

Reports 102 - Using Program Management Reports

We will focus on providing you with an opportunity to ask questions and see how to navigate the reports on the website so you can explore on your own. The most important points will be covered here. It is important that you review and become familiar with the FAQs, as many procedures and questions that you may have are included there. You can find them on the homepage of www.mstinstitute.org.

Objectives of the Demonstration:

Today, we will go over the following –

- Monitoring Caseload
 - MST Census report
 - MST Caseload report
- Monitoring Outcomes
 - Case Discharge Summary Report
- Monitoring Overall Program Performance
 - Program Review Form
 - Program Drift Monitoring Report
 - Program Implementation Data Report
 - MST PIDR Summary Report

Please go to www.mstinstitute.org and click on “**[Logon to Enhanced Demonstration Website](#)**” and print off the Demonstration Login Instruction page prior to the demonstration.

For today’s training, we will be logging in as a System Manager and looking at the menus and reports available to that user.

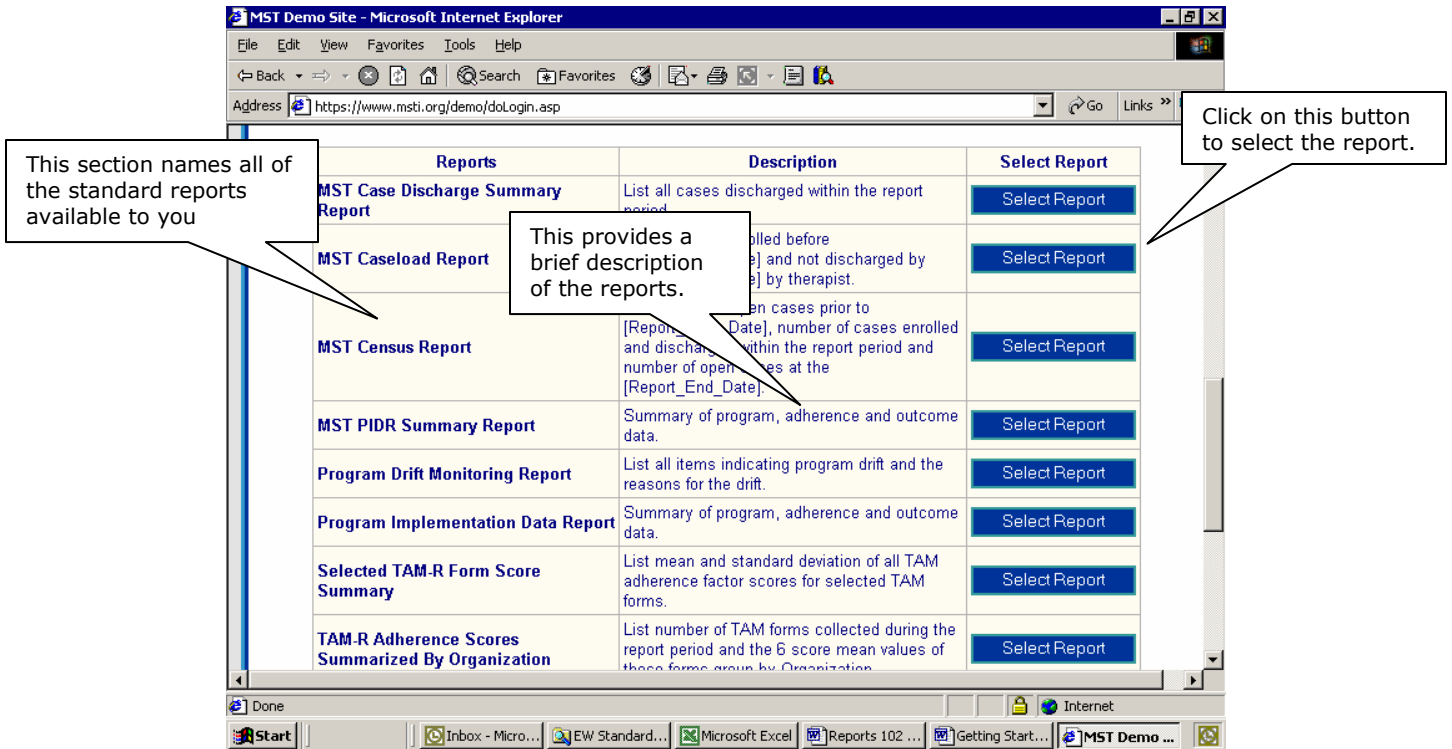
Log in as a Organization System Manager on the DEMO site:

