



**Decision Support 2000+:
Report on Instruments,
Software and Web-based
Systems Used for
Outcome Measurement in
Behavioral Healthcare
(2003)**

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Prepared for

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Background

Decision Support 2000+ (DS2000+) is an information infrastructure that includes an integrated set of mental health data standards and a Web-based information system designed to help stakeholders answer critical questions and make decisions that will improve the quality of care. The Decision Support 2000+ development team will recommend data elements for outcome measurement consisting of a core set for use across the entire field; a stakeholder-specific set of interest to particular groups; and uniform definitions, common measures, and consistent procedures for collecting, analyzing and reporting data. The Web-based information system will allow users to collect, analyze, report, and compare a variety of outcome measures to benchmarks.

This report provides background for the work of the Decision Support 2000+ development team. It summarizes instruments, software and Web-based systems that are currently used for outcome measurement in behavioral healthcare, and is intended to serve as a working document that will be fleshed out and revised as a result of the team's efforts. It consists of the following:

- This introduction,
- A set of Excel spreadsheets with information on:
 - Outcome instruments for adults
 - Outcome instruments for children
 - Software and Web-based systems that offer outcome measurement options
 - Instruments that measure outcomes of substance abuse treatment and
 - Instruments focused on specific conditions or diagnoses and
- A Word text document containing the same information as appears in the spreadsheets, in a more user friendly format.

In the listings of instruments and software systems an effort has been made to include as much relevant information as possible, and to fit that information into the most appropriate categories, or cells. However, because each instrument and system is unique, and each was developed to achieve a particular purpose, the information in the various cells may not always appear to be precisely parallel. Where specific pieces of information were not available, it has been so indicated. As this report is circulated among knowledgeable experts, it is hoped that data on additional instruments and systems will come to light, and that some of the cells that currently contain "no information" will be completed. Finally, all available information has been used to document strengths and limitations of each instrument and system, but in some cases these could not be identified with enough certainty to be included.

Instruments Used for Outcome Measurement

Rationale for Inclusion of Instruments

For this report, an outcome measurement instrument has been defined as a set of questions or items that function together for the purpose of measuring change in well-

being, functionality, symptom severity or recovery. Therefore, the report does not include:

- Inventories, indices, screening tools and other instruments that focus on diagnosis or assessment; and
- Instruments whose primary purpose is to measure satisfaction with services.

The other inclusion criteria are that the instrument is currently being used and that it has documented reliability and validity.

Names of instruments, and basic information about them, were identified in the books cited below, and from Internet searches, e-mail exchanges and telephone contacts. Any instrument about which basic descriptive and pricing information could not be found was assumed not to be currently in use. While the database includes only instruments for which adequate levels of reliability and validity have been documented, reliability and validity information are not included in the report. In most cases, detailed psychometric data can be found at the Web sites or addresses noted.

Note that while there are separate listings for instruments intended for adults and for children, some instruments fall into both categories and can be used for adolescents. While many adult instruments can be used with teenagers, their appropriateness for the age group varies, and may depend on the status of the adolescent (e.g., is s/he working or in school?). The relatively few instruments that are intended exclusively for adolescents are included in the child section.

Sources of Information

The following sources were used to locate the names of instruments and some basic information about them:

- *Managing Outcomes, Quality and Accountability*, Fifth Edition. A Desktop Reference for Behavioral Healthcare Professionals. Providence, RI.: Manisses Communications Group, Inc., 2002
- *Behavioral Outcomes & Guidelines Sourcebook*, 2000 Edition. A Practical Guide to Measuring, Managing and Standardizing Mental Health and Substance Abuse Treatment. New York, NY: Faulkner & Gray, 1999
- *Evaluating the Outcomes of Children's Mental Health Services: A Guide for the Use of Available Child and Family Outcome Measures*. T. P. Cross and E. McDonald. Boston, MA: Judge Baker Children's Center, 1995

In most cases, the descriptive material in the database is taken directly from the Web sites of the instruments' developers or distributors, and whenever possible the words are their own. When necessary, information has been summarized, edited or abbreviated. The URLs for those Web sites are provided in the spreadsheet. Information was also collected from developers or distributors via e-mail exchanges and telephone conversations.

Two other Web sites may be of interest to stakeholders although they are only tangentially relevant to this report.

- The National Quality Measures Clearinghouse™ (NQMC™), sponsored by the Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services, is a database and Web site for information on specific evidence-based health care quality measures and measure sets. It does not include mental health outcome measurement instruments. See: <http://www.qualitymeasures.ahrq.gov/about/about.aspx>
- The Center for Quality Assessment and Improvement in Mental Health has created the National Inventory of Mental Health Quality Measures, which provides a searchable database of *process measures* for quality assessment and improvement in mental health and substance abuse care, but does not include instruments. See: <http://www.cqaimh.org/quality.html>

Information Provided

The following information is provided, as available, for each instrument:

- Name of instrument
- Name of developer
- Contact information for the individual or company that distributes the instrument, including the name, address, telephone and fax numbers, e-mail address and Web site
- Target audience for the instrument: consumers for whom it is intended and/or the providers to whom it is oriented
- Key characteristics of the instrument:
 - A brief description, usually drawn directly from the marketing materials of the developer or distributor
 - The instrument's copyright status
 - The cost of the instrument, if any
 - The primary purpose for which the instrument is used
 - The age group for whom the instrument is intended
 - Who completes the instrument (e.g., consumer, family member or clinician)
 - The number of items the instrument includes
 - How long it takes for the clinician to administer the instrument, or for the consumer to complete it
 - Whether there are norms to which individual consumers can be compared
 - Whether the instrument can be scored by a computer program
 - Whether the instrument is available in any languages other than English
- The strengths and limitations of the instrument, when these are known
- Whether a copy of the instrument is included in the report

Software and Web-based Systems

Rationale for Inclusion of Systems

Many, if not most, software and Web-based systems for measuring behavioral health outcomes are “works in progress” because they are relatively new and still under development. The spreadsheet includes any software or Web-based system that reported itself to have a component intended to measure outcomes. In general, most companies that offer software also offer Web-based systems.

The spreadsheet includes separate lists of vendors of management information systems that include outcome modules, and vendors who sell systems dedicated to outcome measurement only.

Sources of Information

Given the nature of software and Web-based systems, the information for this section of the report was derived primarily from the Web, which makes it important to note that this work is being done in an unusually dynamic environment; Web sites are constantly changing, and there is no assurance that a URL listed in this report will offer the same information tomorrow that it does today. Information was also collected directly from system development and/or marketing personnel. Especially helpful were the Web site of the Software and Technology Vendors’ Association (SATVA), www.satva.org, and its Executive Director, Tom Trabin, Ph.D., M.S.M. In addition, articles and advertisements in industry journals, including *Behavioral Healthcare Tomorrow* and *Behavioral Health Management*, were reviewed for leads.

Information Provided

The following information is provided, as available, for each system:

- Name of system
- Whether it is Web-based, or provides software, or both
- The name of the system developer and/or parent company
- Contact information for the company, including address, telephone and fax numbers, e-mail address and URL
- Target audience or primary client base of the system
- Key characteristics of the instrument:
 - A brief description, usually drawn directly from the corporate Web site
 - Cost information, when available
 - The primary uses of the system
 - Who completes the instrument the system uses (e.g., consumer, family member or clinician)
 - The number of items the instrument includes
 - How long it takes for the clinician to administer the instrument, or for the consumer to complete it

- Whether there are norms to which individual consumers can be compared
- Whether the instrument can be scored by a computer program
- Whether the instrument is available in any languages other than English
- The strengths and limitations of the instrument or system, when these are known
- Whether a copy of the system documentation is included in the report

Instruments that Measure Outcomes of Treatment for Substance Abuse and for Specific Psychiatric Conditions

Rationale for Inclusion of Instruments

Instruments that meet the following criteria were selected:

- Established validity and reliability
- Primary purpose is measurement of change
- Available either at no cost or for purchase through a Web site

In addition to the generic instruments and systems described above that are intended to measure outcomes of any mental health or substance abuse treatment, the field has developed instruments for specific purposes such as research projects, or for diagnosis and assessment of specific conditions. The report therefore includes spreadsheets for instruments that measure outcomes of treatment for substance abuse and for specific psychiatric conditions. Those spreadsheets provide more limited information than is provided for the generic instruments and systems that are included in the previous spreadsheets.

In the list of substance abuse instruments, some readers may look for the "CAGE," which is commonly used and mentioned in the literature. The CAGE is not an actual instrument, however. Rather, it is a set of questions, as follows, which many medical and behavioral health personnel incorporate into interviews with consumers:

- C - Has anyone ever felt you should Cut down on your drinking?
- A - Have people Annoyed you by criticizing your drinking?
- G - Have you ever felt Guilty about your drinking?
- E - Have you ever had a drink first thing in the morning (Eye-opener) to steady your nerves or to get rid of a hangover?

It is therefore included here, rather than in the database itself.

Sources of Information

Instruments were selected from the books listed above and from *Mental Health Assessment and Diagnosis of Substance Abusers*, Clinical Report Series, U.S. Department of Health and Human Services, National Institute on Drug Abuse, Office of Science Policy, Education and Legislation, Rockville, MD, 1994. Several Web sites were also used, most notably,

- <http://www.utexas.edu/research/cswr/nida/InstrumentListing.htm> (The Addiction Research Institute, Center for Social Work Research, School of Social Work, University of Texas at Austin)
- <http://casaa.unm.edu/> (the Center on Alcoholism, Substance Abuse, and Addictions)
- <http://marketplace.psychcorp.com> (The Psychological Corporation)
- <http://www.wpspublish.com/Inetpub4/index.htm> (Western Psychological Services)
- <http://www.mhs.com/> (Multi-Health Systems)

Information Provided

The name of each instrument and its distributor's contact information have been provided.



DECISION SUPPORT 2000+: REPORT ON INSTRUMENTS, SOFTWARE AND WEB-BASED SYSTEMS USED FOR OUTCOME MEASUREMENT IN BEHAVIORAL HEALTHCARE (2003)

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Behavioral & Symptom Identification Scale (BASIS-32)*
Index Number	1
Developer	Dr. Susan Eisen, McLean Hospital
Contact/Org./Phone/ E-mail/Web	Alex Speredelozzi, Attn: BASIS-32, McLean Hospital, 115 Mill Street, Belmont, MA 02478, 617-855-2424, spereda@mcleanpo.McLean.org, www.basis-32.org
Brief Description	BASIS-32® provides complete patient profiles and measures the change in self-reported symptom and problem difficulty over the course of treatment. Typically, BASIS-32® is given at admission and discharge for hospital-based episodes of care, and at intake/initiation of treatment and periodically thereafter in ambulatory care. The survey measures the degree of difficulty experienced by the patient during a one week period on a five-point scale. Scoring the 32 items provides summary indicators of how patients feel before and after receiving care.
Target Audience/ Age Group	Individuals receiving mental health treatment at any level of care and in any type of program. / Ages 14 and up
Copyright Status / Cost	Copyrighted, McLean Hospital, 1985 / Annual fee is \$300 for the first location, \$100 for the second location, and \$50 for each subsequent location. Also, software and Web-based versions.
Primary Use	The BASIS-32 is used to assess the patient's own perception of his/her MH status. The patient reports the degree of difficulty with symptoms or functioning that result in the need for psychiatric treatment. It is used to measure change over time and post treatment follow-up. A brief yet comprehensive instrument, BASIS-32® cuts across diagnoses by identifying a wide range of symptoms and problems that occur across the diagnostic spectrum.
Respondent	Patient Self-Report
Number of Items / Admin. Time	32 symptom & problem items, 7 demographic items. / 10-20 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Foreign Languages
Strengths	Used in more than 800 locations throughout the US, Canada and in other parts of the world. Has been extensively tested on inpatient and outpatient populations.
Limitations	Reading level may be too high for some clients. Scores are difficult to interpret. <ul style="list-style-type: none">• <i>Copy of instrument available.</i>

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Brief Psychiatric Rating Scale (BPRS)*
Index Number	2
Developer	John E. Overall & Donald R. Gorham
Contact/Org./Phone/ E-mail/Web	John E. Overall, Ph.D., Department of Psychiatry and Behavioral Science, University of Texas Medical School, P.O. Box 20708, Houston, TX 77225, 713-500-2564
Brief Description	The BPRS is an 18-item scale; each item is rated on a seven-point scale. It measures positive symptoms, general psycho-pathology and affective symptoms. The instrument was developed and copyrighted in 1962 with 16 items; the 18 item version has been widely used since 1967, especially in drug studies.
Target Audience/ Age Group	Patients with major psychiatric disorders / Adult
Copyright Status / Cost	Original copyright 1962 for first 16 items. No permission required for reproduction. Permission needed for publication. / None
Primary Use	The BPRS has been a widely used psychiatric rating scale for the past 40 years; it has been successfully used to demonstrate the efficacy of antidepressant, antianxiety and antipsychotic drugs. It has also been used in epidemiological studies. There is also a children's version. It has been used most frequently in schizophrenia. The BPRS has excellent sensitivity to change.
Respondent	Trained clinician
Number of Items / Admin. Time	18 items / 20 minute interview, three minutes to complete ratings
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Foreign Languages, Several, but author does not track or monitor
Strengths	Well established and well known among psychiatrists. Sensitive to change.
Limitations	Limited in scope, can be difficult to interpret results. Rater training is necessary; use of a standardized interview is recommended to assure consistent results.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Brief Sympton Inventory (BSI)
Index Number	3
Developer	Leonard R. Derogatis, PhD
Contact/Org./Phone/ E-mail/Web	http://www.pearsonassessments.com/assessments/tests/bsi.htm
Brief Description	The BSI, which is the short form of the SCL-90-R instrument, is especially appropriate in clinical situations where debilitation results in reduced attention and endurance, and in outpatient clinics. Frequently used in measuring patient progress during treatment.
Target Audience/ Age Group	Individuals 13 and older
Copyright Status / Cost	Copyrighted / Manual costs \$31. Other prices vary, for hand-scoring, mail-in scoring or software system. Example: Software system costs: \$89 annual license fee; \$54 Starter Kit w/ Interpretive Reports or \$39 Starter Kit w/ Profile Reports; \$20 for 25 answer sheets; \$3 to \$3.75 per report for Profile Reports or \$7.65 to \$9.40 for Interpretive Reports)
Primary Use	Like the SCL-90-R, the BSI instrument can be useful in initial evaluation of patients at intake as an objective method of screening for psychological problems,
Respondent	Client
Number of Items / Admin. Time	53 (subset of SCL-90-R's items) / 8-10 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms: Adult nonpatients, Adult psychiatric outpatients, Adult psychiatric inpatients, Adolescent nonpatients / Computer Scoring / Spanish
Strengths	Has been widely used for many years.
Limitations	

