



# **Maine Children's Home & Community Based Treatment Services Outcome Report**

**2008**

## Children's Home & Community Based Treatment Services Treatment Outcome Report 2008

APS Healthcare identified the following treatment outcomes for children served in Children's Home & Community Based Treatment Services (known as HCT) from data entered into APS CareConnection® with both admission and discharge tool scores:

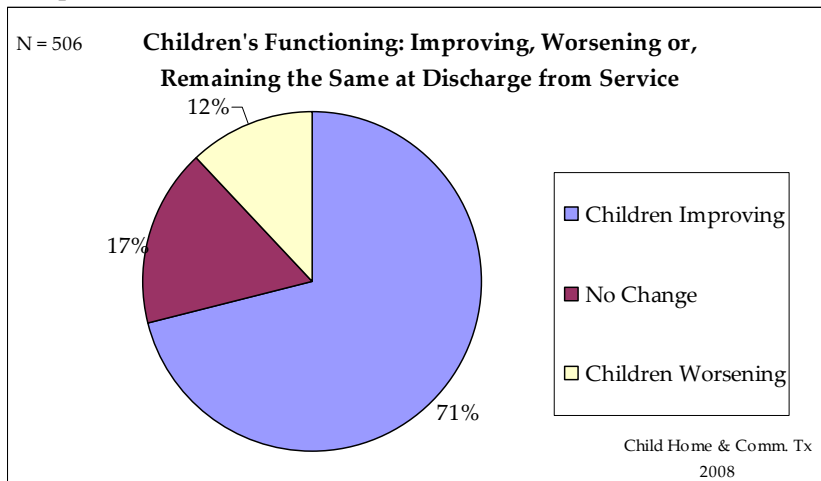
- Assessment standardized tool scores demonstrate that 71% of the children discharged from treatment showed significant improvement.
- 64% of the children who showed improvement were discharged to a less intensive level of care (such as office based outpatient therapy).
- The majority (54%) of children who showed improvement were reported by their provider to have attained treatment goals.
- Positive treatment outcomes vary both among providers and geographically across the state.

HCT is a MaineCare funded service that provides in-home and community based treatment to children with serious emotional disturbance. This report provides a summary of both treatment outcome and descriptive information about HCT Services based on utilization review and authorization data from 2008. This data is derived from APS Healthcare's proprietary internet-based utilization management and data system, APS CareConnection®. See report methodology on page 7 of this report.

**Please Note: It is a DHHS requirement of the HCT program that providers submit CAFAS scores at admission, continued stay and discharge. Only children with admission and discharge CAFAS scores are included in this report. If a provider did not submit both admission and discharge CAFAS scores for particular cases, those discharged cases are not included in this report.**

- **Of 506 children discharged from service in 2008, 71% (358) showed improvement as measured by the Child & Adolescent Functional Assessment Scale (CAFAS). See Graph 1.**