<https://www.msti.org/demo/Index.asp>

Organization System Manager login: osm1/osm1

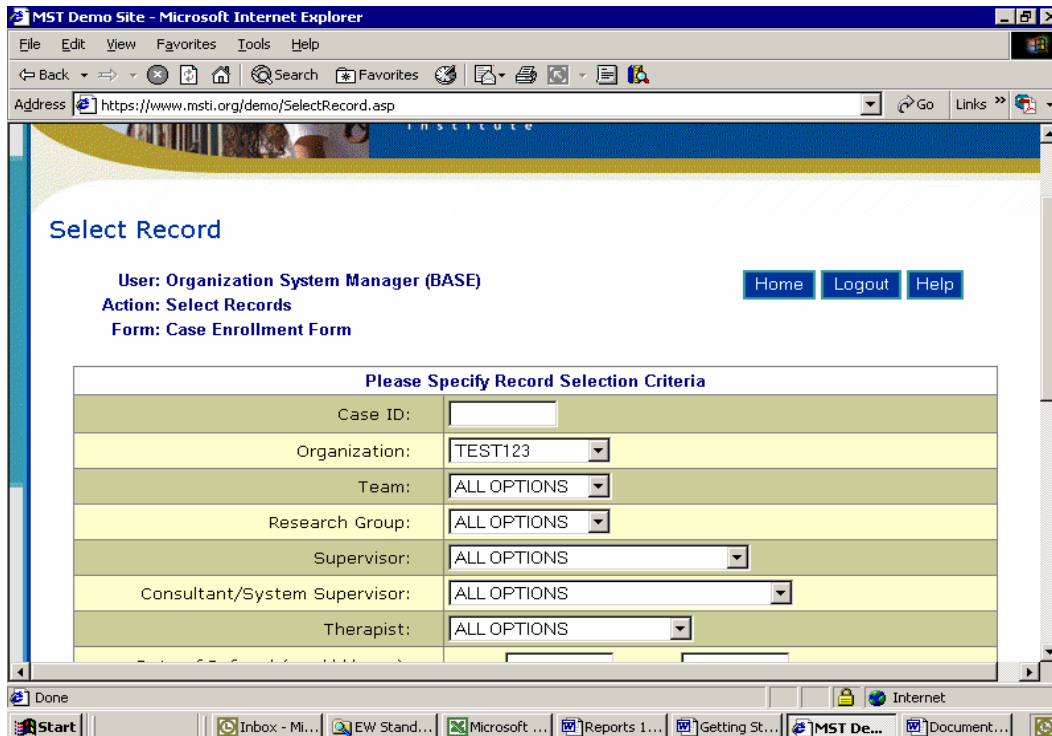
Before we begin, please take a minute to review the standard report menu in yellow on bottom half of the www.mstinstitute.org main menu page below. Standard reports are different from list reports which are summaries of raw data. Standard reports are canned/standard formats for reports providing summaries of the data of interest and are generated by choosing “Select Report” next to the desired item on the menu.

Screenshot #1:



Once a report is selected from the standard report menu, the system will always take you to the **Select Records** screen. The **Select Records** screen allows the user to specify the form, organization, team, research group, etc. he or she wants to report on. Furthermore, the **Select Records** screen enables the user to run a report on a certain period of time.

Screenshot #2



Notice that some of the information may be already selected on the **Select Records** screen. This is based on the login code. However, if there are multiple teams, supervisors, or therapists for this organization (*see the drop down list*) you may prefer to select one in certain fields depending on the type of report you are attempting to run. Some of the drop down menus may only allow one or certain selections. This would reflect that there is only information in the database for these selections.

The Research Group drop down can be left with the default value of "ALL OPTIONS" unless your organization wants to be able to run a report on a certain group that has been pre-selected. Then you would select the letter from the drop down that symbolizes the particular group you want to run a report on.

Standard Reports do not allow one to sort the order of information on the reports because these reports are "canned" and are produced in a standard way. Therefore, the sorting functions (e.g., "Sort By") are not functional for the standard reports. The date range at the bottom of the **Select Records** screen is required to customize a report.