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Clinician-rated Functioning Index (CFI)*
Index Number	4
Developer	BHOS, Inc. (William Berman, Ph.D. and Stephen Hurt, Ph.D.)
Contact/Org./Phone/ E-mail/Web	689 Mamaroneck Ave., Mamaroneck, NY 10543, wberman@echoman.com or http://www.echoman.com
Brief Description	A clinician-rated survey that measures functional difficulties, including major role functioning, social functioning, and daily living difficulties.
Target Audience/ Age Group	Adults
Copyright Status / Cost	Copyrighted / No charge as part of The Echo Group system (see "Systems" page of file); OR \$250/year/instrument, unlimited use.
Primary Use	Adults with MH/SA needs
Respondent	Clinician
Number of Items / Admin. Time	14 / 4 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	This is a brief (one page) instrument that the clinician can complete quickly.
Limitations	Best used in conjunction with other instruments, because it covers only functioning (i.e., includes no demographics or other variables that would enable fair comparisons).

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Clinician-rated Problem Scale-Revised (CPS-R)*
Index Number	5
Developer	BHOS, Inc. (William Berman, Ph.D. and Stephen Hurt, Ph.D.)
Contact/Org./Phone/ E-mail/Web	689 Mamaroneck Ave., Mamaroneck, NY 10543, wberman@echoman.com or http://www.echoman.com
Brief Description	A clinician-rated survey that measures overall symptomatology and five symptom dimensions determined through psychometric analyses: Depression, Anxiety, Psychosis, Impulsivity, Cognitive Impairment
Target Audience/ Age Group	Adults
Copyright Status / Cost	Copyrighted / No charge as part of The Echo Group system (see "Systems" page of file); OR \$250/year/instrument, unlimited use.
Primary Use	Adults with MH/SA needs
Respondent	Clinician
Number of Items / Admin. Time	42 / 8-10 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	Somewhat longer than CFI (above), but is also relatively quick for the clinician to complete.
Limitations	Best used along with other instruments because it deals only with symptomatology (i.e., includes no demographics or other variables that would enable fair comparisons).

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Colorado Client Assessment Record (CCAR)*
Index Number	6
Developer	Ellis, Wackwitz and Foster
Contact/Org./Phone/ E-mail/Web	Nancy Johnson Nagel, CO Dept. of Human Services, MH Services, 3824 West Princeton Circle, Denver CO 80236, 303-866-7412; http://www.cdhs.state.co.us/ohr/mhs/CCAR%20Manual/Index%20-%20Main/Index%20-%20Main.htm
Brief Description	The CCAR is a clinical instrument designed to provide a standardized method of documenting clinical impressions of cognitive and behavioral functioning, symptoms, and strengths and resources at various points of service delivery. Designed for completion by clinicians with broad levels of training and/or experience and has been used by Colorado MH Services for over 20 years. CO Child Welfare and Division of Youth Corrections have more recently adopted the tool for specific uses.
Target Audience/ Age Group	Used by mental health and other providers in CO. / Adults
Copyright Status / Cost	Available on CO Web site / No charge
Primary Use	Used by Colorado MH Services (see description).
Respondent	Clinician, with training.
Number of Items / Admin. Time	4 pages - Items not numbered / No Information
Norms / Computer Scoring / Foreign- Language Translation	No Information
Strengths	Instrument incorporates questions on strengths and resources as well as medical issues. Manual provides clear instructions to clinicians and inter-rater reliability is good.
Limitations	Excellent support within CO, but presumably if others want to use it they need to develop their own systems for doing so. Incorporates only the clinician's perspective.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Functional Assessment Rating Scale (FARS)*
Index Number	7
Developer	John Ward and Michael Dow
Contact/Org./Phone/ E-mail/Web	Louis De La Parte FL MH Institute, U. of South FL, 13301 Bruce B. Downs Blvd., Tampa, FL 33612-380, (813) 974-1929 ward@fmhi.usf.edu http://outcomes.fmhi.usf.edu/
Brief Description	The FARS is a way of documenting and standardizing impressions from clinical evaluations or mental status exams that assess cognitive, social and role functioning. FARS is available in paper and computer software versions. Both versions as well as manuals may be downloaded from the Web site. The software version allows the clinician to enter ratings, print out a hard copy for a clinical record, and enter the ratings into a data base of all people served by the individual practitioner or agency. The software also allows the clinician (or agency) to produce several standard Quality Assurance reports. Florida is moving toward a Web-based system.
Target Audience/ Age Group	Originally developed for State MH Authorities, to help them respond to demands for accountability. / Adult
Copyright Status / Cost	Copyrighted / Instrument, web based training and certification system, user manuals, and data entry/report generating software can be downloaded and installed on one's computer or network free of charge. All are available on the website.
Primary Use	The FARS was originally developed for use in Florida, to help providers meet the requirements of the Government Performance and Accountability Act, which was passed in 1994. It was adapted from the Colorado Client Assessment Record (CCAR), and is used in several other states, including Illinois and New Mexico.
Respondent	Clinician, with training. To learn the consumers' viewpoint, a companion satisfaction instrument (BHRS) gives them the opportunity to comment on the relevance of their treatment and the degree to which they believed it contributed to improvement.
Number of Items / Admin. Time	18 problem severity rating areas of cognitive, social and role functioning. Also, demographic and quality of life questions, as well as diagnosis and level of care information. / 5-15 minutes after conducting a mental status or admission/discharge interview.
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	Encompasses many domains, includes functional as well as intrapsychic measures. Is widely used. Support available from USF, including Web-based training that takes, on average, 67 minutes to complete.
Limitations	In order to incorporate the client's perspective, it is necessary to use the companion instrument, the BHRS. Otherwise, only the clinician's perspective is measured.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Global Assessment of Functioning (GAF) Scale*
Index Number	8
Developer	Robert L. Spitzer, M.D.
Contact/Org./Phone/ E-mail/Web	No information, since it is not an "instrument" like others included here.
Brief Description	The GAF is a 100-point scale that measures a patient's overall level of psychological, social, and occupational functioning on a hypothetical continuum. It is included within the DSM-IV, and is therefore used by virtually all clinicians when they diagnose patients. The clinician is asked to "consider psychological, social and occupational functioning on a hypothetical continuum of mental health-illness," and not to include impairment in functioning due to physical or environmental limitations.
Target Audience/ Age Group	All clients undergoing diagnosis. / Child and adult
Copyright Status / Cost	Available as a component of the DSM-IV / None
Primary Use	The GAF constitutes Axis V of the DSM-IV and is useful in tracking clinical progress.
Respondent	Clinician
Number of Items / Admin. Time	Scale of 1-100; rating results in a single score / Very brief
Norms / Computer Scoring / Foreign- Language Translation	Not applicable
Strengths	Simplicity: the GAF provides a single score that helps the clinician rate current status and track change over time.
Limitations	Subject to clinician bias. Also, because it is only one numerical score, it does not reflect individual complexity.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Life Status Questionnaire (LSQ)
Index Number	9
Developer	Michael J. Lambert, Ph.D., and Gary M. Burlingame, Ph.D.
Contact/Org./Phone/ E-mail/Web	American Professional Credentialing Services, LLC, 10421 Stevenson Rd., Box 346, Stevenson, MD 21153, www.oqfamily.com
Brief Description	The LSQ is a 30-item assessment tool completed by the patient. This tool provides information on clinical risk, as well as the patient's overall level of psychological distress.
Target Audience/ Age Group	PacifiCare Behavioral Health clinicians serving private sector clients. / Adults
Copyright Status / Cost	Copyrighted / None, for specific audience.
Primary Use	Developed for and used by PacifiCare.
Respondent	Clinician
Number of Items / Admin. Time	No Information / No Information
Norms / Computer Scoring / Foreign- Language Translation	No Information
Strengths	No Information
Limitations	No Information