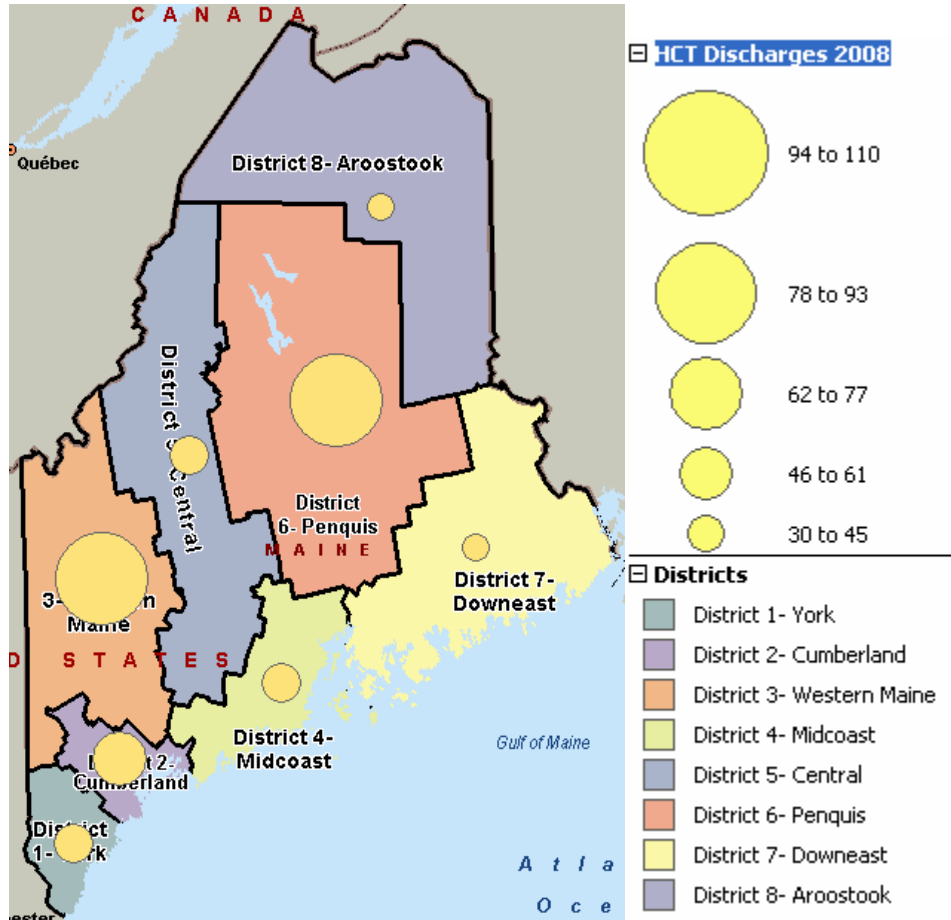
Graph 1





## Children’s Home & Community Based Treatment Services Treatment Outcome Report 2008

### Children’s Home & Community Based Treatment Services Number of Children Discharged from Services per District in 2008

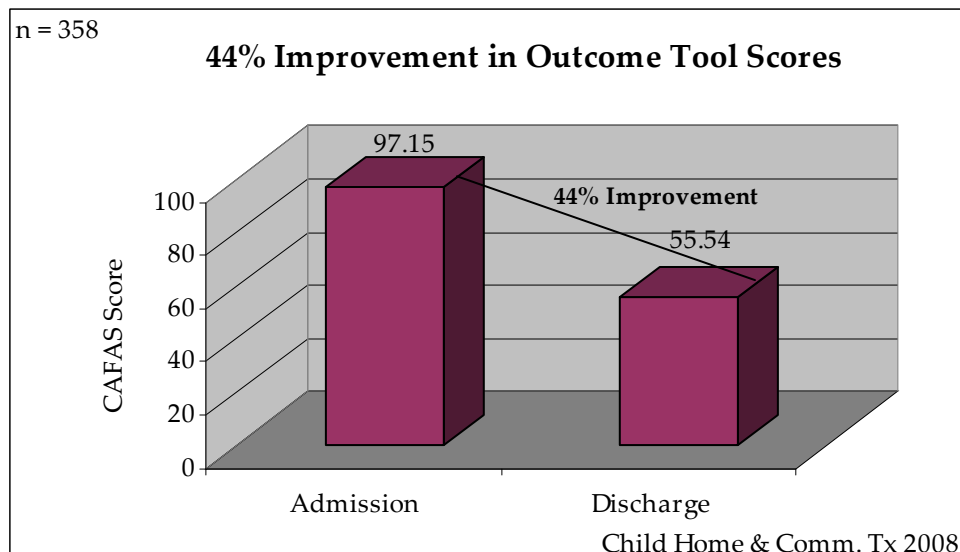


- The number of children discharged from HCT Services in 2008 varies significantly across DHHS Districts.
- The least number of discharges occurred in District 8 (Aroostook), with 35 and District 7 (Downeast) with 40.
- The highest number of discharges took place in District 3 (Western Maine) with 108 and District 6 (Penquis) with 103.

## Children's Home & Community Based Treatment Services Treatment Outcome Report 2008

- **The children that showed improvement in Children's Home and Community Based Treatment Services on average showed a nearly 44% decrease in outcome tool scores from admission to the program to discharge from the program.**
  - See Graph 2
  - ✓ A lower CAFAS score is better- a lower score shows that a child has fewer symptoms and better functioning.
  - ✓ A 44% decrease in CAFAS score is a significant decrease.
  - ✓ The difference in the means from the admission scores to the discharge scores is statistically significant (Paired, Two Tail T-Test,  $P < 0.0001$ ).