Monitoring Caseloads

Run the MST Census Report

To run this report:

- Click on **MST Census Report** in the Standard Report Menu.
- On the **Select Records** screen, select the team, supervisor, or therapist of interest
- At the bottom of the **Select Records** screen, enter the dates of interest in the Summary Report Covering Period fields (e.g., last consult for the begin date and date of current consult as the end date)
- Click "Continue"

MST Census Report is useful in monitoring total program census per team according to the time period selected in the Summary Report Covering Period fields. The Census Report lists the number of open cases prior to start date given, number of cases enrolled and discharged within the report period and number of open cases at the end date given.

The most common use for this report is to provide program administrators an easy way to report program utilization to their stakeholders. They can select the report period needed to generate reports of annual (or quarterly) service utilization per team.

Run the MST Caseload Report

To run this report:

- Click on **MST Caseload Report** in the Standard Report Menu
- On the **Select Records** screen, select the team or supervisor of interest
- At the bottom of the **Select Records** screen, enter the dates of interest in the Summary Report Covering Period fields
- Click "Continue"

The **MST Caseload Report** lists the current cases assigned to each therapist with date of referral, first visit date, length of treatment, and whether or not a case is Active. It is suggested that the report period selected should be the past week up to the current date as this report is helpful in monitoring current caseloads and in anticipating upcoming case openings as cases move towards their upper end of target treatment duration. This report includes only the youth who are currently enrolled and not yet discharged at the end of the designated reporting period.

The **MST Caseload Report** should be run as frequently as needed for monitoring although it is recommended that this report be reviewed with the teams' weekly paperwork. If the data have been entered accurately, there should be a case on the report that corresponds to each weekly summary. Questions to ask include:

- Does list include all current open cases?
- Are therapist assignments accurate?
- Are there cases that need to start planning for closure?
- Are there cases already closed that need a discharge form completed?

By monitoring this report weekly, teams will begin to develop the habit of keeping case information up to date. Other case information that can quickly be monitored is the caseload size for each therapist and how long each case has been in treatment.

If there is initial paperwork on a case that does not appear on the report, the team should enter the case enrollment form for that case. If a case appears on the report that was already closed, then the case discharge form has not been completed. Sometimes, a case

will be made "inactive" but someone forget to complete the discharge form. Also printed on the report are the names of the team and therapist associated with each case. If these are incorrect, the Case Enrollment form should be edited.

Duplicate cases can be identified when a case appears more than once on the report (one name would have been spelled differently). In this case, the team will need to identify which case is correct and email the webmaster at msti@mstinstitute.org to have the duplicate case removed.

Monitoring Outcomes

Run the MST Case Discharge Summary Report

To run this report:

- Click on **MST Case Discharge Summary** in the Standard Report Menu
- On the **Select Records** screen, select the team, supervisor, or therapist of interest
- At the bottom of the **Select Records** screen, enter the dates of interest in the Summary Report Covering Period fields
- Click "continue"

The **Case Discharge Summary Report** lists all the data from the discharge form for all cases discharged within the report period including relevant dates, length of treatment, case progress review, instrumental outcomes, and ultimate outcomes. It provides an overview of outcome data across families, sorted by therapist. Teams should verify accurate data entry by running this report monthly and comparing it to hard copies of the discharge form.

It is critical that the information on the case discharge form reflect a consensus decision between the therapist, supervisor and the MST expert. Therefore, procedures should be established and followed routinely. Each case is evaluated at discharge in three areas:

- Did the youth and family complete treatment and, if not, why not (Case progress review)?
- Were there sufficient changes in the key factors associated with problem behaviors to indicate that changes are likely to be maintained post discharge (Instrumental Outcomes)?
- How was the youth doing in three areas of primary interest to most stakeholders (Ultimate Outcomes)?

The Ultimate Outcome items provide basic information about how the youth is functioning at the time of discharge. The meaning of the terms (e.g., 'arrests') may vary from county to county, state to state, and country to country; therefore, it is difficult for the MST Institute to establish a "one-size-fits-all" definition. The operational definition of each of the Ultimate Outcomes should be made clear for each MST program and documented in the Goals and Guidelines document.