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	LOCUS: Level of Care Utilization System for Psychiatric and Addiction Services*
Index Number	10
Developer	Wesley Sowers, MD and a committee, through the American Association of Community Psychiatrists
Contact/Org./Phone/ E-mail/Web	Jack Stevenson, Deerfield Behavioral Health, 2808 State Street, Erie, PA 16508, 814-456-2457, jacks@dbhn.com, http://www.dbhn.com/locus.html
Brief Description	The LOCUS instrument provides a quantitative assessment using six parameters: Risk of Harm; Functional Status; Psychiatric, Medical and Addictive Co-Morbidity; Recovery Environment; Treatment and Recovery History; and Attitude and Engagement. Includes a methodology for translating the completed assessment into a recommendation for a certain level of resource intensity to meet the needs indicated. LOCUS defines six "levels of care".
Target Audience/ Age Group	Psychiatrists / Adult (see CALOCUS for children)
Copyright Status / Cost	Copyrighted / No Information
Primary Use	Primary use is as a quantifiable measure to guide assessment, level of care placement decisions, and continued stay criteria. LOCUS provides a common language and set of standards with which to make judgments and recommendations.
Respondent	Clinician, probably mainly psychiatrist
Number of Items / Admin. Time	Six evaluation parameters; six levels of care; a scoring methodology. / No Information
Norms / Computer Scoring / Foreign- Language Translation	No Information
Strengths	Serves the specific purpose of helping clinician determine recommendations for appropriate placement.
Limitations	Outcome measurement is not its primary goal.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	MHSIP Consumer Survey*
Index Number	11
Developer	MHSIP Task Force
Contact/Org./Phone/ E-mail/Web	Ronald Manderscheid, Ph.D., Center for Mental Health Services, MHSIP Policy Group, c/o Masimax Resources, 1375 Picard Drive, Suite 175, Rockville, MD 20850, http://www.mhsip.org/documents/MHSIPConsumerSurvey.pdf
Brief Description	The MHSIP Report Card Consumer Survey includes 28 items, 8 of which measure outcomes of services received. The questions relate to symptoms, functioning and living situation. Initial testing of the instrument by consumer volunteers in four states revealed that the survey was an appropriate length, easy to understand, and relevant to consumer needs. There was little redundancy in the items.
Target Audience/ Age Group	Primarily state mental health authorities / Adults
Copyright Status / Cost	Publicly available on MHSIP Website / Free
Primary Use	Used by many state and county mental health authorities. Incorporates administrative (system level) and consumer (person level) questions. Focuses on people with serious mental illnesses.
Respondent	Consumer
Number of Items / Admin. Time	28 total: 8 related to outcomes / No Information
Norms / Computer Scoring / Foreign- Language Translation	No Information
Strengths	Focuses on individuals with serious mental illness and is based on research and explicit values. Widely used by mental health authorities; because it was developed with substantial consumer input, it assumes that MH systems exist to produce specific outcomes and that, to achieve those outcomes, certain attitudes, processes and services need to be in place.
Limitations	Is not supported by a commercial vendor, thus requiring user to develop systems for use.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Multnomah Community Ability Scale (MCAS)+A23*
Index Number	12
Developer	Sela Barker, Nancy Barron, Bentson McFarland, Douglas Begelow
Contact/Org./Phone/ E-mail/Web	Sela Barker, (503) 238 0769, Information about the instrument can be found at: http://www.ontario.cmha.ca/cmhei/newsletter/2000_05/2000_05_5.asp
Brief Description	The Multnomah Community Ability Scale (MCAS)* was developed by a team in Multnomah County, Oregon. The measure assesses how the person has been doing, on average, for the past three months. Comparing ratings over time will indicate whether the person has, in general, improved in functioning, remained more or less the same, or declined. Four subscale scores are produced, in addition to a total score, that show changes in functioning in specific areas – physical and psychiatric symptoms, daily living skills, interpersonal relations and daily activities, and behavioral problems.
Target Audience/ Age Group	Individuals with severe mental illness living in the community / Adults
Copyright Status / Cost	No information/ No information
Primary Use	Used in studies as part of a battery of tests.
Respondent	Clinician
Number of Items / Admin. Time	17 / No Information
Norms / Computer Scoring / Foreign- Language Translation	Norms
Strengths	Focuses on individuals with serious mental illness.
Limitations	Includes no demographic or other measures that would enable fair comparisons; probably needs to be used in conjunction with one or more other instruments.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Ohio Mental Health Consumer Outcomes System*
Index Number	13
Developer	Ohio Mental Health Outcomes Task Force (OTF), convened by the Ohio Department of Mental Health (ODMH)
Contact/Org./Phone/ E-mail/Web	30 E. Broad St., 8th Floor, Columbus, Ohio 43215, http://www.mh.state.oh.us/initiatives/outcomes/outcomes.html
Brief Description	Outcomes instruments are administered to adults with severe and persistent mental illness and their service provider as well as adults in the general mental health population. The domains measured include Clinical Status, Quality of Life, Functioning Status, Safety and Health, and Empowerment.
Target Audience/ Age Group	Adults with severe and persistent mental illness. / Adults over 18
Copyright Status / Cost	Copyrighted / Out-of-state parties must sign a licensing agreement and will be charged a minimal fee for use of these copyrighted scales.
Primary Use	Change over time; quality improvement.
Respondent	Two instruments: self-report and clinician/ provider report
Number of Items / Admin. Time	Provider Form - 12 Consumer Self-Report - 67 / No Information
Norms / Computer Scoring / Foreign- Language Translation	Norms for Ohio / Computer Scoring / Chinese, Japanese, Korean, Mexican, Puerto Rican, and Russian
Strengths	Developed as part of a statewide process and used throughout Ohio's mental health system.
Limitations	Includes a few demographic questions, but no substance abuse questions.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	OQ-45.2 Outcome Questionnaire 45 Questions Version 2
Index Number	14
Developer	Michael J. Lambert and Gary M. Burlingame
Contact/Org./Phone/ E-mail/Web	American Professional Credentialing Services, LLC, P.O. Box 568, East Setauket, NY 11733, www.oqfamily.com
Brief Description	45 item self-report outcome/tracking instrument intended for repeated measurement of client progress through the course of treatment.
Target Audience/ Age Group	Individuals 17 and up
Copyright Status / Cost	Licensed and copyrighted / Manual costs \$10. Licensing fee for paper and pencil instrument ranges from \$60 for an individual practitioner to \$3,000 for a state. Licensee may then make copies of the instrument.
Primary Use	Can be used in any setting, to meet needs of providers and payers.
Respondent	Client
Number of Items / Admin. Time	45 / 5 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Spanish German
Strengths	All outcome measurement products in the OQ® Family are designed to detect treatment effectiveness regardless of treatment modality, diagnosis or discipline of the treating professional.
Limitations	Copyright holders do not permit any questions to be incorporated in other tools under any circumstances.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Personal Functioning Index (PFI)*
Index Number	15
Developer	BHOS, Inc. (William Berman, Ph.D. and Stephen Hurt, Ph.D.)
Contact/Org./Phone/ E-mail/Web	689 Mamaroneck Ave., Mamaroneck, NY 10543, wberman@echoman.com or http://www.echoman.com
Brief Description	A self-report scale that measures difficulties in major role functioning, social functioning, and daily living difficulties.
Target Audience/ Age Group	Adults
Copyright Status / Cost	Copyrighted / No charge as part of The Echo Group system (see "Systems" page of file); OR \$250/year/instrument, unlimited use.
Primary Use	Adults with MH/SA needs
Respondent	Client
Number of Items / Admin. Time	14 / 3 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	Easy for client to complete; each item covers one specific area of functioning and each is answered by means of a clearly defined five point scale.
Limitations	Measures functioning only. No demographic or other information that would enable fair comparisons.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Personal Problem Scale-Revised (PPS-R)*
Index Number	16
Developer	BHOS, Inc. (William Berman, Ph.D. and Stephen Hurt, Ph.D.)
Contact/Org./Phone/ E-mail/Web	689 Mamaroneck Ave., Mamaroneck, NY 10543, wberman@echoman.com or http://www.echoman.com
Brief Description	A self-report scale that measures overall symptomatology and six symptom dimensions determined through psychometric analyses: Depression, Anxiety, Psychotic symptoms, Cognitive Impairment, Impulsivity & substance abuse, Positive affect.
Target Audience/ Age Group	Adults
Copyright Status / Cost	Copyrighted / No charge as part of The Echo Group system (see "Systems" page of file); OR \$250/year/instrument, unlimited use.
Primary Use	Adults with MH/SA needs
Respondent	Client
Number of Items / Admin. Time	43 / 5-8 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	A list of problems, with statements to be responded to on a five point Likert scale. Includes substance use questions. Single page format is not intimidating.
Limitations	Measures problems only. No functioning questions, or demographic or other information included.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	RAND 36-Item Health Survey (also known as the SF-36 Health Survey); also the SF-12 and SF-8 and the recently revised SF-36v2 and the SF-12v2. There is also a 37 item Mental Health Inventory, which includes some of the 116 measures in the MOS.*
Index Number	17
Developer	Rand Corporation (Medical Outcomes Study); Medical Outcomes Trust; Quality Metric, Inc.
Contact/Org./Phone/ E-mail/Web	1700 Main Street, P.O. Box 2138, Santa Monica, CA 90407-2138, (310) 393-0411, ext. 7775 or Quality Metric, Inc., http://www.qualitymetric.com/cgi-bin/sf36/sf36site.cgi/ or http://www.rand.org/health/surveys/core/20item.mv.html ; http://www.sf-36.org/community/SF36v2andSF12v2.shtml
Brief Description	The SF-36, constructed to survey health status in the Medical Outcomes Study, is a set of generic, coherent, and easily administered quality-of-life measures. Designed for use in clinical practice and research, health policy evaluations, and general population surveys, the SF-36 includes one multi-item scale that assesses eight health concepts related to limitations in physical activities; limitations in social activities; limitations in usual role activities; bodily pain; general mental health; limitations in usual role activities; vitality; and general health perceptions. SF-12 and SF-8, as well as the newly revised versions, SF-36v2 and SF-12v2, represent modified versions of the original.
Target Audience/ Age Group	General population of adults / Persons 14 years of age and older
Copyright Status / Cost	Public document, available at no charge. Download permission form from Rand Web site. / Free/ Forms and manuals can also be purchased from http://www.sf-36.org/
Primary Use	These measures are now widely utilized by managed care organizations and by Medicare for routine monitoring and assessment of care outcomes in adult patients. Instrument has 8 scales and 2 summary factors. Two scales are used in the MHSIP Consumer Report Card. Also widely used in research on quality of life.
Respondent	Client, or trained interviewer
Number of Items / Admin. Time	Depends on version used. Ranges from 8 to 36. / No Information
Norms / Computer Scoring / Foreign- Language Translation	Norms for adults by gender and age, and for medical and psychiatric populations / Over 40 languages
Strengths	Widely used, properties well understood.
Limitations	Focus on physical more than mental health

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Social Adjustment Scale-Self Report
Index Number	18
Developer	Myrna Weissman, Ph.D.
Contact/Org./Phone/ E-mail/Web	http://www.mhs.com/onlineCat/product.asp?productID=SAS-SR
Brief Description	54-item questionnaire that assesses the ability of an individual to adapt to, and derive satisfaction from, his or her social roles. This scale has widely been used in research to evaluate the efficacy of pharmacological treatments of mental disorders.
Target Audience/ Age Group	17 and older
Copyright Status / Cost	No information/ No information
Primary Use	The SAS-SR has been used primarily by psychiatrists to evaluate the efficacy of pharmacological treatments of mental disorders. Recently, however, it's been used in a broad range of settings for both clinical and research purposes.
Respondent	Clinician interview or client self-report.
Number of Items / Admin. Time	54 / 15-20 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / 20 Languages
Strengths	The SAS-SR is psychometrically sound and can be used with a variety of populations across very diverse settings. Administration and scoring are relatively easy and it has a 4th grade reading level.
Limitations	

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Symptom Checklist-90-R, SCL-90-R
Index Number	19
Developer	Leonard R. Derogatis, PhD
Contact/Org./Phone/ E-mail/Web	http://www.pearsonassessments.com/assessments/tests/sc190r.htm
Brief Description	The SCL-90-R is a brief, multidimensional self-report inventory designed to screen for a broad range of psychological problems and symptoms of psychopathology, and is also useful as a progress or outcomes measurement instrument. It is used by clinical psychologists, psychiatrists, and counseling professionals in mental health, medical, and educational settings as well as for research purposes.
Target Audience/ Age Group	Individuals 13 and older
Copyright Status / Cost	Copyrighted / Manual costs \$31. Other prices vary, for hand-scoring, mail-in scoring or software system. Example: Software system costs: \$89 annual license fee; \$54 Starter Kit w/ Interpretive Reports or \$39 Starter Kit w/ Profile Reports; \$20 for 25 answer sheets; \$3 to \$3.75 per report for Profile Reports or \$7.65 to \$9.40 for Interpretive Reports)
Primary Use	It is used both for screening and to measure progress in treatment.
Respondent	Client
Number of Items / Admin. Time	90 / 12-15 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms: adult nonpatients, adult psychiatric outpatients, adult psych inpatients, adolescent nonpatients / Computer Scoring / Spanish
Strengths	The SCL-90-R instrument is well-researched, with more than 940 research studies demonstrating its reliability, validity, and utility.
Limitations	

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Treatment Outcomes Package (TOP)*
Index Number	20
Developer	David R. Kraus, Ph.D., John Jordan, Ph.D.
Contact/Org./Phone/ E-mail/Web	David Kraus, Ph.D., Behavioral Health Laboratories, 50 Main Street, Ashland, MA, 1-800-329-0949, www.bhealthlabs.com
Brief Description	The TOP measures a full range of behavioral health symptoms on 13 subscales, along with treatment satisfaction and demographic items. The TOP is a suite of client assessment and outcome measurement tools designed to be administered throughout treatment (from intake to post-treatment follow-up) for any level of care. The instrument is designed to have clinical utility while also measuring outcomes. Client completes paper instrument which is faxed in to BHL computer. BHL returns a report to the clinic site within 30 minutes. System also includes monthly reports.
Target Audience/ Age Group	Adolescents and adults in treatment at any level of care. / Adult version - 14 and older.
Copyright Status / Cost	\$3-\$5 per administration depending on volume. Short versions from \$0.50-\$2.50.
Primary Use	Diagnosis, screening, change over time, post-treatment follow-up. The TOP is designed to be used as an initial assessment and treatment outcome measuring tool. It can be administered at various points in or after treatment. It provides diagnostic suggestions based on DSM-IV algorithms.
Respondent	Client. It can also be used as a structured interview, or completed by the clinician. Each type of administration is handled differently.
Number of Items / Admin. Time	9-140 depending on whether short, medium or long form is used. / Median time is 25 minutes for psychiatric population. 15-30 minutes for private sector clients. 20-45 minutes for public sector clients.
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Spanish
Strengths	Offers a complete system for measuring outcomes, comparing clients to norms, returning reports to clinicians and administrators. Includes questions on former treatment, health and stress, as well as demographics, enabling fairer comparisons among groups of clients.
Limitations	Few if any reports on use in peer-reviewed literature. Instrument includes little functional information.

- *Copy of instrument available.*

ADULT INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Treatment Outcome Profile
Index Number	21
Developer	William R. Holcomb, Ph.D.
Contact/Org./Phone/ E-mail/Web	Behavioral Health Concepts, Inc., 2716 Forum Blvd., Suite 4 Columbia, MO 65203, 866-463-6242 www.bhcinfo.com
Brief Description	The Treatment Outcome Profile (TOP) is a self-report measure of the key dimensions of outcome in behavioral health: Quality of Life, Level of Functioning, Symptomatology, and Satisfaction with Services. An Internet version, TOP Online, is available in addition to the paper form license. The Internet version includes both client and staff input screens, data analysis tools, and report generation capabilities for individual clients and groups. The software runs on a server, and its use requires a web browser and an Internet connection.
Target Audience/ Age Group	Inpatient and outpatient settings as well as programs for non-patients/12 years and older
Copyright Status / Cost	Copyrighted / Pricing for Internet TOP Sys. includes \$150 fee for initial set-up, plus a per Internet form usage charge based on mnthly usage: e.g., Up through 10 forms/mo.--\$1.75/form use; 421 or more forms/mo.--\$.75/form use. Unlimited Paper Form Use Rights License: \$495 (pkg. includes free Excel scoring template)
Primary Use	The TOP is used in a variety of inpatient and outpatient facilities, including EAP programs, inmate programs, weight loss centers, VA hospitals, psych hospitals, outpatient MH clinics. It can be given to the patient to complete and hand back to the clinician or to a receptionist; it also can be mailed out to clients.
Respondent	Consumer
Number of Items / Admin. Time	27 - 39, depending on version used. / Less than 10 minutes
Norms / Computer Scoring / Foreign- Language Translation	Computer Scoring/5 languages
Strengths	
Limitations	

- *Copy of instrument available.*



**DECISION SUPPORT 2000+: REPORT ON INSTRUMENTS, SOFTWARE AND
WEB-BASED SYSTEMS USED FOR OUTCOME MEASUREMENT IN
BEHAVIORAL HEALTHCARE (2003)**

