strength Development

- Using the same time periods (approximately every six months) as the Improvement in One Domain.

Calculation

- Step 1: For Time 1 and Time 2, items in the Strength Domain are recoded. Scores of “0” and “1” are recoded to “1.”
- Step 2: Time 1 count is subtracted from the Time 2 count. An answer greater than zero would be counted as improvement.

Community Integration

- It focuses on important items (Social Connectedness, Community Connection, Natural Supports, Resourcefulness, **Social Functioning**, Job History, **Recreational**, **Family Functioning**, Volunteering, Educational, **Employment**, Family Strengths, Spiritual/Religious and **Involvement in Recovery**) that are indications of an individual's recovery through integration in the community in which the individual lives.
- We kept this measure; however, we changed how it is calculated.

Calculating Community Integration

- **Step 1:** In Time 1 and Time 2, items are recoded. For Strengths, scores of “0” and “1” are recoded to “1.” For Needs, scores of “2” and “3” are recoded to “1.”
- **Step 2:** For Strengths, Time 1 count is subtracted from the Time 2 count. For Needs, Time 2 count is subtracted from the Time 1 count. Add both results together, an answer greater than zero would be counted as improvement.

Reassessment Measures

- The expectation is still the same; reassessing individuals approximately every six months. However, recognizing there a lot of factors that affect reassessment timing (MRO, other programs, appointment cancelations), the grace period has been extended from 210 to 240 days.
- For some providers, the biggest factor creating lower percentages is old episodes of care that should be closed because the consumer is not being seen.
- These measures will continue to exclude Medication Only consumers.

People Served

- Targets remain the same as in SFY 2015
- Changes coming for the CA population
 - In order to count as a CA Consumer, the consumer will need more than an assessment in encounters. Also, the consumer will need substance abuse treatment services.

Gatekeeper Measures

- The gatekeeper measures will remain the same as last fiscal year.

Other Critical Decisions

- Selection of SMI assessments – Removed the at least 300 days
- Targets – Determined outcome targets by running new measures on SFY 2015 data
- Weights – Removed weights

Other Data DMHA Will Monitor

- Count of people served in each county
- Count/percentage of duplicate assessments