Graph 2



The CAFAS (Hodges, 1997) is designed to measure the degree of functional challenges in children and adolescents with emotional, behavioral, and/or substance abuse challenges. This report uses the overall Youth Score in the analysis.

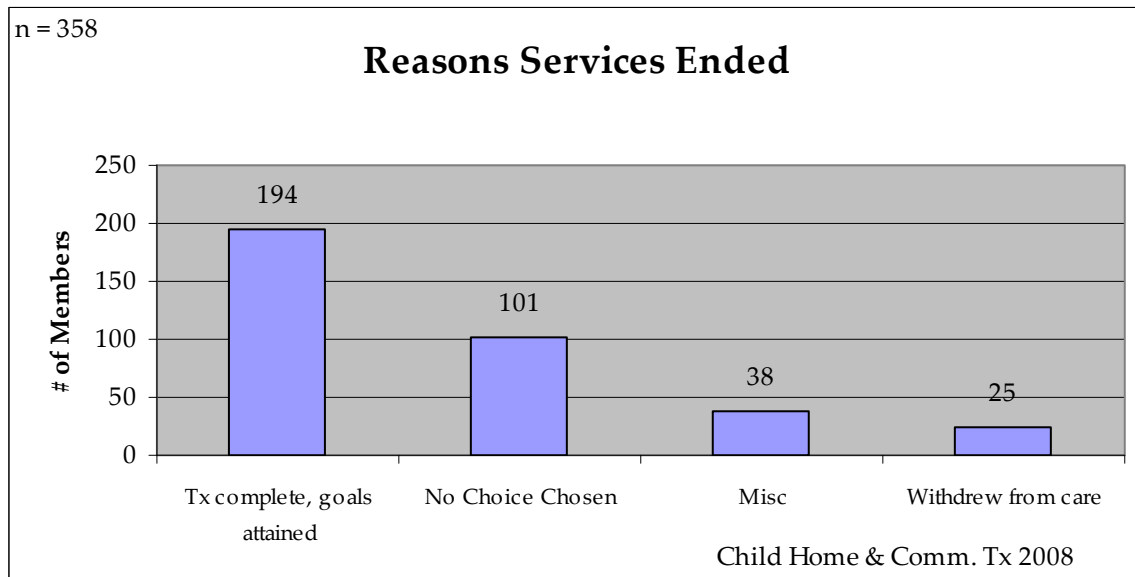
The instrument contains eight subscales, including: 1) School/work, 2) Home, 3) Community, 4) Behavior Toward Others, 5) Moods/Emotions, 6) Self Harmful Behaviors, 7) Substance Abuse, and 8) Thinking. Each subscale is rated along 4 levels of functional impairment: Severe (30), Moderate (20), Mild (10), Minimal/No Impairment (0) with higher scores reflecting greater impairment. A total functional challenge score is also obtained by taking an un-weighted sum of the subscale scores.

Ratings on each subscale are determined based on the rater knowledge and understanding of the child/adolescent's behaviors over a 90-day period.

## Children’s Home & Community Based Treatment Services Treatment Outcome Report 2008

- **The majority (54%) of children who showed improvement were reported to have attained treatment goals.**
  - ✓ At time of discharge from services, providers submit the “reason for discharge” along with other clinical information to APS Healthcare via an internet portal in APS CareConnection®.
  - ✓ 194 out of 358 children who showed improvement in Children’s Home and Community Based Treatment Services were reported by their provider to have completed treatment with “goals attained”. See Graph 3.
  - ✓ 7% (25 out of 358) of the children “withdrew from care” and were not identified as having their goals attained.
  - ✓ 11% (38 out of 358) had miscellaneous reasons for ending service including: “Lack of Participation” 7; “Program Discontinued Services” 5; “Moved from Service Area” 5; “No Longer Eligible for Services” 5; “Transfer to Another Provider” 3; “Member in Jail/Prison” 2; “Member No Longer Meets Medical Necessity Criteria” 2; and “Other” 11.
  - ✓ An opportunity for improvement exists as measured by the 28% of discharged children for whom a reason for discharge was not identified. In 2009 APS Healthcare and DHHS will work with providers to increase compliance with this key data submission need.