**CHILD INSTRUMENTS CURRENTLY USED FOR
OUTCOME MEASUREMENT**

Name of Instrument	Adolescent Psychopathology Scale (APS) and APS-Short Form
Index Number	23
Developer	William M. Reynolds
Contact/Org./Phone/ E-mail/Web	The Psychological Corporation, 19500 Bulverde, San Antonio, TX 78259, 1-800-872-1726, CustomerCare@Harcourt.com, www.PsychCorp.com
Brief Description	Measures a range of psychopathology, personality, and social-emotional problems and competencies. Assesses the severity of symptoms associated with specific DSM-IV clinical and personality disorders. Also assesses other psychological problems and behaviors that may interfere with an adolescent's psychological adaptation and personal competence, including substance abuse, suicidal behavior, emotional lability, excessive anger, aggression, alienation, and introversion.
Target Audience/ Age Group	Adolescents in school and clinical settings / 12 to 19 years
Copyright Status / Cost	Copyrighted / Introductory kit \$219
Primary Use	Assesses school safety issues by assessing excessive anger and propensity for violence toward others. APS uses a multiple response format designed to conform to the nature of DSM-IV symptom criteria. APS scores represent the severity of disorder-specific symptomatology evaluated across different time periods. The close match between APS item content and DSM-IV criteria facilitates clinical utility and ease of interpretation.
Respondent	Clinician
Number of Items / Admin. Time	346 items on long form / 45-60 minutes, 15-20 minutes for short form
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Adolescent Treatment Outcomes Module (ATOM)*
Index Number	24
Developer	J.M. Robbins, L. Taylor, B. Burns, K. Rost, T. Kramer, G.R. Smith
Contact/Org./Phone/ E-mail/Web	CORE (MS 755); 5800 West 10th St., Suite 605; Little Rock, AR 72204, https://www.netoutcomes.net/no_solutions/NO_Main/NO_Home.asp?menu=nethome
Brief Description	The ATOM is one product offered by NetOutcomes Solutions, which constitutes a set of behavioral health outcomes assessment tools developed by the University of Arkansas for Medical Sciences' (UAMS) Center for Outcomes Research and Effectiveness (CORE).
Target Audience/ Age Group	Adolescents in routine clinical care settings / Adolescents aged 11-19
Copyright Status / Cost	Copyrighted / Ranges from no charge for one provider (w/o benchmarked aggregate reports) to annual fees of \$129 for a sole practitioner, \$2,990 for group of up to 10 providers and \$5,150 for group of 11-20 providers.
Primary Use	The primary goal of the ATOM is to measure the types of care adolescents receive, the outcomes of that care and the prognostic factors that influence either the types or outcomes of care. It is designed to be used as part of an Outcomes Management System for continuous quality improvement efforts.
Respondent	Instruments included for adolescent, parent and clinician
Number of Items / Admin. Time	Patient Baseline Assessment: 59. Patient Follow-up:69. Parent Baseline:88. Parent Follow-up: 95 Clinician Baseline: 10 / Patient forms: 22 minutes. Parent forms: 25 minutes. Clinician: 5 minutes.
Norms / Computer Scoring / Foreign- Language Translation	Norms, at the provider, program and facility levels. No, at the individual level. / Computer Scoring
Strengths	Parent Baseline Assessment is very thorough, e.g., includes severity of emotional and behavioral problems, age of onset, previous psychiatric treatment, poverty, substance use and others.
Limitations	Adolescent Assessment doesn't include the information available in the Parent Assessment. Could be difficult, in other than a research setting, to get parents and children to complete such lengthy instruments.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Beck Youth Inventories of Emotional and Social Impairment
Index Number	25
Developer	Judith S. Beck and Aaron T. Beck
Contact/Org./Phone/ E-mail/Web	The Psychological Corporation, 19500 Bulverde, San Antonio, TX 78259, 1-800-872-1726, CustomerCare@Harcourt.com, www.PsychCorp.com
Brief Description	Five self-report inventories that can be used separately or in combination to assess symptoms of depression, anxiety, anger, disruptive behavior and self-concept. Each contains 20 statements about thoughts, feelings and behaviors associated with emotional and social impairment in youth. Children describe how frequently the statement has been true for them during the past two weeks, including today.
Target Audience/ Age Group	Psychologists in school and clinical settings / 7 through 14 years
Copyright Status / Cost	Copyrighted / Combination Inventory, pkg of 100 booklets, \$277
Primary Use	Screening for emotional and social difficulties that may impair a child's ability to function in school settings. For children who are classified as emotionally disturbed, or who are emotionally volatile, the inventories may be used for routine monitoring.
Respondent	Clinician
Number of Items / Admin. Time	20 items on each of 5 inventories / 5 to 10 minutes per inventory
Norms / Computer Scoring / Foreign- Language Translation	Norms
Strengths	
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Behavioral and Emotional Rating Scale
Index Number	26
Developer	Michael Epstein & Jennifer Sharma
Contact/Org./Phone/ E-mail/Web	PRO-ED, Inc. -- 8700 Shoal Creek Boulevard -- Austin, Texas 78757-6897 Telephone: 800.897.3202 -- Fax: 800.397.7633; http://www.proedinc.com/store/index.php?mode=product_detail&id=8460
Brief Description	The BERS helps to measure five aspects of a child's strength: interpersonal strength, involvement with family, intrapersonal strength, school functioning, and affective strength. The BERS provides an overall strength score and five subtest scores. Information from the BERS is useful in evaluating children for prereferral services and in placing children for specialized services. The BERS can identify the individual behavioral and emotional strengths of children, the areas in which individual strengths need to be developed, and the goals for individual treatment plans.
Target Audience/ Age Group	Children aged 5 through 18.
Copyright Status / Cost	Copyrighted
Primary Use	Designed for use in schools, mental health clinics, and child welfare agencies.
Respondent	Teachers, parents, counselors, or other persons knowledgeable about the child.
Number of Items / Admin. Time	52 items / 10 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms
Strengths	
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Child & Adolescent Functional Assessment Scale (CAFAS)*
Index Number	27
Developer	Kay Hodges, Ph.D.
Contact/Org./Phone/ E-mail/Web	Kay Hodges, Ph.D., Functional Assessment Systems, LLC, 2140 Old Earhart Road, Ann Arbor, MI 48105; Phone: 310 393-0411, ext. 7775, 734-769-9725, http://www.cafas.com/
Brief Description	The CAFAS measures functional impairment in children and adolescents. It consists of 5 child scales, Role Performance, Thinking, Behavior Toward Self and Others, Mood/Emotions and Substance Abuse, as well as two child caregiver scales, Basic Needs and Family/Social Support. For each scale, the extent of problems is rated on a 4-point scale. The rater assesses either behavioral impairment itself or behavioral indicators of problems, by choosing among behavior descriptions.
Target Audience/ Age Group	Children & adolescents referred for MH services. / School-aged children, aged 6 to 17 years (1st-12th grade). There is a "downward" version for children ages 4-6, Preschool & Early Childhood Functional Assessment Scale (PECFAS)
Copyright Status / Cost	Copyrighted / Varies depending on format (written form, clinical summary profile form, scannable answer format, coputerized CAFAS program).
Primary Use	Tracking clinical outcome for individual clients; assigning cases to appropriate levels of care; generating a strengths-based treatment plan; active case management; communicating with caregivers about youth's needs; maintaining clinical documentation which can withstand audits; maintaining a database for administrative and clinical use; evaluating program efficacy.
Respondent	A staff member/ professional who is well-informed about the child and is a reliable rater on the CAFAS. Training to ensure satisfactory inter-rater reliability is required and can be accomplished with the CAFAS Self-Training Manual.
Number of Items / Admin. Time	150 items: 8 scales about youth's functioning, 2 scales about caregiver's functioning / 10 to 15 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Spanish
Strengths	Widely used, especially by public agencies. Can be completed quickly and easily by trained professionals.
Limitations	Training is costly, especially for private providers that have high turnover rates. Does not directly incorporate child's or family member's perceptions.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	CALOCUS: Child and Adolescent Level of Care Utilization System for Psychiatric and Addiction Services*
Index Number	28
Developer	Wesley Sowers, MD and a committee, through the American Association of Community Psychiatrists
Contact/Org./Phone/ E-mail/Web	Jack Stevenson, Deerfield Behavioral Health, 2808 State Street, Erie, PA 16508, 814-456-2457, jacks@dbhn.com, http://www.dbhn.com/locus.html
Brief Description	The CALOCUS instrument provides a quantitative assessment using six parameters: Risk of Harm; Functional Status; Psychiatric, Medical and Addictive Co-Morbidity; Recovery Environment; Treatment and Recovery History; and Attitude and Engagement. The system includes a methodology for translating the completed assessment into a recommendation for a certain level of resource intensity to meet the needs indicated. LOCUS defines six "levels of care" which attempt to provide a framework for specifying an individualized plan for care in the context of variable service intensity related to a client's level of need.
Target Audience/ Age Group	Psychiatrists / individuals 18 and under
Copyright Status / Cost	Copyrighted
Primary Use	Primary use is as a quantifiable measure to guide assessment, level of care placement decisions, and continued stay criteria. LOCUS provides a common language and set of standards with which to make judgments and recommendations.
Respondent	Clinician, probably mainly psychiatrist
Number of Items / Admin. Time	Six evaluation parameters; six levels of care; a scoring methodology. / No information.
Norms / Computer Scoring / Foreign- Language Translation	None
Strengths	Serves the specific purpose of helping clinician determine recommendations for appropriate placement.
Limitations	Not really intended as an outcome measure. Included here because it offers a unique perspective on assessment.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Child and Adolescent Needs and Strengths (CANS-MH)*
Index Number	29
Developer	John S. Lyons, Ph.D.
Contact/Org./Phone/ E-mail/Web	Buddin Praed Foundation, 558 Willow Road, Winnetka, IL 60093, http://www.buddinpraed.org/about/
Brief Description	The CANS-MH was developed to assist in the management and planning of services to children and adolescents and their families with the primary objectives of permanency, safety, and improved quality of life. The CANS-MH is designed for use at two levels- for the individual child and family and for the system of care. It provides a structured assessment of children along a set of dimensions relevant to service planning and decision-making. Also, the CANS-MH provides information regarding the child and family's service needs for use during system planning and/or quality assurance monitoring. Due to its modular design, the tool can be adapted for local applications without jeopardizing its psychometric properties.
Target Audience/ Age Group	CANS-MH decision support/outcomes management tools have been designed for use in mental health, child welfare, juvenile justice, developmental disability/mental retardation, early intervention, and programs for sexually aggressive youth. / Ages 4-18
Copyright Status / Cost	Copyrighted / Free, through the Buddin Praed Foundation
Primary Use	The CANS-MH assessment tool is designed to give a profile of the needs and strengths of the child and family. It can be used as a prospective tool for service planning and as a retrospective assessment tool. As a retrospective tool, it assesses children and adolescents currently in care and the functioning of the current system in relation to the needs and strengths of the child and family. It points out gaps in the current service system. This information can then be used to design and develop the appropriate community-based, family-focused system of services. Retrospective review of prospectively completed CANS allows for a form of measurement audit to facilitate the reliability and accuracy of information.
Respondent	Professional, para-professional or parent advocate. An individual with a minimum of a bachelor's degree who has had some training or experience with mental health can use the CANS-MH reliably after training.
Number of Items / Admin. Time	45 on Adolescent version / Retrospective case review: 20-25 minutes; Prospective / interview: 45 minutes
Norms / Computer Scoring / Foreign- Language Translation	No information
Strengths	Various versions of the CANS are now used in at least 24 states and Canada. Other instruments developed by John Lyons, but not currently readily available for purchase, include the Acuity of Psychiatric Illness Scale - Child and Adolescent Version and the Severity of Psychiatric Illness Scale - Child and Adolescent Version.