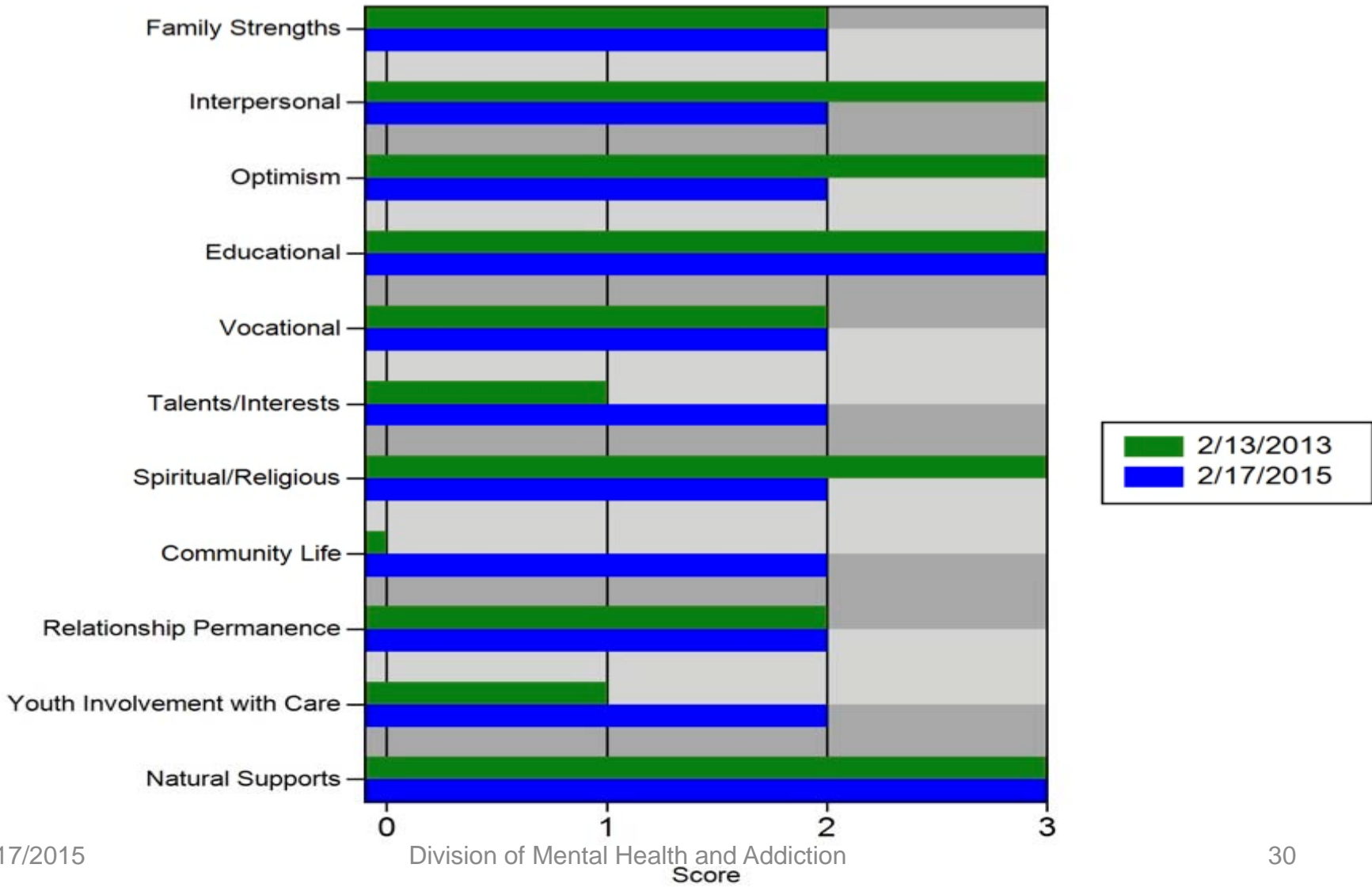
CANS and ANSA Reports

Consumer Level Reports

Consumer Outcomes by Item

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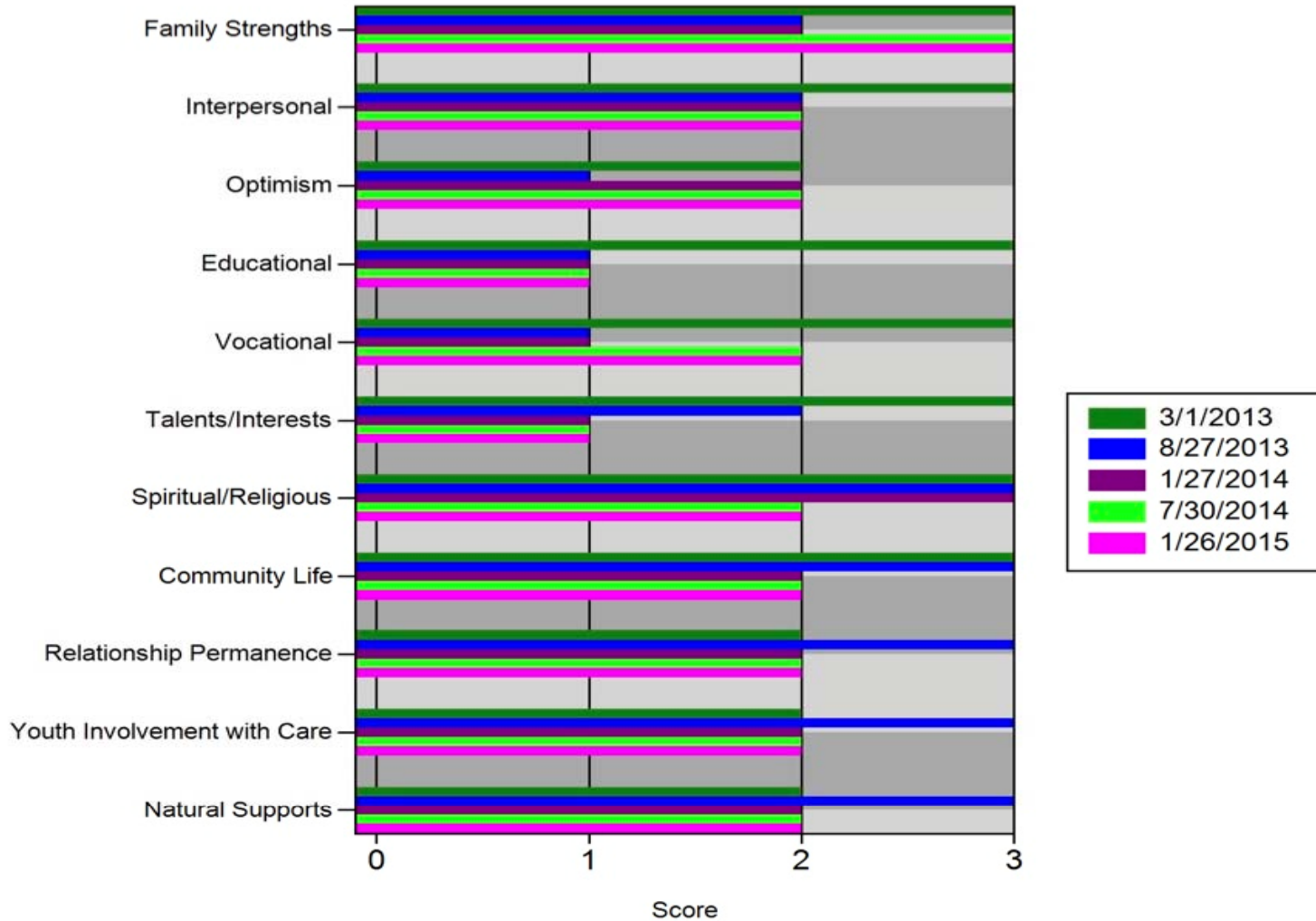
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Consumer Outcomes by Item