Graph 3

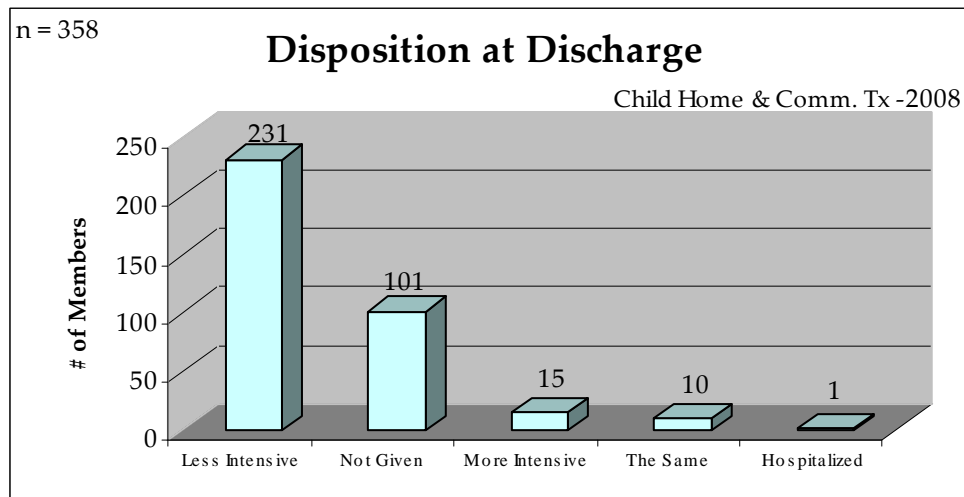




## Children’s Home & Community Based Treatment Services Treatment Outcome Report 2008

- **64% (231 out of 358) of children who showed improvement were discharged from the service to a less intensive level of care.**
  - ✓ At time of discharge from services, providers submit information about the service level the child has transitioned to, along with other clinical information to APS Healthcare via an internet portal in APS CareConnection®.
  - ✓ A goal of Child and Community Based Treatment Services is that children leaving the program will typically transition to a less intensive, or “lower” level of care, such as outpatient, office based therapy.
  - ✓ 4% (15 out of 358) were discharged to a more intensive service.
  - ✓ Just over 3% (10 out of 358) were discharged back into a HCT program
  - ✓ Even though there was overall improvement, one child was hospitalized at the end of treatment.