Limitations

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Child Behavior Checklist (CBCL) 6-18*
Index Number	30
Developer	Thomas M. Achenbach, Ph.D.
Contact/Org./Phone/ E-mail/Web	University Medical Education Assoc., Child Behavior Checklist, 1 South Prospect Street, Burlington, VT 05401-3456, Fax 802-656-2602, checklist@uvm.edu - http://checklist.uvm.edu ; also at http://www.psychtest.com/curr01/CATLG024.HTM#030000003473
Brief Description	The CBCL/6-18 obtains parents' reports of a wide range of competencies and problems. Profile for scoring the CBCL/6-18 includes 3 competence scales, total competence, 8 cross-informant syndromes, internalizing, externalizing, and total problem scales.
Target Audience/ Age Group	Parents' reports of a wide range of competencies and problems observed in their children / Ages 6-18
Copyright Status / Cost	Copyrighted
Primary Use	Assessment, screening, treatment planning, change over time, post-treatment follow-up.
Respondent	Parents
Number of Items / Admin. Time	120 problems items, 20 competence items / 15-20 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Foreign Language
Strengths	The CBCL has been widely used by a variety of programs and research projects over many years. Some 4,500 publications report use of the CBCL and related instruments.
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Child Functional Assessment Rating Scale (CFARS)*
Index Number	31
Developer	John Ward
Contact/Org./Phone/ E-mail/Web	Louis De La Parte FL MH Institute, U. of South FL, 13301 Bruce B. Downs Blvd., Tampa, FL 33612-3807, (813) 974-1929, ward@fmhi.usf.edu http://outcomes.fmhi.usf.edu/
Brief Description	The CFARS provides the same format as the FARS for Adults for documenting the functional status of children and adolescents using domains relevant to evaluating those populations.
Target Audience/ Age Group	Primarily state agencies/children and adolescents
Copyright Status / Cost	Copyrighted / Instrument, web based training and certification system, user manuals, and data entry/report generating software can be downloaded and installed on one's computer or network free of charge. All are available on the website.
Primary Use	The FARS was originally developed for use in Florida, to help providers meet the requirements of the Government Performance and Accountability Act, which was passed in 1994. It was adapted from the Colorado Client Assessment Record (CCAR), and is used in several other states, including Illinois and New Mexico. The CFARS was developed from the FARS.
Respondent	Clinician, with training.
Number of Items / Admin. Time	16 problem severity rating areas of cognitive, social and role functioning, rated on 7-point scale. Also, demographic and quality of life questions, as well as diagnosis and level of care information. / 5-15 minutes after conducting a mental status or admission/discharge interview.
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring
Strengths	Encompasses many domains, includes functional as well as intrapsychic measures. Is widely used. Support available from USF, including Web-based training that takes, on average, 67 minutes to complete.
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	The Children's Global Assessment Scale (CGAS)*
Index Number	32
Developer	David Shaffer, MD, Madelyn Gould, Ph.D., Hector Bird, MD, Prudence Fisher, BA
Contact/Org./Phone/ E-mail/Web	David Shaffer, MD, Division of Child & Adol. Psychiatry, Columbia University/New York State Psychiatric Institute, 722 West 168th Street, Unit 78, New York, NY 10032
Brief Description	The CGAS is an adaption of the GAS designed to reflect the lowest level of functioning for a child or adolescent during a specified period of time. It allows the rater to assimilate and synthesize his or her knowledge about many different aspects of a patient's social and psychiatric functioning and condense it into a single clinically meaningful index of severity of disturbance. It has been used in numerous studies, as well as clinically, to classify overall severity of problems (and is very similar to the GAF in the DSM system).
Target Audience/ Age Group	Age 4-16. Can be used in older children (up to 18) if in "childlike" setting (i.e. still in school)
Copyright Status / Cost	Public domain / None
Primary Use	To classify overall severity of problems (degree of disability experienced by children because of their psychiatric symptoms). Clinician rates the subject's "most impaired level of general functioning."
Respondent	A rating is assigned by a clinician after an interview with the child and/or after reviewing case materials.
Number of Items / Admin. Time	One summary score is assigned. There are ten anchor points/ descriptions to guide the clinician in determining the score. / 30 seconds up to 5-10 minutes
Norms / Computer Scoring / Foreign- Language Translation	No information
Strengths	Easy for clinicians to understand and use, especially because of its similarity to the GAF in the DSM system.
Limitations	Deficit based. Because rating is global, may not readily show change. Also, does not pinpoint problems, assist in diagnosis, or guide treatment.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	The Columbia Impairment Scale
Index Number	33
Developer	Hector Bird, M.d., David Shaffer, M.D., Prudence Fisher, M.A.
Contact/Org./Phone/ E-mail/Web	NY State Psychiatric Institute, Unit 78, 1051 Riverside Drive, New York, NY 10032, 212-543-5191, Fax: 212-543-5966
Brief Description	13 item scale that provides a global measure of impairment. The 13 items tap four major areas of functioning: interpersonal relations, broad psychopathological domains, functioning in job or school and use of leisure time. Items are scored from 0 (no problem) to 4 (big problem) and a total score consisting of the sum of item scores is generated. Score of 16 or greater discriminates between those who are definitely impaired and others. Self-report of youth or of parent about the youth (separate versions available).
Target Audience/ Age Group	Children aged 9-17
Copyright Status / Cost	Public domain / None
Primary Use	In research projects
Respondent	Parent or youth
Number of Items / Admin. Time	13 / 2-3 minutes
Norms / Computer Scoring / Foreign- Language Translation	Computer Scoring / Spanish
Strengths	
Limitations	The parent administered instrument has better psychometric properties than the version administered directly to youth.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Devereux Rating Scale School Form (DSF)
Index Number	34
Developer	Jack Naglieri, Paul LeBuffe, Steven Pfeiffer
Contact/Org./Phone/ E-mail/Web	The Psychological Corporation, 19500 Bulverde, San Antonio, TX 78259, 1-800-872-1726, CustomerCare@Harcourt.com, www.PsychCorp.com
Brief Description	The Devereux Behavior Rating Scale—School Form can be used as a tool for identifying behaviors that may indicate severe emotional disturbances in children and adolescents. The four subscales address the individual areas identified in the federal definition of Serious Emotional Disturbance. These are Interpersonal Problems, Inappropriate Behaviors/Feelings, Depression, and Physical Symptoms/Fears.
Target Audience/ Age Group	Children aged 5-12, adolescents 13-18.
Copyright Status / Cost	Copyrighted / \$156 for Manual, Child Ready Score Answer Documents 5-12 (package of 25) and Adolescent Ready Score Answer Documents 13-18 (package of 25).
Primary Use	The 40-item scale is especially effective when used in conjunction with other findings to monitor and evaluate progress during educational interventions, or to determine whether a seriously emotionally disturbed child or adolescent should be placed in a special program.
Respondent	Parents and teachers
Number of Items / Admin. Time	40 / 5 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms
Strengths	
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Devereux Scales of Mental Disorders
Index Number	35
Developer	Jack Naglieri, Paul LeBuffe, Steven Pfeiffer
Contact/Org./Phone/ E-mail/Web	The Psychological Corporation, 19500 Bulverde, San Antonio, TX 78259, 1-800-872-1726, CustomerCare@Harcourt.com, www.PsychCorp.com, also at http://www.psychtest.com/curr01/CATLG024.HTM#030000003473
Brief Description	The Devereux Scales of Mental Disorders help professionals evaluate behavior in a variety of settings, compare results to a large national sample, and analyze information for treatment planning and evaluation of treatment effectiveness. Child form has 111 items and adolescent form has 110 items.
Target Audience/ Age Group	Children (5-12) and adolescents (13-18)
Copyright Status / Cost	Copyrighted / \$205 for Manual, package of 25 Child Ready Score Answer Documents and 25 Adolescent Ready Score Answer Documents
Primary Use	Indicates whether child or adolescent is experiencing, or is at risk for, an emotional or behavioral disorder. Covers a full range of psychopathology; is based on DSM-IV categories.
Respondent	Any adult who has known the child for four weeks. Same form is used for parent and teacher raters.
Number of Items / Admin. Time	111 on child form; 110 on adolescent form / 15 minutes
Norms / Computer Scoring / Foreign- Language Translation	Separate norms for parent and teacher raters, by sex
Strengths	
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Diagnostic Interview Schedule for Children, or DISC-IV, also known as NIMH-DISC-IV
Index Number	36
Developer	
Contact/Org./Phone/ E-mail/Web	Prudence Fisher, Ph.D.; NIMH-DISC Training Center at Columbia University/New York State Psychiatric Institute, 1051 Riverside Drive Unit 78, New York, NY 10032, Phone: (212) 960-2357 or (212) 960-2424, Fax: (212) 568-8856, E-mail: nimhdisc@child.com
Brief Description	The NIMH-DISC-IV is a diagnostic interview covering most of the common mental disorders of children and adolescents. Over thirty diagnoses can be assessed using the DISC, within both the past year and the last four weeks. These diagnoses are based on diagnostic criteria as specified in DSM-IV, DSM-III-R, and ICD-10. Uses of the DISC range from large-scale epidemiologic surveys, clinical studies, screening projects, to service settings. The DISC is designed to be administered by "lay" (clinically untrained) interviewers. This is possible because of the highly structured nature of the interview, in that questions are intended to be read out exactly as written, and are almost always limited to a 'yes' or 'no' response. There are separate interviews for the parent/caretaker and the child. Both are available on paper or disk.
Target Audience/ Age Group	Child interview for children 9-17; Parent interview for parent of child 6-17.
Copyright Status / Cost	Public domain, but need permission to make any changes or translate. / Major cost is in training: several days required, from Columbia-based trainers, @ \$300 to \$1000 per day, determined by location of training and number of trainees.
Primary Use	Primary use is in funded research projects.
Respondent	Takes the form of a face-to-face or computerized interview
Number of Items / Admin. Time	The DISC-Y contains 2,930 questions (the DISC-P contains slightly more). Of these, 358 are "stem" questions, which are asked of every respondent, and 1,341 are "contingent" questions, which are asked only if a stem or a previous contingent question is answered positively. There are also 732 questions that ask about age of onset, impairment, and treatment, which are asked only if a "clinically significant" number of diagnostic criteria are endorsed. / 90 to 120 minutes per informant
Norms / Computer Scoring / Foreign-Language Translation	Computer Scoring: The DISC is scored using a computer algorithm, programmed in SAS. Algorithms have been prepared to score both the parent and the youth versions. At the end of the interview, the computer program scans all of the responses, matches them with algorithm / Spanish version finalized; numerous other languages in process.
Strengths	Widely tested child and teen structured psychiatric interview; does not require a clinician to administer; tested in clinical and community populations; highly structured; all probes contained within interview.
Limitations	Not practical outside well funded research projects because of cost of training, length of instrument, time and infrastructure needed for administration.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Ohio Youth Problems, Functioning, and Satisfaction Scales (Ohio Scales)*
Index Number	37
Developer	Ben Ogles, Ph.D.
Contact/Org./Phone/ E-mail/Web	Ben Ogles, Ph.D., Ohio Scales, 241 Porter Hall, Ohio University, Athens, OH 45701, 740-593-1077
Brief Description	There are three parallel forms for completion by the Youth (self-report for ages 12 and older), the youth's Parent (or primary caretaker) and the youth's agency worker/case manager. Measures Problem Severity and Functioning from the perspectives of youth, parents and agency workers. Measures Hopefulness and Satisfaction from the perspectives of youth and parents.
Target Audience/ Age Group	Children & adolescents with severe behavioral or emotional disorders. / Ages 5-18
Copyright Status / Cost	Copyrighted / Onetime fee per user which depends on the size of the organization and potential use.
Primary Use	Change over time; quality improvement.
Respondent	Self-report; clinican/ case worker; parent
Number of Items / Admin. Time	Problems - 44; Satisfaction - 4; Hopefulness - 4; Functioning - 20; Total - 72 / 10-15 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms for Ohio / Computer Scoring / Chinese, Japanese, Korean, Mexican, Puerto Rican, and Russian
Strengths	Developed as part of a statewide process and widely used throughout Ohio.
Limitations	

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Treatment Outcomes Package (TOP)*
Index Number	39
Developer	David R. Kraus, Ph.D., John Jordan, Ph.D.
Contact/Org./Phone/ E-mail/Web	David Kraus, Ph.D., Behavioral Health Laboratories, 50 Main Street, Ashland, MA, 800-329-0949, www.bhealthlabs.com
Brief Description	The TOP measures a full range of behavioral health symptoms on 11 subscales along with patient satisfaction with treatment.
Target Audience/ Age Group	Children and Adolescents in treatment at any level of care. (Separate instruments for child and adolescent) / Child version - 3-18; adolescent version - 12-18
Copyright Status / Cost	Copyrighted / \$3-\$5 per administration depending on volume. Short versions from \$0.50-\$2.50.
Primary Use	Each tool is designed to aid the clinician in initial assessment and treatment planning. The tools provide baseline outcome assessment across multiple clinical and functional domains so that future TOP administrations can measure outcomes and help make necessary clinical changes. The TOP can be administered at various points in or after treatment. It provides diagnostic suggestions based on DSM-IV algorithms.
Respondent	Client. However, it can be used as a structured interview or completed by the clinician. Each type of administration is handled differently. For child versions primary custodian, care-giver, clinician, social service worker, or the child him/ herself can complete the form.
Number of Items / Admin. Time	9-140 depending on whether short, medium or long form is used. / About 30 minutes
Norms / Computer Scoring / Foreign- Language Translation	Norms / Computer Scoring / Spanish
Strengths	Offers a complete system for measuring outcomes, comparing clients to norms, returning reports to clinicians and administrators, Includes questions on former treatment, health and stress, as well as demographics, Also includes a consumer satisfaction component.
Limitations	Few if any reports on use in peer-reviewed literature. Instrument includes little functional information.

- Copy of instrument available.

CHILD INSTRUMENTS CURRENTLY USED FOR OUTCOME MEASUREMENT

Name of Instrument	Youth Outcome Questionnaires -- Y-OQ-2.01 and Y-OQO-2.0-SR
Index Number	40
Developer	Michael J. Lambert, Ph.D., and Gary M. Burlingame, Ph.D.
Contact/Org./Phone/ E-mail/Web	American Professional Credentialing Services, LLC, 10421 Stevenson Rd., Box 346, Stevenson, MD 21153, www.oqfamily.com
Brief Description	The Y-OQO -2.01 is an assessment tool completed by the parent. This tool provides information on clinical risk, as well as the patient's overall level of psychological distress. The Y-OQO -2.0 SR is the adolescent self-report version Questionnaire. As with the Y-OQO -2.01, the Y-OQO -2.0 SR is specifically constructed as a progress tracking and outcome measurement device, unlike diagnostic measures oriented to the measurement of psychopathology. Through the use of cut-off scores and a reliable change index, the Y-OQO -2.0 SR permits determination of the client's behavioral similarity at each measurement interval to a residential, partial hospital population, outpatient populations, and a large, untreated community sample.
Target Audience/ Age Group	Parents of children in treatment, aged 4 to 17; Adolescents receiving MH treatment/ages 12 to 18
Copyright Status / Cost	Copyrighted
Primary Use	The two instruments are designed to serve as additional sources of data in tracking treatment progress for adolescents receiving mental health treatment.
Respondent	Two instruments, one for parent and another for adolescent.
Number of Items / Admin. Time	64 items on parent scale; No information on adolescent self-report instrument. / No information on parent scale; 7 minutes for adolescent self-report instrument.
Norms / Computer Scoring / Foreign- Language Translation	Norms/Computer scoring
Strengths	Intended to be sensitive to change, and to assess risk and assist with treatment planning.
Limitations	

- Copy of instrument available.