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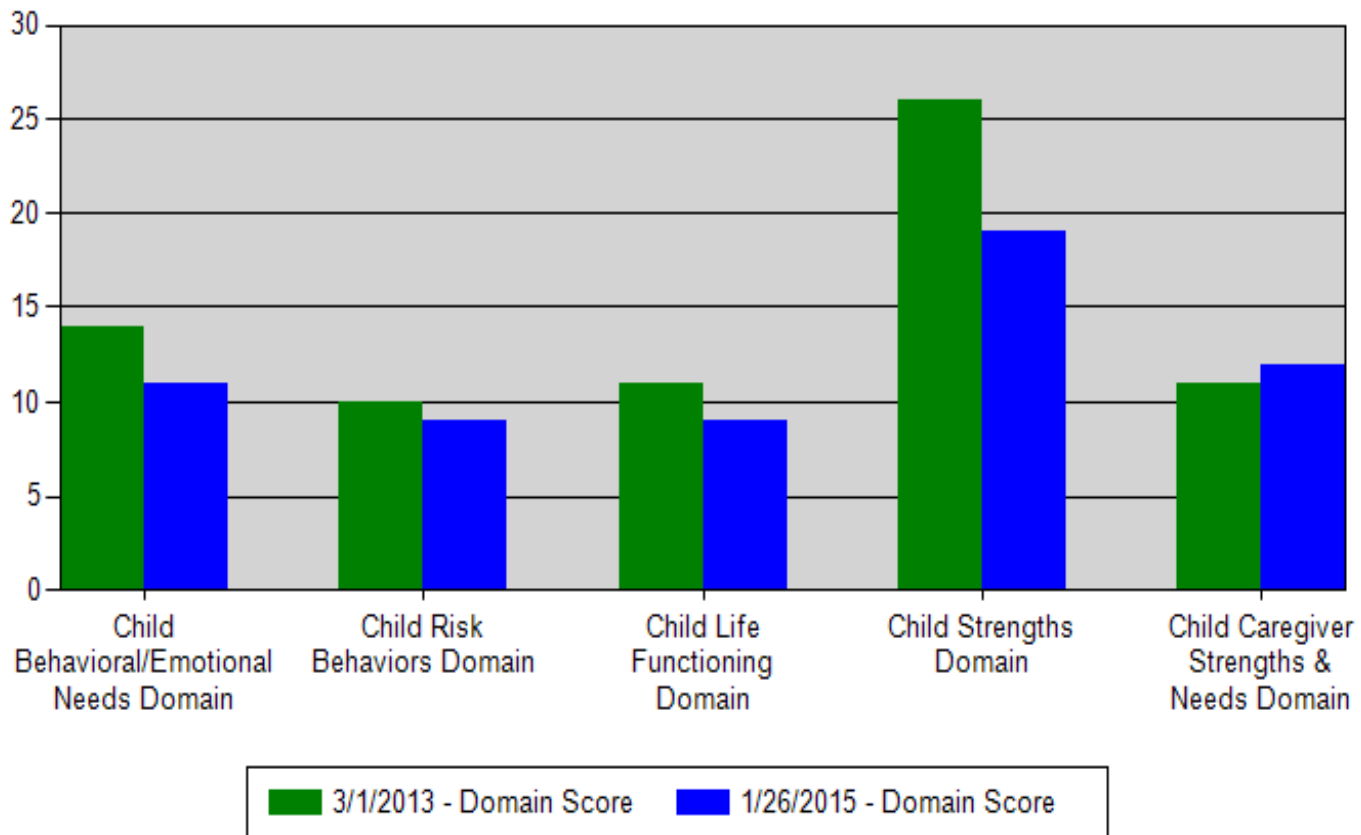
Child Strengths Domain