Monitoring Overall Program Adherence

Add a Program Review Form

To add this form:

- Click on the radio button under "Add" for **Program Review Form**
- Scroll down to team bar and specify a team in the green area
- Click on the team that you want to add the form to and click "Continue".

The **Program Review Form** is used for entering, editing, and listing of program practices and characteristics. It includes potential factors that indicate drift or risk to program sustainability. The compilation of these forms inform the **Program Drift Monitoring Report** which is reviewed next. The **Program Review Form** should be completed following every booster, either by the MST Supervisor or the MST expert. The answers should be reviewed by both and revised if necessary. While it is recommended that the status of the program be reviewed quarterly using the program review form, the "need" areas indicated on this form are still only addressed twice a year in the standard Program Implementation Report (PIR). This written report is prepared by the MST Supervisor and the MST expert to provide guidance to local stakeholders on recommended next steps to increase adherence. Typically, the Consultant / System Supervisor conducts a "fit" of the identified struggles and challenges and Intermediary Goals / Interventions will be developed to address the primary drivers. Progress on these Goals will be assessed at the time of the next PIR.

The Program Review Form has separate sections for strongly recommended/required program practices and characteristics (items 1- 18), additional recommended program practices and characteristics (items 19 - 26), and factors that have been identified as potential indicators of future or on-going challenges to program adherence and successful implementation (items 27- 38). For each item where a practice is not met or a potential challenge is identified, users are given an opportunity to insert the reason in the blank field provided.

To view a list of all of the **Program Review Forms** for an entire organization or a particular team, run a list report.

List Program Review Forms

To review this form:

- Click on the radio button under "List-View-Report" for **Program Review Form**
- On the **Select Records** screen, select the team of interest
- Scroll down to team bar and specify a team in the green area
- Click "Continue"
- Select the number in the left column of the **Program Review Form** of interest

For a copy of all the responses to items on the **Program Review Form**, run a list report then click on the number in the left column of the form of interest. However, to have a report that highlights only those areas that may require intervention, run a **Program Drift Monitoring Report**.

Run Program Drift Monitoring Report:

To run this report:

- Click on **Program Drift Monitoring Report** in the Standard Report Menu
- On the **Select Records** screen, select the team, supervisor, or therapist of interest (if available, the report can be run on the entire organization, i.e., all teams together)
- At the bottom of the **Select Records** screen, enter the dates of interest in the Summary Report Covering Period fields
- Click "Continue"

The **Program Drift Monitoring Report** is based on the **Program Review Form** that lists the same required and recommended program practices and characteristics that have been identified through the clinical trails and implementation of MST. Ongoing research and experience with dissemination efforts in a wide range of communities have suggested that these items can serve as an "early warning signal." To have a report that highlights only those areas that may require intervention, run the **Program Drift Monitoring Report**.

Run Program Implementation Data Report:

To run this report:

- Click on **Program Implementation Data Report** in the Standard Report Menu
- On the **Select Records** screen, select the team, supervisor, or therapist of interest (if available, the report can be run on the entire organizational teams)
- At the bottom of the **Select Records** screen, enter the dates of interest in the Summary Report Covering Period fields
- Click "Continue"

The **Program Implementation Data Report** (PIDR) summaries key information about program practices (e.g. length of treatment, caseload size,) therapist adherence, and discharge information about the program in a data table. This report is critical in identifying areas of strength and struggle (e.g., challenges in the referral process, low adherence, etc) for the program. If data have been routinely monitored for accuracy, then this report should provide a valid "picture" of the program and should be reviewed with Consultant /System Supervisor around the time of each booster. In addition, the Program Implementation Review (PIR) uses this report in addition to the Program Review Form to develop recommendations for continuous improvement of the MST program.

➤ **Program Practices**

The first 6 items of the PIDR summarizes information about program practices.

The "Average FTE for active therapists at the end of the report period" figure is based on the average of the full time equivalent for each MST staff instead of a count of the actual persons. This allows for a more accurate calculation of open cases per therapist (item #3) when staff are carrying less than a full caseload (e.g., supervisors who carry cases). Supervisors can edit the Therapist FTE if there are changes in status, for example, a therapist is new and only has one case assigned during the report period. The therapist FTE can be changed to 1/5 (.20) to more accurately reflect capacity. The calculation only includes therapists with open cases at the end of the report period.