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**INSTRUMENTS FOR SPECIFIC CONDITIONS
ADD/ADHD**

Name of Instrument **ADHD Rating Scale-IV**

Distributor Guilford Press

Address / Phone 72 Spring Street
New York, NY 10012
800-365-7006

Email / Web www.therapeuticresources.com

**INSTRUMENTS FOR SPECIFIC CONDITIONS
ADD/ADHD**

Name of Instrument **ADHD Symptom Checklist-4 (ADHD-SC4)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ADD/ADHD

Name of Instrument **ADHD Symptom Rating Scale (ADHD-SRS)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

INSTRUMENTS FOR SPECIFIC CONDITIONS ADD/ADHD

Name of Instrument **Brown Attention-Deficit Disorder Scales (Brown ADDScale)**

Distributor The Psychological Corporation

Address / Phone

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ADD/ADHD

Name of Instrument **Connors' Adult ADHD Rating Scales (CAARS)**

Distributor Multi-Health Systems, Inc.

Address / Phone 908 Niagra Falls Blvd.
North Tonawanda, NY 14120-2060
800-456-3003

Email / Web www.mhs.com

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ANGER

Name of Instrument **Adolescent Anger Rating Scale (AARS)**

Distributor The Psychological Corporation

Address / Phone

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

INSTRUMENTS FOR SPECIFIC CONDITIONS ANGER

Name of Instrument **State-Trait Anger Expression Inventory-2**

Distributor Mind Garden, Inc.

Address / Phone 1690 Woodside Road, Suite 202
Redwood City, CA 94061
650-261-3500

Email / Web [www.mindgarden.com/Assessments/name\(p-s\).htm](http://www.mindgarden.com/Assessments/name(p-s).htm)

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument **Adult Manifest Anxiety Scale (AMAS)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument **Beck Anxiety Inventory (BAI)**

Distributor The Psychological Corporation

Address / Phone 555 Academic Court,
San Antonio, TX 78204-2498
800-228-0752

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument	Multidimensional Anxiety Scale for Children-Revised: Child (MASC-R), Parent (PASC-R: Parent)
Distributor	Multi-Health Systems, Inc.
Address / Phone	908 Niagra Falls Blvd. North Tonawanda, NY 14120-2060 800-456-3003
Email / Web	www.mhs.com

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument	Revised Children's Manifest Anxiety Scale (RMAS)
Distributor	Western Psychological Services
Address / Phone	12031 Wilshire Blvd. Los Angeles, CA 90025-1215 800-648-8857
Email / Web	www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument **Social Phobia and Anxiety Inventory for Children (SPAI-C)**

Distributor The Psychological Corporation

Address / Phone

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument **State-Trait Anxiety Inventory for Adults**

Distributor Mind Garden, Inc.

Address / Phone 1690 Woodside Road, Suite 202
Redwood City, CA 94061
650-261-3500

Email / Web [www.mindgarden.com/Assessments/name\(p-s\).htm](http://www.mindgarden.com/Assessments/name(p-s).htm)

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS ANXIETY

Name of Instrument	State-Trait Anxiety Inventory for Children
Distributor	Mind Garden, Inc.
Address / Phone	1690 Woodside Road, Suite 202, Redwood City, CA 94061 650-261-3500
Email / Web	www.mindgarden.com/Assessments/name(p-s).htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS BEHAVIOR

Name of Instrument	Revised Behavior Problem Checklist
Distributor	PAR, Inc.
Address / Phone	P.O. Box 998 Odessa FL 33556 800-331-8378
Email / Web	www.parinc.com/product.cfm?ProductID=94

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS CONDUCT DISORDER

Name of Instrument	Conduct Disorder Scale (CDS)
Distributor	Western Psychological Services
Address / Phone	12031 Wilshire Blvd. Los Angeles, CA 90025-1215 800-648-8857
Email / Web	www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument Beck Depression Inventory - Second Edition (BDI-II)

Distributor The Psychological Corporation

Address / Phone 19500 Bulverde Road
San Antonio, Texas 78259
1-800-211-8378

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument Carroll Depression Scales-Revised

Distributor MHS, Inc.

Address / Phone P.O. Box 950
No. Tonawanda, NY, 14120-0950
1-800-456-3003

Email / Web www.mhs.com

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Children's Depression Inventory (CDI)**

Distributor The Psychological Corporation

Address / Phone 19500 Bulverde Road
San Antonio, Texas 78259
1-800-211-8378

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Children's Depression Rating Scale, R (DCRS-R)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Depression Arkansas Scale (D-ARK Scale)**

Distributor Center for Outcomes Research and Effectiveness (CORE)

Address / Phone University of Arkansas for Medical Sciences
4301 West Markam
Little Rock, AR 72201
501-660-7550

Email / Web www.uams.edu/core/home.html - www.netoutcomes.net

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Multiscore Depression Inventory for Adolscents and Asults (MDI)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Multiscore Depression Inventory for Children (MDI-C)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Revised Hamilton Rating Scale for Depression (RHRSD)**

Distributor Western Psychological Services

Address / Phone 12031 Wilshire Blvd.
Los Angeles, CA 90025-1215
800-648-8857

Email / Web www-secure.earthlink.net/www.wpspublish.com/Inetpub4/catalog/w04.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **Reynolds Adolescent Depression Scale, 2nd Edition (RADS-2)**

Distributor The Psychological Corporation

Address / Phone 19500 Bulverde Road
San Antonio, Texas 78259
1-800-211-8378

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

INSTRUMENTS FOR SPECIFIC CONDITIONS DEPRESSION

Name of Instrument **The Depression Outcomes Module (DOM)**

Distributor Center for Outcomes Research and Effectiveness (CORE)

Address / Phone Pat Piazza
5800 W. 10th Street, Suite 605
Little Rock, AR 72204

Email / Web www.netoutcomes.net

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS EATING DISORDERS

Name of Instrument	Eating Inventory
Distributor	The Psychological Corporation
Address / Phone	19500 Bulverde Road San Antonio, Texas 78259 1-800-211-8378
Email / Web	http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS HOPELESSNESS

Name of Instrument	Beck Hopelessness Scale (BHS)
Distributor	The Psychological Corporation
Address / Phone	19500 Bulverde Road San Antonio, Texas 78259 1-800-211-8378
Email / Web	http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS OBSESSIVE-COMPULSIVE

Name of Instrument	Clark-Beck Obsessive-Compulsive Inventory (CBOCI)
Distributor	The Psychological Corporation
Address / Phone	19500 Bulverde Road San Antonio, Texas 78259 1-800-211-8378
Email / Web	http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS PANIC DISORDER

Name of Instrument **Panic Disorder Severity Scale**

Distributor no answer - maybe Dept. of Psychiatry, University of Pittsburgh School of
Medicine - Authors are Shear, M.K., Brown, T., Sholomskas, D., Barlow, D.H.,
Gorman, J., Woods, S. and Cloitre, M.

Address / Phone

Email / Web

INSTRUMENTS FOR SPECIFIC CONDITIONS PANIC DISORDER

Name of Instrument **Panic Outcome Module (POM)**

Distributor University of Arkansas for Medical Sciences

Address / Phone 4301 West Markam
Little Rock, AR 72201

Email / Web www.netoutcomes.net

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS PHOBIC DISORDERS

Name of Instrument **Phobic Avoidance Rating Scale (PARS)**

Distributor Asle Hoffart

Address / Phone

Email / Web email - forskning@modum.bad.no

INSTRUMENTS FOR SPECIFIC CONDITIONS PHOBIC DISORDERS

Name of Instrument **Social Phobia and Anxiety Inventory for Children (SPAI-C)**

Distributor The Psychological Corporation

Address / Phone 19500 Bulverde Road
San Antonio, Texas 78259
1-800-211-8378

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS PTSD

Name of Instrument	Clinician-Administered PTSD Scale (CAPS-CA) Child and Adolescent Version
Distributor	National Center for PTSD (116D)
Address / Phone	VA Medical Center & Regional Office Center 215 N. Main Street White River Junction, VT 05009
Email / Web	www.ncptsd.org/publications/assessment/caps_ca.html

INSTRUMENTS FOR SPECIFIC CONDITIONS PTSD

Name of Instrument	Detailed Assessment of Posttraumatic Stress (DAPS)
Distributor	The Psychological Corporation
Address / Phone	19500 Bulverde Road San Antonio, Texas 78259 1-800-211-8378
Email / Web	http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS SUICIDE

Name of Instrument Beck Scale for Suicide Ideation (BSS)

Distributor The Psychological Corporation

Address / Phone 1950 Bulverde Road
San Antonio, Texas 78259
1-800-211-8378

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

INSTRUMENTS FOR SPECIFIC CONDITIONS SUICIDE

Name of Instrument Suicidal Ideation Questionnaire (SIQ)

Distributor The Psychological Corporation

Address / Phone 1950 Bulverde Road
San Antonio, Texas 78259
1-800-211-8378

Email / Web <http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm>

- Copy of instrument available.

INSTRUMENTS FOR SPECIFIC CONDITIONS TRAUMA

Name of Instrument	Trauma Symptom Checklist for Children (TSCC)
Distributor	The Psychological Corporation
Address / Phone	19500 Bulverde Road San Antonio, Texas 78259 1-800-211-8378
Email / Web	http://marketplace.psychcorp.com/PsychCorp.com/Cultures/en-US/Catalog/CatalogHome.htm

- Copy of instrument available.



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ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument	Addiction Severity Index
Distributor	A. Thomas McLellan
Address / Phone	A. Thomas McLellan, Ph.D. Building 7, PVAMC University Avenue Philadelphia, PA 19104; 215-399-0980
E-mail or Web	E-Mail: tmclellan@tresearch.org http://www.niaaa.nih.gov/publications/asi.htm

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument	Alcohol Expectancy Questionnaire (AEQ)
Distributor	University of South Florida
Address / Phone	Mark S. Goldman, Ph.D. Department of Psychology University of South Florida, Tampa, FL 33620
E-mail or Web	

- Copy of instrument available.

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Alcohol Use Disorders Identification Test (AUDIT)**

Distributor Alcohol Research Center

Address / Phone Thomas F. Babor
University of Connecticut
Farmington, CT 06030-1410

E-mail or Web

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Alcohol Use Inventory (AUI)**

Distributor Pearson Assessments / National Computer Systems, Inc.

Address / Phone P.O. Box 1416,
Minneapolis, MN 55440
1-800-627-7271

E-mail or Web <http://www.pearsonassessments.com>; pearsonassessments@pearson.com

- Copy of instrument available.

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Alcohol/Substance Abuse Questionnaire (ASAQ)**

Distributor Performance-Based Outcomes, Inc.

Address / Phone William J. Filstead, Ph.D.
5215 Old Orchard Road, Suite 700
Skokie, IL 60077-1045
847-779-8550

E-mail or Web pbo@mcs.com; www.consultnews.com

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Chemical Dependency Assessment Profile (CDAP)**

Distributor Psychologistics, Inc.

Address / Phone 268 N. Babcock Street, Suite B-1
Melbourne, FL 32935

E-mail or Web

- Copy of instrument available.

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Drug Use Screening Inventory (revised) (DUSI)**

Distributor Gordian Group

Address / Phone David Gorney
PO Box 1587
Hartsville, SC 29550
1-843-383-2201

E-mail or Web Dgorney@mindspring.com
www.dusi.com

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Follow-up Drinker Profile**

Distributor Psychological Assessment Resources, Inc.

Address / Phone PO Box 998
Odessa, FL 33556
1-800-331-8378

E-mail or Web

- Copy of instrument available.

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument Michigan Alcoholism Screening Test

Distributor Melvin L. Seltzer, Ph.D.

Address / Phone 4016 3rd Avenue
San Diego, CA 92103
619-299-4043

E-mail or Web

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument Net Outcome Substance Abuse Outcomes Module (SAOM)

Distributor Center for Outcomes Research and Effectiveness (CORE)

Address / Phone Pat Piazza
5800 W 10th Street, Suite 605
Little Rock, AR 72204

E-mail or Web www.netoutcomes.net

- Copy of instrument available.

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Rutgers Alcohol Problem Index (RAPI)**

Distributor Center of Alcohol Studies, Rutgers University

Address / Phone Dr. Robert Pandina or Helene White
607 Allison Road
Piscataway, NJ 08854-8001
732-445-2190

E-mail or Web <http://www.rci.rutgers.edu/~cas2>

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Short Alcohol Dpendence Data (SADD)**

Distributor Moderation Management Network, Inc.

Address / Phone Moderation Management Network, Inc. c/o HRC
22 W 27th St.
New York, NY 10001
212-871-0974

E-mail or Web www.moderation.org/Questionnaire.htm

- Copy of instrument available.

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Substance Use Disorders Diagnostic Schedule (SUDDS-IV)**

Distributor New Standards, Inc.

Address / Phone 1080 Montreal Avenue, Suite 300
St. Paul, MN 55116
612-690-1002 or 1-800-755-6299

E-mail or Web

ADULT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **The Substance Abuse Subtle Screening Inventory (SASSI)**

Distributor The SASSI Institute

Address / Phone 201 Camelot Lane
Springville, IN 47462
1-800-726-0526

E-mail or Web <http://www.sassi.com>

- Copy of instrument available.