Consumer Outcomes by Domain

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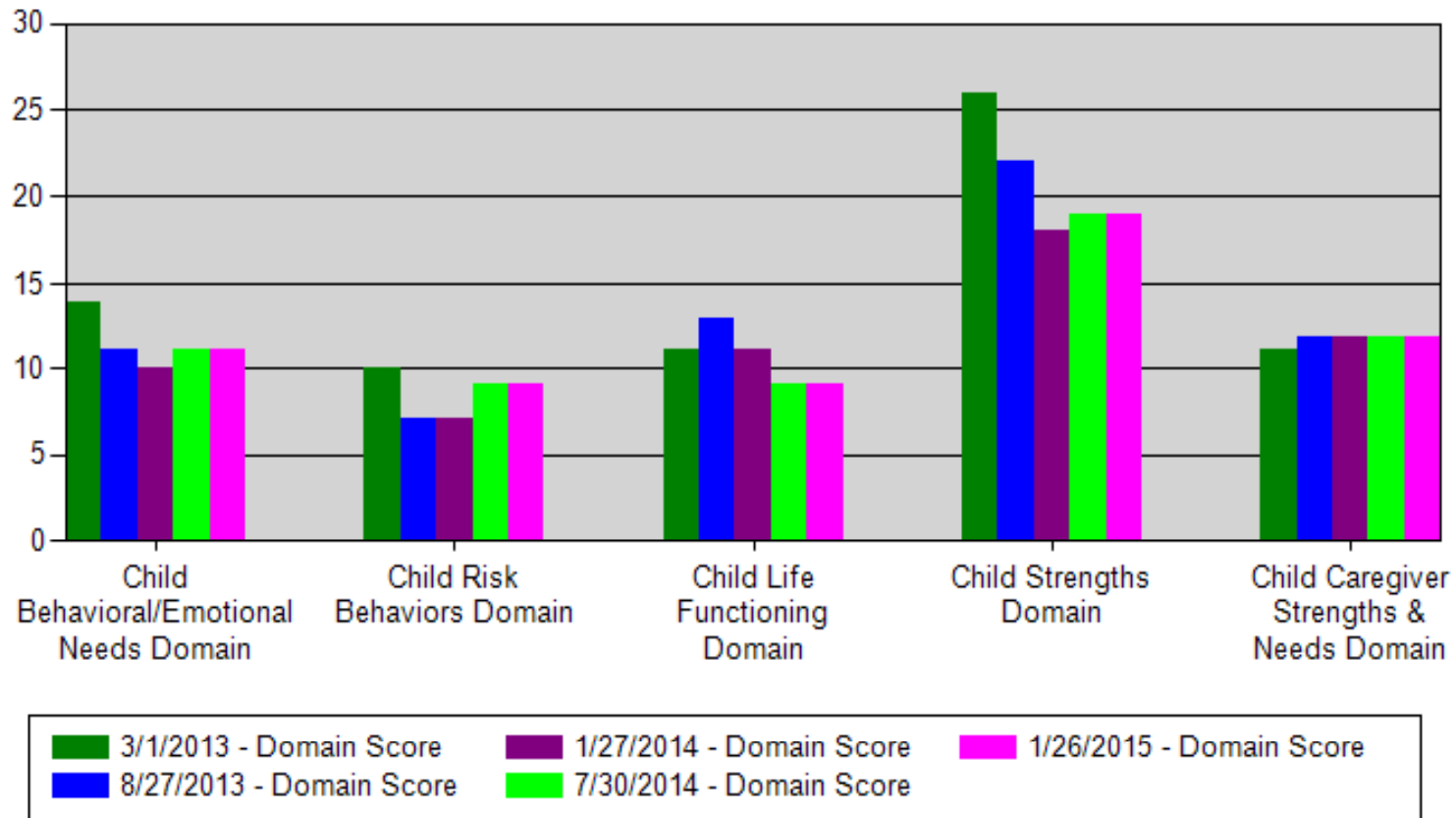
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Consumer Outcomes by Domain

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New Reports (Access to Information)



Actionable Needs

Immediate or Intensive Action Warranted

- Anger Control (3)
- Employment (3)
- Legal (3)
- Involvement in Recovery (3)

Action or Intervention Warranted

- Impulse Control (2)
- Antisocial Behavior (2)
- Adjustment to Trauma (2)
- Criminal Behavior (2)
- Physical/Medical Functioning (2)

ANSA Ratings in parentheses.

