

## 5122-28-04 Consumer outcomes.

(A) The purpose of this rule is to ensure that consumer outcomes are appropriately and adequately measured in order to facilitate management of consumer care, to improve the quality of the services being delivered, and to provide accountability for public resources. Outcomes data submitted by agencies will be used by ODMH to prepare reports that will provide statewide comparative information to agencies, boards and consumer and family advocates.

(B) The following definitions apply to this rule:

(1) "Consumer outcomes" means indicators of health or well-being for an individual or family as measured by statements or observed characteristics of the consumer/family, not characteristics of the system. These measures provide an overall status measure with which to better understand the life situation of a consumer or family.

(2) "Vital Signs" means the document in the following citation: "Ohio Mental Health Outcomes Task Force (1998). Vital Signs: A Statewide Approach to Measuring Consumer Outcomes in Ohio's Publicly Supported Community Mental Health System, (final report). Columbus, Ohio: Ohio Department of Mental Health".

(3) "Consumer Outcomes Procedural Manual" means the most recent version of the document in the following citation: "The Ohio Mental Health Consumer Outcomes System: Procedural Manual (third edition, revised), (2000). Columbus, Ohio: Ohio Department of Mental Health. It is available on-line at: <http://www.mh.state.oh.us/initiatives/outcomes/outcomes.html>.

(C) Each agency shall use a system to measure consumer outcomes for children and youth and for adults who receive publicly funded mental health services, as specified in the "Consumer Outcomes Procedural Manual".

(1) Agencies shall use the standardized statewide consumer outcomes system as specified in the "Consumer Outcomes Procedural Manual" with the following exceptions:

(a) Agencies that provide mental health services that are intended to be brief one-time-only services, such as crisis intervention service and forensic evaluation service, are not required to measure consumer outcomes for those services as specified in the "Consumer Outcomes Procedural Manual"; and

(b) Agencies covered by a written agreement between their local mental health board and the department prior to the effective date of this rule, to modify the requirements of the "Consumer Outcomes Incentive Grant", will be acknowledged by the department to continue to implement the "Ohio Mental Health Consumer Outcomes System" as described in the prior written agreement.

(2) Upon application to the department, agencies may be exempted from the requirements of paragraph (C)(1) of this rule if they meet the following conditions:

(a) The agency must have a twelve month history as of the effective date of this rule of implementing an alternate consumer outcomes measurement system that was required by its local county mental health board.

(b) The agency must be geographically located in a county mental health board area that has not accepted the "Consumer Outcomes Incentive Grant".

(c) For adult consumers, the alternate consumer outcomes measurement system must be psychometrically sound, and shall meet eight of the following ten requirements:

(i) Reflects the value of support for consumer recovery;

(ii) Measures outcomes from the perspective of the consumer;

(iii) Measures outcomes from the perspective of the direct care staff most knowledgeable about the consumer;

(iv) Demonstrates cultural sensitivity;

(v) Has reasonable levels of cost and burden for provider agencies, consumers and families;

(vi) Measures the domain of symptom distress;

(vii) Measures the domain of functioning;

(viii) Measures the domain of quality of life;

(ix) Measures the domain of health and safety, e.g., harming self or others, getting in trouble with the law, etc.;

(x) Reflects empowerment.

(d) For child/youth consumers, the alternate consumer outcomes measurement system must be psychometrically sound, and shall meet nine of the following eleven requirements:

(i) Reflects the value of support for resiliency;

(ii) Measures outcomes from the perspective of the child/youth consumer;

(iii) Measures outcomes from the perspective of the child/youth's parent or guardian;

(iv) Measures outcomes from the perspective of the direct care staff most knowledgeable about the child/youth;

(v) Demonstrates cultural sensitivity;

(vi) Has reasonable levels of cost and burden for provider agencies, consumers and families;

(vii) Measures the domain of symptoms or problems;

(viii) Measures the domain of functioning;

(ix) Measures the domain of quality of life;

(x) Measures the domain of health and safety, e.g., harming self or others, getting in trouble with the law, etc., and

(xi) Is consistent with "NIMH Child and Adolescent Service System Program (CASSP)" requirements.

(D) Within six months of the effective date of this rule, or within six months of an agency's initial application for certification, the agency shall have completed an internal planning process and be prepared to collect consumer outcomes data.

(E) Within twelve months of the effective date of this rule, or within twelve months of an agency's initial application for certification, the agency shall:

(1) Be flowing data through the mental health board to the department, if it is using the standardized statewide "Ohio Mental Health Consumer Outcomes System" as specified in the "Consumer Outcomes Procedural Manual". The mental health board shall handle the data in a manner that complies with the "Health Insurance Portability and Accountability Act" [42U.S.C. sections 1320-1320d-8] and the privacy regulations promulgated thereunder [45C.F.R. Part 164], and applicable provisions of state law; or

(2) Agencies that have been acknowledged or exempted by the department pursuant to paragraph (C)(1)(b) or (C)(2) of this rule for a different consumer outcomes system than that specified in the "Consumer Outcomes Procedural Manual", shall send to the department a detailed report of outcomes data collected on an annual basis.

(F) Within twenty four months of the effective date of this rule, or within twenty four months of an agency's initial application for certification, the agency shall be able to provide evidence that outcomes data are being used in both treatment planning and performance improvement activities.

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