Graph 4

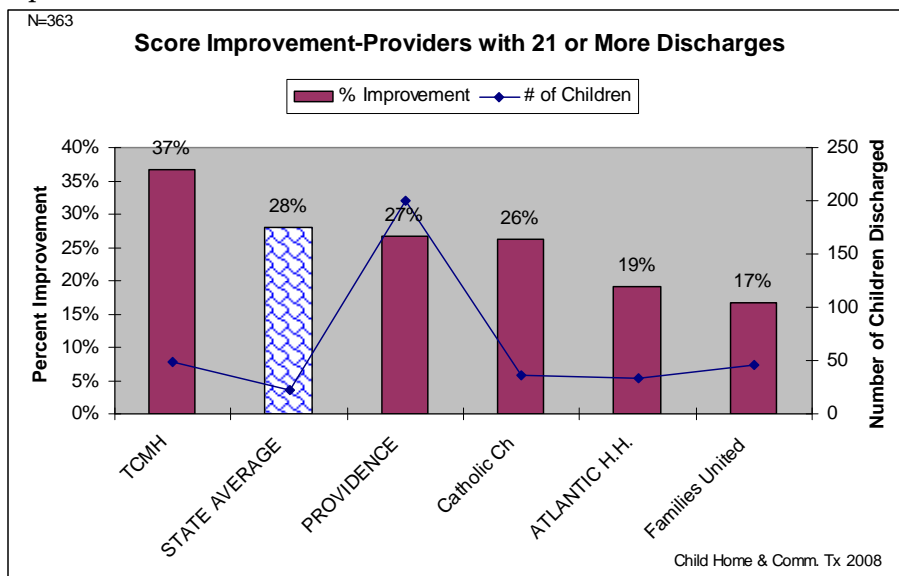




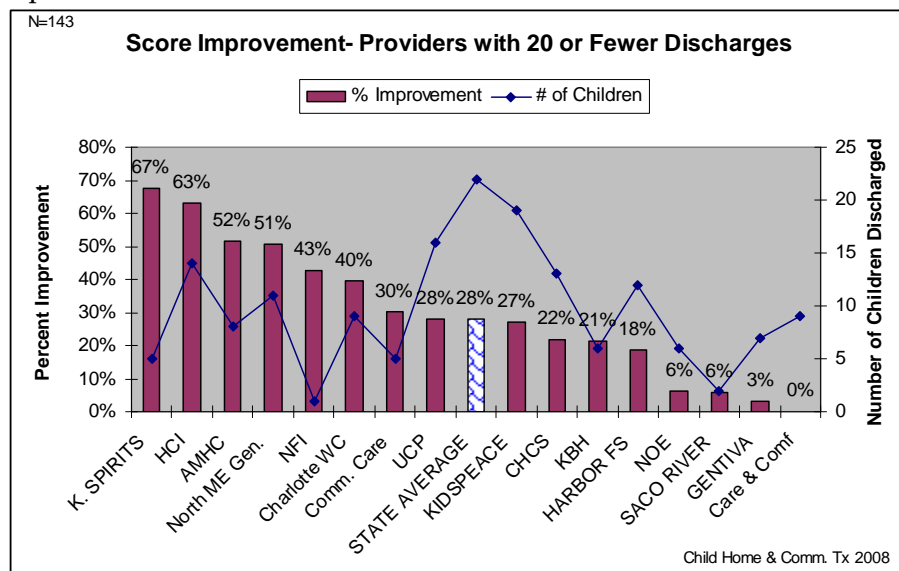
## Children's Home & Community Based Treatment Services Treatment Outcome Report 2008

- **Treatment outcomes for children discharged from HCT as measured by CAFAS score change vary widely among providers.** See Graphs 5 & 6.
  - ✓ 506 children (average 22 per provider) were discharged with both an admission and discharge CAFAS score in 2008 with an average score decrease of 28% (Note- this overall improvement of 28% includes the CAFAS scores of children whose scores improved, stayed the same and decreased. The 44% improvement noted on page 4 includes only the scores of the children whose score improved.
  - ✓ Providence Service Corp is the largest provider, with 200 discharges representing 39% of all discharges in this sample.