Assessment Date:	3/12/2015
Assessment Type:	ANSA
Assessment Reason:	Initial
Assessor:	Wendy Harrold
Consumer Name:	Bruce Wayne
Internal ID:	34562

Usable or Buildable Strengths

Important Strengths

Family Strengths (0)

Already Usable Strengths

Natural Supports (1)
Resiliency (1)

Buildable Strengths

Social Connectedness (2)
Optimism (2)
Talents/Interests (2)
Volunteering (2)
Community Connection (2)

Actionable Needs



Impulse Control
Antisocial Behavior
Adjustment to Trauma
Criminal Behavior
Physical/Medical Functioning

Assessment Date:	3/12/2015
Assessment Type:	ANSA
Assessment Reason:	Initial
Assessor:	Wendy Harrold
Consumer Name:	Bruce Wayne
Internal ID:	34562



Anger Control
Employment
Legal
Involvement in Recovery

Usable or Buildable Strengths



Family Strengths



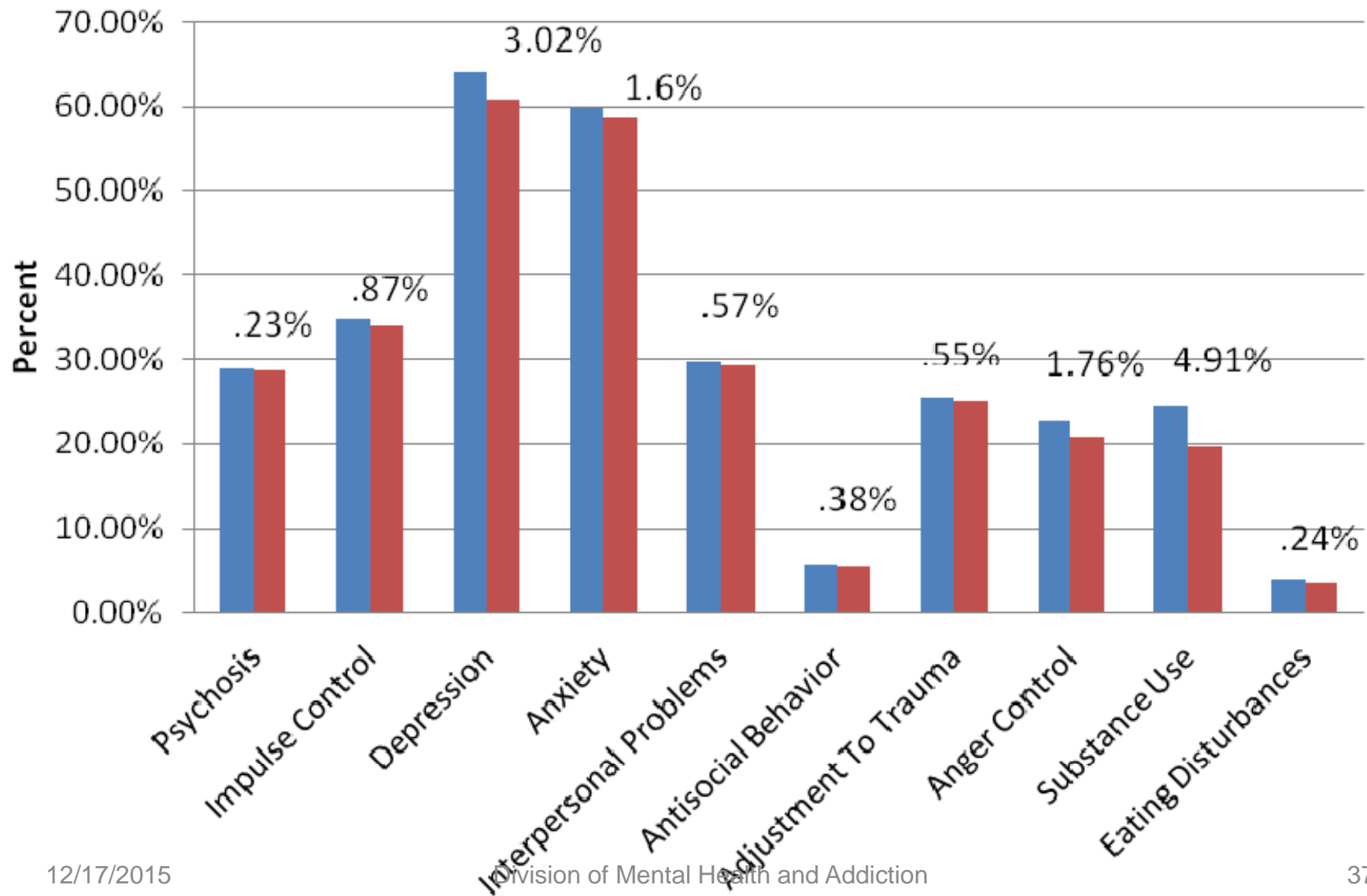
Natural Supports
Resiliency



BUILDABLE

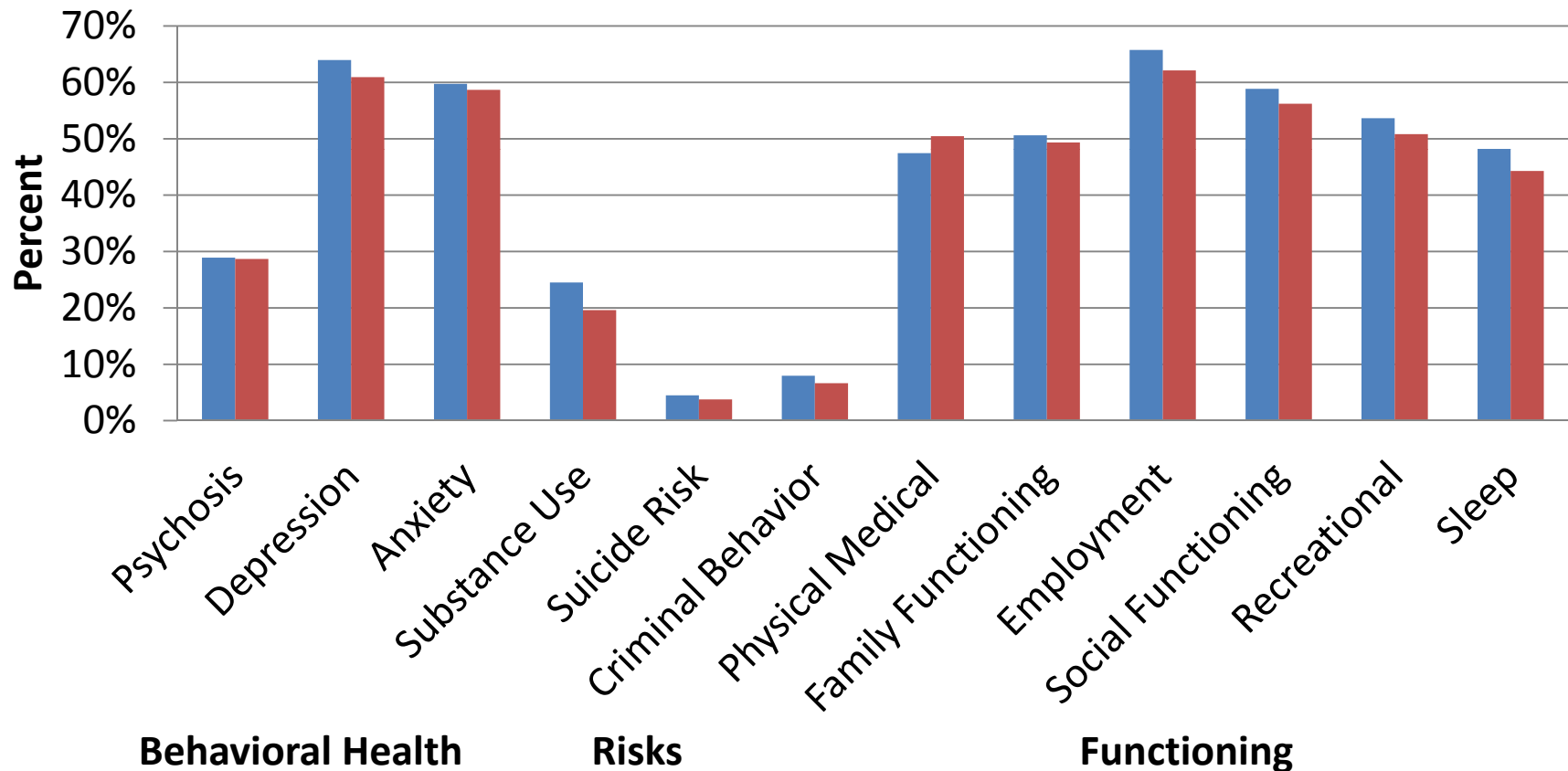
Social Connectedness
Optimism
Talents/Interests
Volunteering
Community Connection

