

**Quantitative Data Monthly Reporting Questions**  
**New York State Office of Mental Health CQI Initiative for Health Promotion and Care Coordination**

**Questions and text will be formatted in an on-line survey (e.g., Survey Monkey)**

**General Guidelines:**

- The survey asks that clinics **report on activities/data for the past calendar month**. For example, on the October survey you would report on September activities/data.
- When tracking information and reporting on activities, **use the date that an activity took place at your clinic** (e.g., date client was actually identified by your CQI team, date a client received an intervention related to their CQI project quality concern(s)).
  - Note: Data on PSYCKES reports are refreshed approximately every 6 weeks and the report date is independent of the dates that clients are identified by clinic staff. (Example: In mid-September, a CQI team member exported data from a PSYCKES "New QI Flag" report dated "as of 7/1/2014," and updated the master list with **10** clients from the PSYCKES report. During September, **4** clients were identified through other sources and added to the master list. On the OMH survey due in October, the clinic would report that **14** clients were **newly identified and added to your clinic's master list in the past month**—September).
- **Master list** (e.g., Excel spreadsheet) refers to your clinic's list of clients that have been identified as having a quality concern associated with your clinic's CQI project. It provides data that support CQI and clinical activities and should be updated monthly to reflect changes in clients' status. More information is available on the PSYCKES website at:  
[https://www.omh.ny.gov/omhweb/psyckes\\_medicaid/initiatives/freestanding/data\\_tools/tracking\\_spreadsheets.html](https://www.omh.ny.gov/omhweb/psyckes_medicaid/initiatives/freestanding/data_tools/tracking_spreadsheets.html)

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**Questions 1 through 3 ask for numbers related to identifying clients with a quality concern and interventions that address clients' quality concerns.**  
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1. How many clients did you <b>newly identify</b> and add to your master list in the past month?
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**Guidelines:**

- We recommend that **newly identified clients** be obtained from the PSYCKES "New QI Flag" tab for your CQI project summary indicator. Additionally, other data sources may be used (e.g., client's self-report, electronic medical record, and quarterly treatment plan). Since you are tracking over time, be sure to use the same data source(s) every month.
- Only count newly identified clients who are actively enrolled in your clinic. For example, if a client is flagged in PSYCKES but has been discharged from your clinic, do not count that client.

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2. What is the **total number of active identified clients** on your master list (as of the last day of the past month)?

**Guidelines:**

- **Active identified clients** are individuals who currently have a quality flag and who are currently on your clinic's census. The clients include those flagged in PSYCKES and/or identified through other sources such as a client's self-report, electronic medical record, and quarterly treatment plan.
- The **total** should include the number of newly identified clients that you reported in Question 1.

3. Of the total number of active identified clients on your master list, how many **received an intervention related to their CQI project quality concern(s)** in the past month?

**Guidelines:**

- **Client received an intervention related to a CQI project quality concern(s)** refers to when clinic staff performed a procedure or strategy aimed to address a client's project quality concern(s).

Below are some examples of interventions:

- *Address high utilization of medical inpatient/ER services:* make or follow-up on a referral to a medical provider; educate client on the advantages of seeing a primary care provider rather than using emergency room services for non-emergency medical care.
- *Address a client's low medication adherence or discontinuation of medication:* use motivational interviewing to tie medication adherence to a client's personal goals; teach client how to obtain and use pill boxes; staff programmed a medication reminder on client's mobile phone.

Refer to your clinic's Project Planning Form for a list of your clinic's planned interventions (pages 13-16 for the Health Promotion project; pages 19-21 for the Behavioral Health project).

- Critical to the success of the CQI project is maintaining data on status/outcomes over time for identified clients (e.g., date when client received a clinical evaluation, date and status of interventions received). Below are examples of tools for collecting, recording, and tracking client outcomes:
  - A structured document is completed by a clinician during a client's appointment. It includes information on the client, including a list of CQI project quality concerns and the interventions used to address those concerns. After completion, it is filed in the client's medical record, if applicable, and routed to relevant staff, including the CQI team. The CQI team uses the information to update its master list and/or other tracking tools. It can be also used to tally the number of clients who received an intervention during a given month.
  - An intervention log is used by staff to tally the number of clients who received an intervention during the month. This log can be used by a variety of staff: an individual clinician to track all identified clients on her caseload, supervisor while conducting supervision and/or doing administrative record reviews, and clinicians during any meeting related to clients and interventions (e.g., rounds, clinical meetings).

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**Question 4 asks for data related to usage of the PSYCKES Clinical Summary to help support reviews and clinical decision-making.**

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**4. Of the clients on your master list, how many individual Clinical Summaries were accessed through PSYCKES in the past month?**

**Guidelines:**

We recommend that clinical staff have access to and use the PSYCKES Clinical Summary to support the evaluation/review of an identified client during an appointment. Clinical Summaries can be printed out and filed in medical records, distributed to clinicians, or viewed by clinicians on PSYCKES.

To obtain the total number of clinical summaries accessed in PSYCKES, create a usage report in PSYCKES:

- Click “Usage Report” on the screen header
- Click “Clinical Summaries Viewed”
- On “Time Period” line, select “Date Range”
- Enter start and end dates for the past month
- In the “Recipient’s Service” box click the down arrow and select “Outpatient - MH”
- In the “Recipient’s Service Setting” box click the down arrow and select “Clinic MH - ALL”
- Click Submit
- PSYCKES will generate a usage report
- Review the list of clients on the report to identify and count those on your master list
  - Tip: We recommend that you export the usage report to an Excel spreadsheet for manipulation of the data.

The screenshot shows the PSYCKES MEDICAID interface for generating a 'Clinical Summaries Viewed' report. The navigation bar includes 'Usage Report' and 'Clinical Summaries Viewed'. The form contains the following fields and options:

- Provider:** Main Street Health Center
- Time Period:** All Data (selected), Date Range (Start date: 09/01/2014, End date: 09/30/2014)
- User Information:**
  - User Work Setting(s): All (selected)
  - User Role(s) in Organization: All (selected)
  - Licensed Profession: All (selected)
  - User Status: All (selected)
  - User Name(First & Last):
  - User ID:
  - Registrar: All (selected)
- Recipient Information:**
  - Recipient's Last Name:
  - Recipient Medicaid ID:
  - Recipient SSN(XXX-XX-XXXX):
  - Recipient's Service: Outpatient - MH (selected)
  - Recipient's Service Setting: Clinic MH - ALL (selected)

Buttons for 'Submit' and 'Reset' are located at the bottom right. The footer indicates 'Release: 4.9.2'.