Graph 5



Graph 6

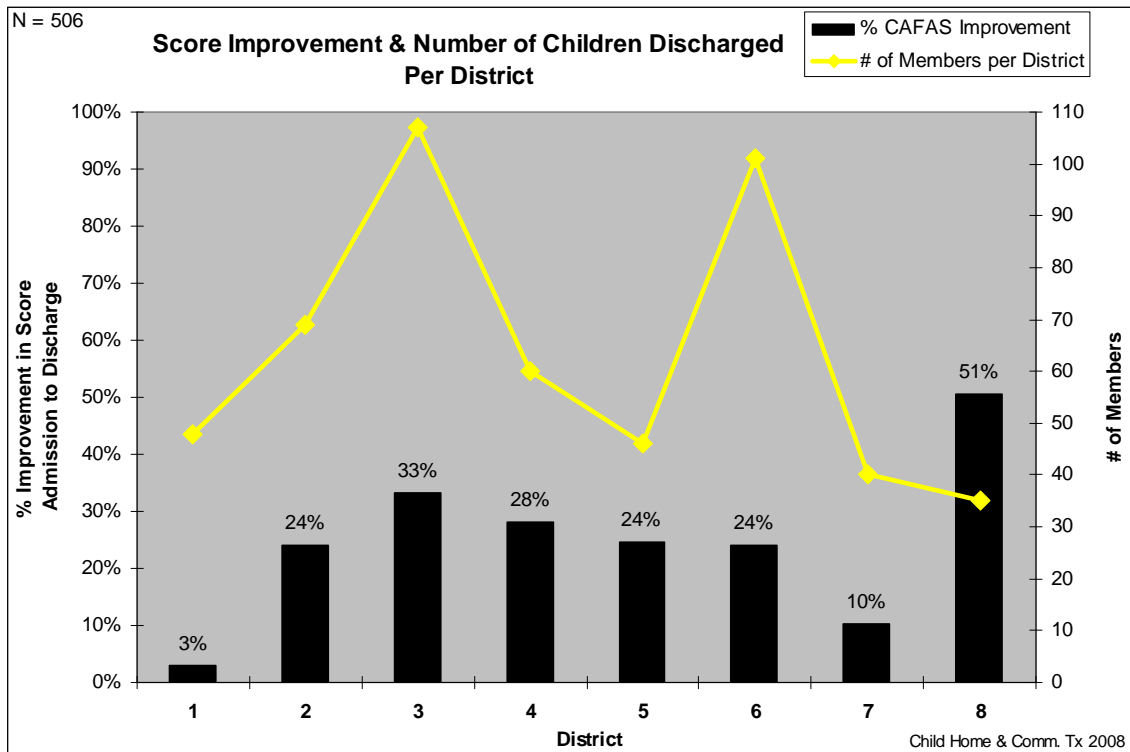




## Children's Home & Community Based Treatment Services Treatment Outcome Report 2008

- **Treatment outcomes for children discharged from Child and Family Behavioral Health Treatment Services as measured by CAFAS score change from admission to discharge vary widely across the state.** See Graph 6.
  - ✓ 506 children were discharged from HCT with both an admission and discharge CAFAS score, in 2008.
  - ✓ Improvement in child functioning is shown by a decrease in CAFAS scores.
  - ✓ The statewide average percentage decrease in CAFAS score from admission to discharge was 28%.
  - ✓ The DHHS Office of Child and Family Services Districts correspond to the following counties:
    - District 1 York County
    - District 2 Cumberland County
    - District 3 Franklin, Oxford and Androscoggin Counties
    - District 4 Knox, Waldo, Lincoln and Sagadahoc Counties
    - District 5 Kennebec, Somerset Counties
    - District 6 Penobscot and Piscataquis Counties
    - District 7 Washington and Hancock Counties
    - District 8 Aroostook County

Graph 6



## **Children's Home & Community Based Treatment Services Treatment Outcome Report 2008**

### **Methodology:**

1. Children/youth authorized for Children's Home and Community Based Services between 1/1/2008 – 11/30/2008 were selected from APS CareConnection Data System.
2. Only those children/youth that had both an admission and discharge CAFAS Total Youth score entered into Care Connection were selected for this data summary.

### **Findings:**

This data summary describes the following:

1. Sets of scores that decreased, increased, and did not change from admission to discharge.
2. Percentage of change for scores that decreased.
3. Reasons providers gave for Children's Home and Community Based Treatment Services coming to an end.
4. Discharge disposition: to a less, more, or similar level of care
5. Number of members discharged per provider
6. Percentage CAFAS score improvement per provider.
7. Number of members discharged per district
8. Percentage CAFAS score changes per district

**Sample Size:** APS CareConnection® contains the admission and corresponding discharge CAFAS scores for 506 members between January 1<sup>st</sup> of 2008 and November 30 of 2008. Analysis is based on authorization data retrieved from the APS CareConnection® system.

**Discussion:** Three out of five (62%) of the children in this population are male with an average age of 12 years old, and an average length of stay (ALOS) of 134 days in the Children's Home and Community Based Treatment Services. The overall average CAFAS admission score was 95, and it was 69 at discharge.

Overall, the 506 children/youth experienced a decrease in CAFAS scores at discharge 71% of the time, an increase in scores 12% of the time, and a score that remained the same from admission to discharge 17% of the time.

Geographically children in this report received Children's Home and Community Based Treatment Services from areas throughout the state: range of 35 children in district 8 to 108 children in district 3.

The Provider agency serving the largest number of children is Providence Service Corporation of Maine who accounted for 200 of this population's children. Tri County Mental Health Services (48 children) and Families United of Washington County (46 children) served the 2<sup>nd</sup> and 3<sup>rd</sup> highest numbers of children for this service.



## Children's Home & Community Based Treatment Services Treatment Outcome Report 2008

Children's Home and Community Based Treatment Report Data Summary Jan 1, 2008 - Nov 30, 2008	
Members Discharged	Totals
Total Members Discharged (duplicated)	506
<b>Gender:</b>	
Female	191
Male	315
<b>Age:</b>	
Median	12
Range	3 to 21
<b>ALOS (in days):</b>	
Average	134
Median	120
Range	5 to 310
<b>CAFAS Scores:</b>	
Avg Admission Score	95
Avg D/C Score	69
# Scores Increased	62
% of Sub Population	12%
# Scores Decreased	358
% of Sub Population	71%
# Scores Stayed the Same	86
% of Sub Population	17%
<b>Children Discharged Per District:</b>	
District 1	48
District 2	69
District 3	107
District 4	60
District 5	46
District 6	101
District 7	40
District 8	35
Total:	506