Resolved Behavioral Health Symptoms over 12 Months, n = 47,768



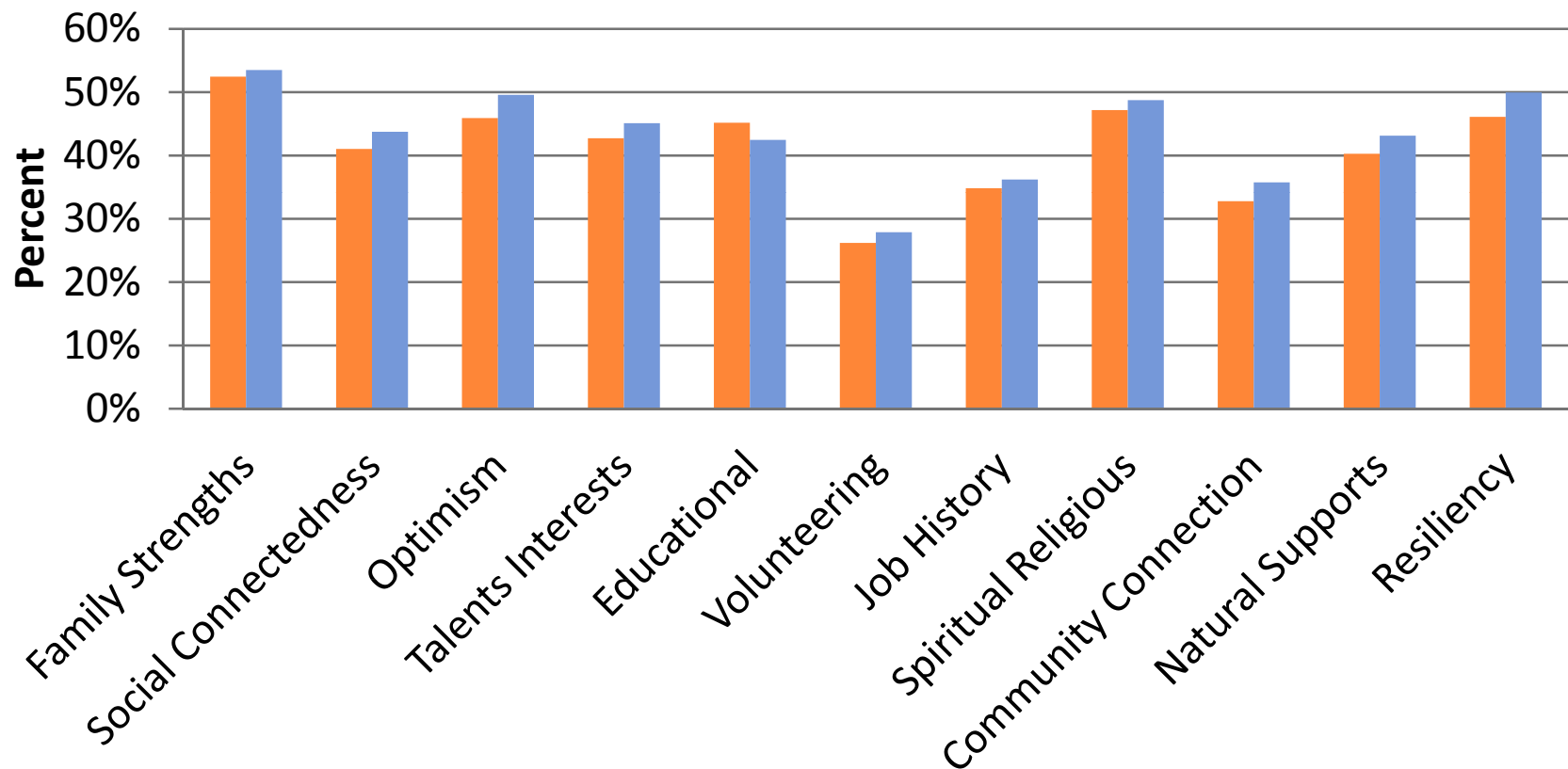
Key Intervention Needs over Time

Change in Needs over Time (about 12 months)
Adults, n=47,768



Usable Strengths – Adults SFY2015 (n=47,768)