**DECISION SUPPORT 2000+: REPORT ON INSTRUMENTS, SOFTWARE AND
WEB-BASED SYSTEMS USED FOR OUTCOME MEASUREMENT IN
BEHAVIORAL HEALTHCARE (2003)**

ADOLESCENT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Adolescent Drinking Index (ADI)**

Distributor Psychological Assessment Resources, Inc.

Address / Phone P.O. Box 998
Odessa, FL 33556
1-800-331-TEST

E-mail or Web www.parinc.com

ADOLESCENT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Adolescent Drug Abuse Diagnosis**

Distributor Alfred S. Friedman, Ph.D. and Arlene Utada, M.Ed.

Address / Phone Belmont Center for Comprehensive Treatment
4200 Monument Road
Philadelphia, PA 19131
215-877-6408

E-mail or Web

- Copy of instrument available.

ADOLESCENT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Alcohol Expectancy Adolescent (AEQ-A)**

Distributor University of South Florida

Address / Phone Mark S. Goldman, Ph.D.
Department of Psychology
University of South Florida
Tampa, FL 33620

E-mail or Web

ADOLESCENT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Problem Oriented Screening Instrument for Teenagers (POSIT)**

Distributor National Institute on Drug Abuse or National Clearinghouse for Alcohol and
Drug Information

Address / Phone Dr. Elizabeth Rahdert, Division of Clinical and Services Research,
NIDA, 6001 Executive Blvd, Rm4229, MSC 9563
Bethesda, MD 20892-9563
or
Nat'l Clearinghouse for Alcohol & Drug Information
PO Box 2345
Rockville, MD, 20847-2345
1-800-729-6686

E-mail or Web

- Copy of instrument available.

ADOLESCENT SUBSTANCE ABUSE OUTCOMES INSTRUMENTS

Name of Instrument **Teen-Addiction Severity Index (T-ASI)**

Distributor University of Connecticut

Address / Phone Dr. Yifrah Kaminer, M.D.
263 Farmington Avenue
Farmington, CT 06030

E-mail or Web

- Copy of instrument available.



DECISION SUPPORT 2000+: REPORT ON INSTRUMENTS, SOFTWARE AND WEB-BASED SYSTEMS USED FOR OUTCOME MEASUREMENT IN BEHAVIORAL HEALTHCARE (2003)

**OUTCOME SOFTWARE AND SYSTEM VENDORS
MANAGEMENT INFORMATION SYSTEMS
WITH OUTCOMES MODULES**

Name of System	Anasazi Software, Inc.*
Index Number	41
Developer	Anasazi Software
Contact/Org./Phone/ E-mail/Web	Phone: 800-651-4411; http://www.anasazisoftware.com/ ; 9831 S. 51st Street Suite C117, Phoenix, AZ 85044
Brief Description	The Anasazi Assessment System offers an electronic record and a method to manage the clinical process by notifying the clinician when each clinical process should be completed via the Clinician's HomePage. Providers can choose from the more than 300 clinical forms provided free with the Assessment System. These forms cover all areas of behavioral health treatment. They emulate how staff complete paperwork. The forms can be viewed, printed, electronically signed, date stamped and co-signed. The Anasazi Assessment System also delivers a forms building application called the Anasazi WYSIWYG (What You See Is What You Get).
Target Audience/ Age Group	Anasazi's client base includes public and nonprofit social service agencies that provide behavioral health, development disability, substance abuse, child welfare and other services. Currently, large clients include private, non-profit providers in NY State, as well as providers in WA, OR, TX and VA.
Cost	Not provided
Primary Use	System incorporates clinical and fiscal components, and is intended to be used organization-wide.
Respondent	Many options available.
Number of Items / Admin. Time	Variable - depends on assessments chosen. / Variable - depends on assessments chosen.
Norms / Computer Scoring / Foreign-Language Translation	Determined by instrument chosen / No information / No information
Strengths	System has been developed and continues to evolve based in large part on input from customers. The company uses a portion of the revenue from each contract to fund national and state users' groups which, in turn, help to control development of new software and enhancements to current software.

Limitations

- Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS MANAGEMENT INFORMATION SYSTEMS WITH OUTCOMES MODULES

Name of System	CCKids*
Index Number	42
Developer	CompuCare Mgmt. Systems
Contact/Org./Phone/ E-mail/Web	13740 Research Blvd. Suite U-2, Austin, TX 78750, http://www.compu-care.net/about.html
Brief Description	Internet based software (ASP) - CompuCare is not a software vendor, but a turn-key service provider specializing in customer support. CompuCare operates as an Application Service Provider offering comprehensive Internet-based MIS systems for social service organizations.
Target Audience/ Age Group	Child serving social service agencies
Cost	Subscription cost based on number of clients organization serves, begins at about \$1,000.
Primary Use	CompuCare is an online vendor of the Child and Adolescent Functional Assessment Scale. CompuCare is also the exclusive online vendor of the YOQ outcomes measure. With built-in CAFAS and YOQ, data can be integrated into standard outcomes tools allowing organizations to measure progress with clients.
Respondent	See information on CAFAS and YOQ
Number of Items / Admin. Time	See information on CAFAS and YOQ. / See information on CAFAS and YOQ
Norms / Computer Scoring / Foreign- Language Translation	See information on CAFAS and YOQ / See information on CAFAS and YOQ / See information on CAFAS and YOQ
Strengths	Customers have an impact on feature development through CCKids User Groups. All organizations using CCKids benefit from a world-wide base of subject matter expertise in treatment, workflow and reporting.
Limitations	Offers only two instruments. May require that organizations use multiple systems.

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS MANAGEMENT INFORMATION SYSTEMS WITH OUTCOMES MODULES

Name of System	The Echo Group*
Index Number	43
Developer	Series of instruments developed by BHOS, Inc.
Contact/Org./Phone/ E-mail/Web	http://www.echoman.com/
Brief Description	Software or Web-Based - Echo's clinical record software provides a wide range of clinical assessment tools and the algorithms to support scoring. Agencies may choose to outsource the analysis of their outcome measurement system to Echo's staff psychologists. Echo has acquired BHOS, a company that specializes in outcome measurement.
Target Audience/ Age Group	Behavioral health and human service organizations. Echo has implemented more than 500 systems throughout the US and Canada, in nonprofit organizations, government agencies, and for-profit entities, and has worked with agencies of all sizes from small counseling centers to comprehensive statewide systems.
Cost	No information
Primary Use	See Instrument list for specific information about each. Instruments are the Personal Problem Scale - Revised, the Personal Functioning Index, Clinician-rated Problem Scale - Revised, and the Clinician-rated Functioning Index.
Respondent	Client or clinician, varies by instrument.
Number of Items / Admin. Time	14 to 43 / 10 minutes or less
Norms / Computer Scoring / Foreign- Language Translation	Yes / Yes / None
Strengths	Instruments, scoring capability and norms are available at no additional charge as part of the Echo application. The Echo system incorporates integrated electronic clinical and financial systems. Customers can choose from web-based or client/server systems. Echo has 20 years of experience.
Limitations	Instruments available are not widely used or known in the field.

* Copy of information available.

**OUTCOME SOFTWARE AND SYSTEM VENDORS
MANAGEMENT INFORMATION SYSTEMS
WITH OUTCOMES MODULES**

Name of System	InfoMC, Inc.*
Index Number	44
Developer	No instruments
Contact/Org./Phone/ E-mail/Web	2250 Hickory Road Suite 400, Plymouth Meeting, PA 19462, www.infomc.com
Brief Description	Software - InfoMC specializes in providing software for the managed care industry. It does not provide outcome measurement instruments or systems to public or private provider systems, although it does offer a system into which outcome measures can be integrated.
Target Audience/ Age Group	Managed care companies, primarily
Cost	
Primary Use	
Respondent	
Number of Items / Admin. Time	
Norms / Computer Scoring / Foreign- Language Translation	
Strengths	
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS MANAGEMENT INFORMATION SYSTEMS WITH OUTCOMES MODULES

Name of System	PsychConsult [TM] Provider and PsychConsult[TM] MCO*
Index Number	45
Developer	Askesis Development Group, Inc.
Contact/Org./Phone/ E-mail/Web	One Chatham Center 112 Washington Place, Suite 300 Pittsburgh, PA 15219 Tel: 412-803-2400 - Fax: 412-803-2098 General and Sales Info: info@askesis.com
Brief Description	Software - Askesis Development Group provides practice management software for behavioral health and social services agencies. With this software, which includes an electronic medical record, customers can manage their business flow from the time of the initial call to their agency, through the evaluation/assessment stage, through the course of services, and to the creation of a bill that can be submitted to commercial or public funding sources. Built into the system is the capability for customers to select instruments they want to use. The system can also accommodate pathways (e.g., a prompt after the third session reminds the clinician to administer a Beck Depression Inventory).
Target Audience/ Age Group	For the Provider product, providers of BH services; for the MCO product, MBHOs and other managers of BH care
Cost	Each application is different, but the company estimates that it costs about \$90,000 to put 50 clinicians on-line.
Primary Use	Behavioral healthcare providers and MCOs. Currently, customers in 23 sttes.
Respondent	Various assessments can be embedded in the software. That is, end users can create their own customized screens, putting any assessment they use into the software. For example, a customer that uses the Beck depression scale can create a screen on which the Beck is displayed; clinicians can check off a specific patient's score without having to use paper and enter the results later.
Number of Items / Admin. Time	Determined by customer / Determined by customer
Norms / Computer Scoring / Foreign- Language Translation	Can be developed / Depends on instrument / Depends on instrument
Strengths	Flexible system that can be adapted to customer's needs.
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS MANAGEMENT INFORMATION SYSTEMS WITH OUTCOMES MODULES

Name of System	TIER (Totally Integrated Electronic Record) Workflow System*
Index Number	46
Developer	Sequest Tech., Inc.
Contact/Org./Phone/ E-mail/Web	2300 Cabot Drive, Suite 425, Lisle, IL 60532, http://www.sequest.net/
Brief Description	Software - The TIER outcomes measurement module is capable of using data collected and stored in the Workflow System software for outcomes measurement purposes. For example, it can use GAF/CGAF scores for comparative purposes, and has a number of other outcomes measurement processes built into the software. Because the software allows users to design their own outcomes studies, users have considerable flexibility in selecting data for comparative purposes.
Target Audience/ Age Group	Behavioral healthcare providers.
Cost	Outcomes module is not free-standing, is part of the total TIER system. No separate pricing.
Primary Use	The Sequest TIER Workflow System is primarily used by behavioral health, social services, child welfare, adoption, foster care and residential treatment programs.
Respondent	
Number of Items / Admin. Time	
Norms / Computer Scoring / Foreign- Language Translation	
Strengths	
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS MANAGEMENT INFORMATION SYSTEMS WITH OUTCOMES MODULES

Name of System	UNI/CARE Systems*
Index Number	47
Developer	UNI/CARE Systems, Pro-Filer [tm] system
Contact/Org./Phone/ E-mail/Web	540 North Tamiami Trail, Sarasota, FL 34236, Phone: (941) 954-3403, Fax (941) 954-2033 http://www.unicaresys.com
Brief Description	Software & Web-based - The outcomes module represents a functionality within the Pro-Filer[tm] system, rather than a set of instruments within a structured software program. Customers can select from a list of standard instruments or can create any form or instrument in an electronic format and include it in the system. These electronic forms can be as sophisticated as the customer wishes (e.g., just data collection or entire scoring routines and algorithms). The data from each instrument put into the Pro-Filer[tm] system is saved within the database, permitting a nearly infinite amount of analysis. For instance, on a standard instrument, the system can compare any question's response or score to all of the data in the data base, and to benchmark data. Structures are also built into several parts of the software to help customers collect outcome data as part of their standard clinical documentation.
Target Audience/ Age Group	All levels of care and all segments of the behavioral healthcare industry.
Cost	Cost varies according to number of users, ranging from \$7,500 to \$32,000.
Primary Use	Used by every level of care (i.e., inpatient through in-home services) and by nearly every segment of the behavioral healthcare industry(traditional mental health and substance abuse, foster care, developmental disabilities, state agencies, managed care organizations, etc.).
Respondent	Data can be client entered or collected as well as clinician entered data. Data can be collected using a multitude of input methods (i.e., PC computer, laptop, PDA, fax(Tele-Form), touch screen, telephone key pad (IVR), voice recognition, etc.).
Number of Items / Admin. Time	Determined by customer / Depends on instruments used.
Norms / Computer Scoring / Foreign- Language Translation	Norms can be created or imported / Yes / Possible
Strengths	UNI/CARE's Pro-Filer[tm] system offers a flexible capability to incorporate outcome measurement into operations. The system can accommodate data in nearly any format, and allows comparisons and benchmarking.
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	AdvantAssess*
Index Number	48
Developer	Advanta Care
Contact/Org./Phone/ E-mail/Web	85 Constitution Lane, Suite 2b, Danvers, MA 01923, 978-777-7887; http://www.advantacare.com/index.html
Brief Description	Web Based - System offers automated, interactive clinical assessment and messaging using a telephone, fax machine or Internet browser and ASP (Application Service Provider) architecture. AdvantAssess can call or email patients to administer initial or follow-up clinical status assessments, and report the results instantly by fax or email to providers and managers. Customers choose from a library of pre-built assessment protocols, or create their own, customized protocols. All activities, such as registering patients, beginning and ending episodes of care, enrolling patients in protocols, administering assessments, and requesting performance and administrative reports, can be performed using either a telephone or an Internet browser.
Target Audience/ Age Group	Primarily aimed at private sector providers and consumers.
Cost	Varies by size of system, type of instrument chosen
Primary Use	According to their Web site, AdvantaCare has over 60 customers nationwide, ranging from individual and small group practices to large, national managed care companies.
Respondent	Varies
Number of Items / Admin. Time	Varies / Varies
Norms / Computer Scoring / Foreign- Language Translation	Determined by instrument chosen / Yes / Yes
Strengths	Offers flexibility in choice of instruments.
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	Behavioral Health Laboratories, Inc.*
Index Number	49
Developer	Treatment Outcome Package
Contact/Org./Phone/ E-mail/Web	David Kraus, Ph.D., Behavioral Health Laboratories, 50 Main Street, Ashland, MA, 800-329-0949, www.bhealthlabs.com
Brief Description	Web-Based and Fax Back - BHL offers a system that includes a proprietary instrument that is faxed in for scoring; individual reports that are returned to the clinical site; monthly aggregate reports; and optional benchmarking reports. The BHL QuickACCESS reports are delivered within minutes and include decision support features.
Target Audience/ Age Group	Public and private provider systems
Cost	Depends on number of sites, clinicians and clients
Primary Use	Primarily used by mental health providers, both public and private.
Respondent	Client; system also includes clinician feedback instruments.
Number of Items / Admin. Time	Varies by instrument. / Varies by instrument.
Norms / Computer Scoring / Foreign- Language Translation	Yes / Yes / Spanish
Strengths	BHL offers a complete outcome measurement system, including a set of proprietary instruments and a system for data submission, cleaning, and reporting.
Limitations	Must use BHL instruments, which incorporate limited functional measures and minimal substance abuse information. Not directly part of or linked with a larger billing or practice management system.