The "Current Census (open case)" figure calculates those open cases with a Date of First Visit at the end of the report period. The "Average number of open cases per therapist at the end of the report period" figure is calculated by dividing the Current Census figure by the Average FTE figures above (formula: #2/#1).

The "Cases served during the report period" figure reflects the number of cases served with a date of first visit within the report period. These cases may or may not be open at the end of the report period. The "Average number of days served per case for all open cases" figure calculates the average of all days served for those cases with a date of first visit that have not been closed the end of the report period.

The "Estimated annual service capacity" is calculated by taking the "Current Census" figure, multiplying it by 365 (days) and dividing it by the average length of stay in days for closed cases (item #17.)

➤ **Therapist Adherence**

The Therapist Adherence Scores section (items 7 - 14) on the PIDR gives the user the total number of TAM-R forms collected, the average number of TAM-R forms collected per case per month, and the total number of incomplete TAM-R forms collected in the report period for the selected organization or team. The formula used to calculate average TAM-R forms collected provides a "very rough" estimate. If using the MSTI Call Center, the reports given by this organization are much more accurate as are those calculations in the **TAM-R Monitoring Report**. Currently, the PIDR estimate and the **TAM-R Monitoring Report** estimate will not agree.

This section also gives the percent of youth with at least one TAM-R interview, the Overall Average Adherence Score, Lowest Adherence Score, Highest Adherence Score, and the percent of youth with average therapist adherence score above threshold ($\geq .61$) in the report period for the selected organization or team.

➤ **Client Outcome at Discharge**

The Case Discharge section (items 15 - 45) on the PIDR gives the user a summary of the discharge data collected in the report period. This section gives the total number of cases discharged excluding those cases without a date of first visit and also gives the number of referrals closed without services which are those cases closed without a date of first visit. Also reported is the average length of stay (days between first visit date and discharge date) for closed cases. The percent of cases completing treatment is given which is calculated by taking the percentage of those cases closed by mutual agreement (#1) out of those cases where the team had the opportunity to provide a full course of treatment (Case Progress Review categories #1, #2, and #3). The remaining Case Progress Review categories (i.e., client moved or was withdrawn by the referral source for reasons outside the control of the team) allow the team to track potential problems in the referral process.

The next section (items 19 - 34) of the report contains the averages on how all cases closed in the report period are evaluated at discharge in three areas:

- **Case Progress Review:** Did the youth and family complete treatment and, if not, why not?
- **Instrumental Outcomes:** Were there sufficient changes in the key factors associated with problem behaviors to indicate that changes are likely to be maintained post discharge?
- **Ultimate Outcomes:** How was the youth doing in three areas of primary interest to most stakeholders?

The final section (items 35 - 45) of the report includes the total number of cases in a subset that were cases not discharged for reasons out of the control of the MST team (i.e., #1, #2, or #3 case progress review discharges) and the average length of stay (all days between first visit date and discharge date) for the cases in that subset (i.e., youth with opportunity to receive a full course of MST.) The averages of the Instrumental Outcomes and Ultimate Outcomes of those cases in the subset are also provided.

MST PIDR Summary Report

To run this report:

- Click on **MST PIDR Summary Report** in the Standard Report Menu.
- On the **Select Records** screen, select the team, supervisor, or therapist of interest
- At the bottom of the **Select Records** screen, enter the dates of interest in the Summary Report Covering Period fields (e.g., last consult for the begin date and date of current consult as the end date)
- Click "Continue"

The report allows the user to select up to five different teams to query, so as to compare the adherence of those five teams using those same items found on the **Program Implementation Data Report** (PIDR). Furthermore, the report will return averages or totals of the five teams selected for each of those items. Third, a column entitled "Target Value" was added which reflects the target values that the organization has set for their MST teams.

Other Report Options

All users have access to **List Reports**, which are views of the raw data in the different forms (e.g., case enrollment form, TAM-R form). The List Reports are accessed from the right column of the **Main Menu**.

Please get on the demo site at anytime and explore on your own.

The Enhanced Web Site **Frequently Asked Questions** can be found at <http://www.mstinstitute.org/FAQs>. Please review and save them for future reference, as they are the most common questions pertaining to the site.