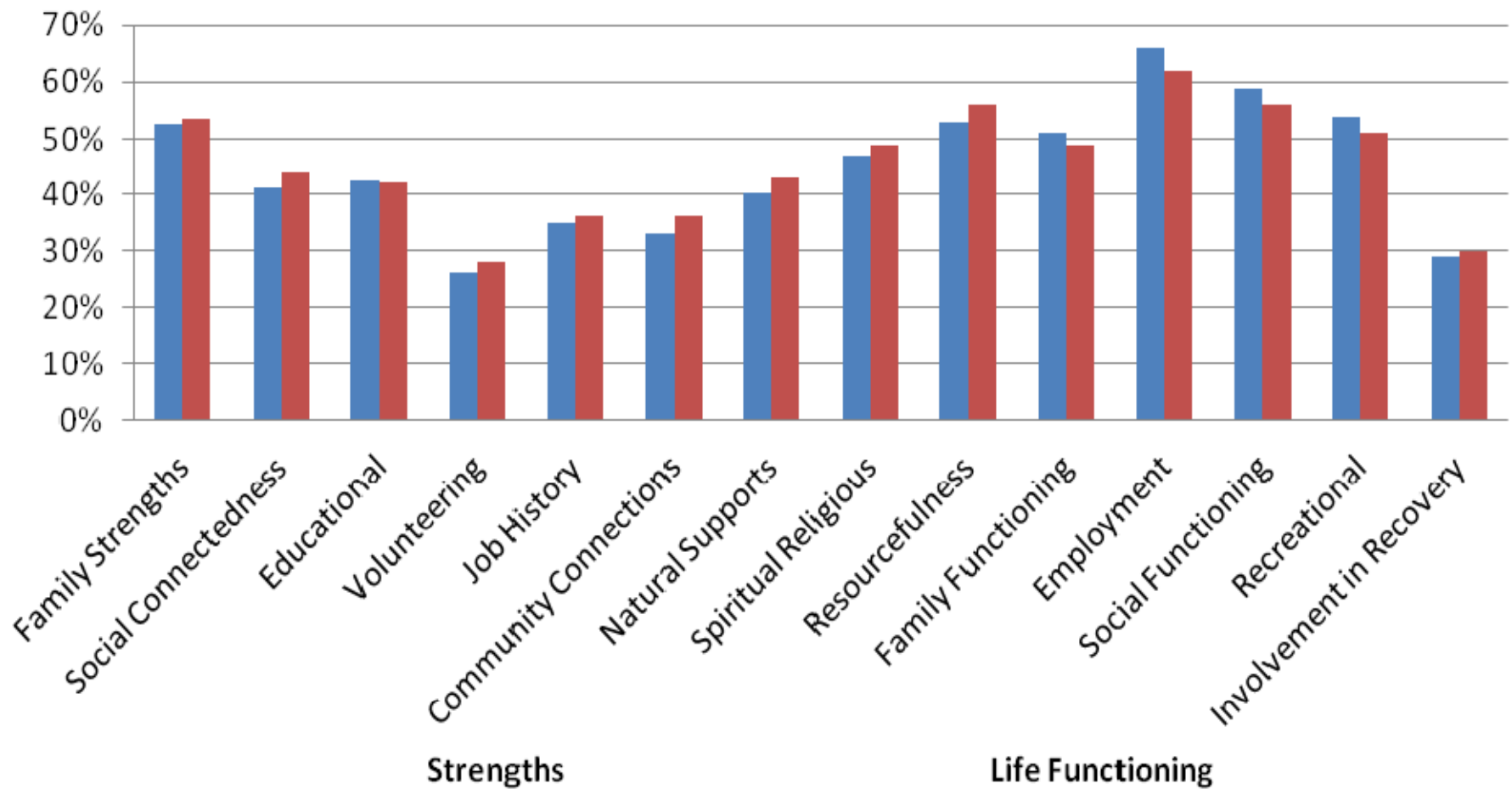
Strength Development over Time (Shows T1 and T2)



Community Integration over Time

Percent Usable Strengths & Actionable Needs

Adults n=47,768



Have Questions? Need Help?

- We are available to provide technical assistance.
 - We can help you understand the performance data and suggest ways to increase your performance.
 - We can help you with CANS/ANSA issues and training.