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	Behavioral Pathway Systems*
Index Number	50
Developer	Behavioral Pathway Systems
Contact/Org./Phone/ E-mail/Web	Behavioral Pathway Systems, 505 Wabash Avenue, Marion, Indiana 46952; Email administrator@behavioralpathwaysys.org ; http://www.behavioralpathwaysys.org/ohio/
Brief Description	Behavioral Pathway Systems® is an outcome measurement option for mental health, residential and substance abuse facilities. The system incorporates a range of indicators plus the ability to select different comparative databases. Behavioral Pathway Systems® is an organizational and clinical performance measurement system, using critical pathway technology, specifically designed for the monitoring of the quality and outcome of behavioral health services. BPS has been providing performance measurement services since 1998. BPS offers flexibility of choice, applicability across settings, and comparisons against solidly established databases.
Target Audience/ Age Group	Community mental health programs, hospitals, and residential facilities; especially geared to "chronically mentally ill adults and children."
Cost	\$ 5,000.00 per year with no volume increases provides the basic ORYX Package
Primary Use	BPS has customers in Indiana, Florida, Delaware, and Ohio. Primarily inpatient facilities.
Respondent	Varies by instrument
Number of Items / Admin. Time	Varies by instrument. / Varies by instrument.
Norms / Computer Scoring / Foreign-Language Translation	Yes / No information / No information
Strengths	Instruments available include CAFAS and Ohio Adult Scales. Also offers system for using data gathered in course of service provision to audit outcomes and benchmark data.
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	FACE Recording and Measurement Systems*
Index Number	51
Developer	Proprietary instruments
Contact/Org./Phone/ E-mail/Web	http://www.facecode.com/Home_B30.htm
Brief Description	Software - FACE consists of three integrated components: An approach to working with information about people. A set of information recording and measurement tools which support the FACE approach. A suite of computer programs which support the FACE recording & measurement tools.
Target Audience/ Age Group	Service providers
Cost	Depends of number of users.
Primary Use	Used primarily by mental health agencies in UK.
Respondent	There are over 75 instruments available. System is generic, and can record and report on any instrument, whether completed by client, parent or clinician.
Number of Items / Admin. Time	Core Assessment: 8 pages; Health & Social Assessment, 12 pages. Items not numbered. / Varies by instrument.
Norms / Computer Scoring / Foreign- Language Translation	Each user can develop own norms / Yes / No
Strengths	
Limitations	Used primarily in the U.K. Also, not explicitly linked to a larger software system.

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	Multi-Health Systems Inc.*
Index Number	52
Developer	Psych-Manager and Psych-Manager Lite
Contact/Org./Phone/ E-mail/Web	P.O. Box 950, North Tonawanda, NY 14120-0950, 800-456-3003, FAX: (416) 492-3343 or (888) 540-4484 , http://www.mhs.com/
Brief Description	PsychManager Lite™ Ideally used in a clinical setting (appropriate tools include Conners' Rating Scales-Revised and the SCID Screen Patient Questionnaire). A full version of PsychManager is also available, which contains some extra features and functions not contained in PsychManager Lite™.
Target Audience/ Age Group	Offers Windows compatible software systems
Cost	The full version of Psych Manager™, which includes a scheduler, to do lists, and a word processor, is available at a cost of \$95.00.
Primary Use	Programs are available on an "unlimited" or "per use" basis, and through a network.
Respondent	Three outcome measures are available: Health Dynamics Inventory, Social Adjustment Scale - Self-Report, and Symptom Assessment-45.
Number of Items / Admin. Time	Varies by instrument. / Varies
Norms / Computer Scoring / Foreign- Language Translation	Varies / Yes / French, Spanish
Strengths	
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	NetOutcomes Solutions*
Index Number	53
Developer	Depression Outcomes Module (DOM) Substance Abuse Outcomes Module (SAOM) Schizophrenia Outcomes Module (SCHIZOM) Adolescent Treatment Outcomes Module (ATOM)
Contact/Org./Phone/ E-mail/Web	1-877-567-2773 https://www.netoutcomes.net/no_solutions/NO_Main/NO_Home.asp?menu=nethome
Brief Description	Web-based - NetOutcomes Solutions is a set of behavioral health outcomes assessment tools developed by the Univ. of Arkansas for Medical Sciences' (UAMS) Ctr. for Outcomes Research & Effectiveness (CORE). Uses primarily patient-generated info. Clinician info is gathered once, at onset of treatment. Patient questionnaires are at a third grade reading level. Patients complete an initial, baseline questionnaire and subsequent follow-up questionnaires. The patient data is analyzed and ready for print-out in reports appropriate for the patient's chart. As follow-up data is entered, cumulative patient reports showing the patient's progress are generated. Aggregate reports are generated qrtly. and portray the course of care and its effectiveness for entire patient populations. Provider reports detail aggregate patient data for a single clinician. Program reports aggregate the data of all patients enrolled in a specific program at a particular location. Facility reports compare data from 2 or more programs using the same outcomes module.
Target Audience/ Age Group	Individual providers and provider groups, for specific consumers: adults with schizophrenia, substance abuse problems or depression; and adolescents. A dementia module will soon be available.
Cost	For group of 11-20 providers, \$5,150 annually for 2 modules & 2 programs
Primary Use	Individual providers and provider groups, with specific categories of clients.
Respondent	For adolescents: Client, parent and clinician complete different instruments. Varies for others.
Number of Items / Admin. Time	Varies by instrument. / Varies by instrument.
Norms / Computer Scoring / Foreign- Language Translation	Yes, at the provider, program and facility levels. No, at the individual level. / Yes / No information
Strengths	As a university based organization, NetOutcomes offers an educational resource center dedicated to facilitating basic education about behavioral health outcomes and providing practical information about implementing and maintaining outcomes management systems in practice. The resource center includes thorough information and advice, and a user's manual, all of which is free. It also permits a clinician to try out the system at no cost.
Limitations	The system offers instruments only for clients who fit into specific categories: adolescents, and individuals with schizophrenia, depression or substance abuse problems. Therefore, a clinician or agency would probably find itself unable to measure outcomes for every client.

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	QuicDoc*
Index Number	54
Developer	DocuTrac, Inc.
Contact/Org./Phone/ E-mail/Web	http://www.quicdoc.com ; 301-766-9397, 800-850-8510
Brief Description	Software - QuicDoc comes with several built-in outcome measures (such as the Outcome Questionnaire-45, Health Status Questionnaire, Timberlawn Child Functioning Scale) which can be administered at Baseline and then at various intervals of the treatment. QuicDoc will track progress over time with easy to read graphs+E16 and summarize scores at Baseline vs. Discharge or Baseline vs Most Recent Administration for patients, grouped by provider, insurance company, program, and dates of service.
Target Audience/ Age Group	Suitable for private practitioners and large mental health agencies.
Cost	Small Network edition: \$549 for server and \$249 for each workstation
Primary Use	Suitable for private practitioners and large mental health agencies.
Respondent	Varies
Number of Items / Admin. Time	Varies / Varies
Norms / Computer Scoring / Foreign- Language Translation	Varies / No information / No information
Strengths	
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	SumOne.com*
Index Number	55
Developer	Corporation for Standards & Outcomes
Contact/Org./Phone/ E-mail/Web	949-448-4920, Fax: 949-448-4921, www.csando.com
Brief Description	Software - Uses Application Service Provider (ASP) technology to measure real outcomes in real time; also tracks services that are delivered and contracts that are issued. Provides client-level, program-level, agency-level and organizational aggregate outcomes reports. Permits the comparability of client outcomes through the capture of information "snapshots" at various points in time. Staff. Assessment instrument is Devereux Scales of Mental Disorders, DSMD (see description in list of Instruments). Other information, related to demographics, program activities and functional outcomes, also completed by staff.
Target Audience/ Age Group	Behavioral health and child welfare providers. Focus on children, but product can also be adapted for adults.
Cost	
Primary Use	Currently, primary use seems to be by large systems of care (e.g., several county-wide systems in CA, statewide system in MD, large private agencies).
Respondent	
Number of Items / Admin. Time	111-child; 110-adolescent / 15 minutes
Norms / Computer Scoring / Foreign- Language Translation	Yes / No / Uncertain
Strengths	
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	Systematic Treatment Selection (STS)*
Index Number	56
Developer	Center for Behavioral Healthcare Technologies, Inc.
Contact/Org./Phone/ E-mail/Web	805-677-4501 or 805-795-7816, Oliver Williams, Ph.D., CEO, https://members.systematictreatmentselection.com/
Brief Description	Web-based - STS is a decision support, case management and outcomes tracking tool. The system creates patient-specific treatment plans; generates treatment goals and objectives; matches patient with provider most likely to achieve optimal results; provides tracking data; generates a "most likely" prognosis trend scenario at intake; and facilitates provider profiling.
Target Audience/ Age Group	Individual practices, small clinical practices or insurance/HMO third party payer
Cost	Range: For large user (600k consumers /yr): \$3 per intake,\$1 per update; for small practice: \$20 per intake, \$2 per update
Primary Use	Several small group practices and a few local MBHOs
Respondent	Consumer, on the Web.
Number of Items / Admin. Time	Total of 300 questions in a "treed" system; typical consumer answers ~ 100 questions / 15 minutes
Norms / Computer Scoring / Foreign- Language Translation	Yes / Yes / Spanish
Strengths	Goal of system is to increase uniformity and efficiency in treatment.
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	TeleSage*
Index Number	57
Developer	TeleSage, Inc.
Contact/Org./Phone/ E-mail/Web	Peter Cole, 800-636-8524; sales@telesage.com; www.telesage.com
Brief Description	Software - SmartQuest offers a CD that installs on a PC, allowing customers to create and record their own surveys or interviews as well as relay information tailored to the individual caller. Accommodates branching to different questions or surveys based on callers' responses. SmartQuest automatically scores and stores responses in standard databases. Can also incorporate standard survey instruments.
Target Audience/ Age Group	Large systems of care
Cost	Software package starts at \$1950
Primary Use	Primarily used by large systems of care, e.g., ValueOptions, United Behavioral Health
Respondent	Client, via phone, using interactive voice response (IVR)
Number of Items / Admin. Time	Determined by customer / Determined by customer
Norms / Computer Scoring / Foreign- Language Translation	Yes, when standard instruments are used / Yes / Possible
Strengths	
Limitations	

* Copy of information available.

OUTCOME SOFTWARE AND SYSTEM VENDORS DEDICATED OUTCOMES MEASUREMENT SYSTEMS

Name of System	TeleSage*
Index Number	57
Developer	TeleSage, Inc.
Contact/Org./Phone/ E-mail/Web	Peter Cole, 800-636-8524, sales@telesage.com; http://www.telesage.com/healthcare.html
Brief Description	Web-based - TeleSage works with large care networks to customize the application -- e.g., for WA State, the system allows consumers or parents to respond via telephone, Internet or paper-and-pencil. Reports are available to the clinician almost instantly when either of the first two methods is used, and within 24-48 hours when forms are completed with paper and pencil and faxed to TeleSage.
Target Audience/ Age Group	Large systems of care
Cost	Can range up to \$250,000, if includes full scale statewide implementation w/ training, etc.
Primary Use	Used by large systems of care, e.g., Washington State
Respondent	Client or parent
Number of Items / Admin. Time	Determined by customer / Determined by customer. In the case of WA, 10 minutes.
Norms / Computer Scoring / Foreign- Language Translation	Yes, when standard instruments are used / Yes / Possible
Strengths	
Limitations	

* Copy of information available.