

CAFAS[®] Aggregate Report of Initial Assessments[®]

State Data: FY 2011-2012 Final Report

Includes: Cases that received an initial CAFAS between 10/1/2011 - 9/30/2012

Constraints:

- The case had a CAFAS with an "Initial Assessment" or "Revised Initial Assessment."
- Only includes cases entered into the FAS Outcomes application (either input directly into the application or open cases imported before the agency began using the application). Agencies had the choice as to whether they imported data.

You can generate this report for your CMHSP and for each of your programs. Personnel with "Business Administrator" privileges will see "Aggregate Reports" on the left navigation bar. Contact LOF or FAS if you want more information on how to generate reports or how to select administration dates.

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**Do not post on the Internet or make in any way available via the Internet,
Such as through your Intranet or other mechanisms**

CAFAS[®] Aggregate Report Initial Assessment

Organization: State Data

Service Area/Program(s): ALL

Time Range: Start Date: 10/1/2011 End Date: 09/30/2012 Active/Inactive Status: Both

Demographics

Age Mean: 11.8 years old

Age Range: 3-18 years old

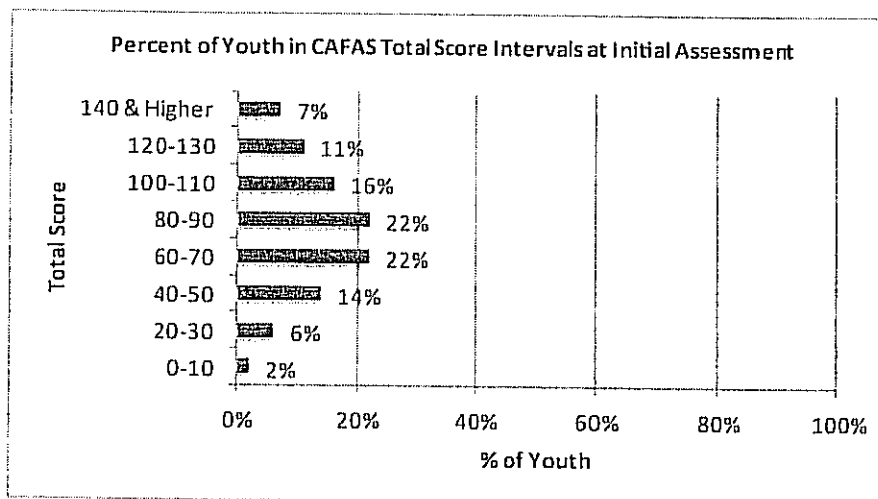
Age Grouping: 51.6% Preadolescent; 48.4% Adolescent

Gender: 56.6% Male; 43.3% Female; 0.1% Unspecified

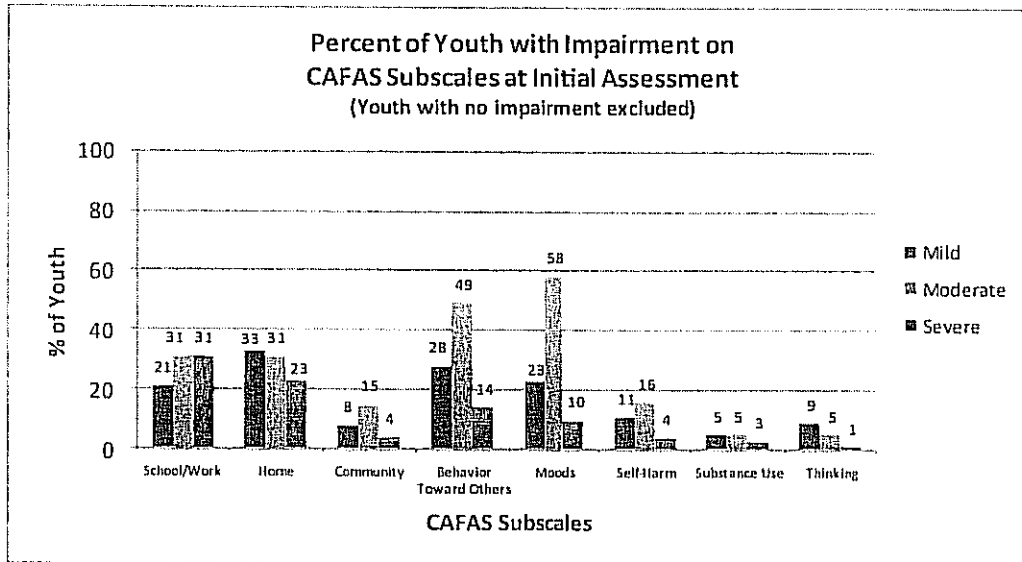
Sample Size for Initial Assessment: 15,438

CAFAS[®] Total Score The CAFAS Total Score is the sum of the impairment ratings for the 8 subscales for the youth. For each subscale, the rater selects the item(s) which are true for the youth, which in turn, determines the youth's level of impairment for that subscale. There are four levels of impairment: Severe (30), Moderate (20), Mild (10), and No or Minimal (0) Impairment. A higher score indicates greater impairment.

Average CAFAS[®] Total Score at Initial Assessment: 82.31 Median = 80 Mode = 70



CAFAS® Profile: Subscale Score The CAFAS subscales reflect the youth's day to day functioning across life domains. Examination of the results by subscale highlights the needs of the youth you serve, which can be considered in program development. The chart below shows the percent of youth at each impairment level by subscale. Note that percents of youth with no or minimal impairment are not shown on the chart.



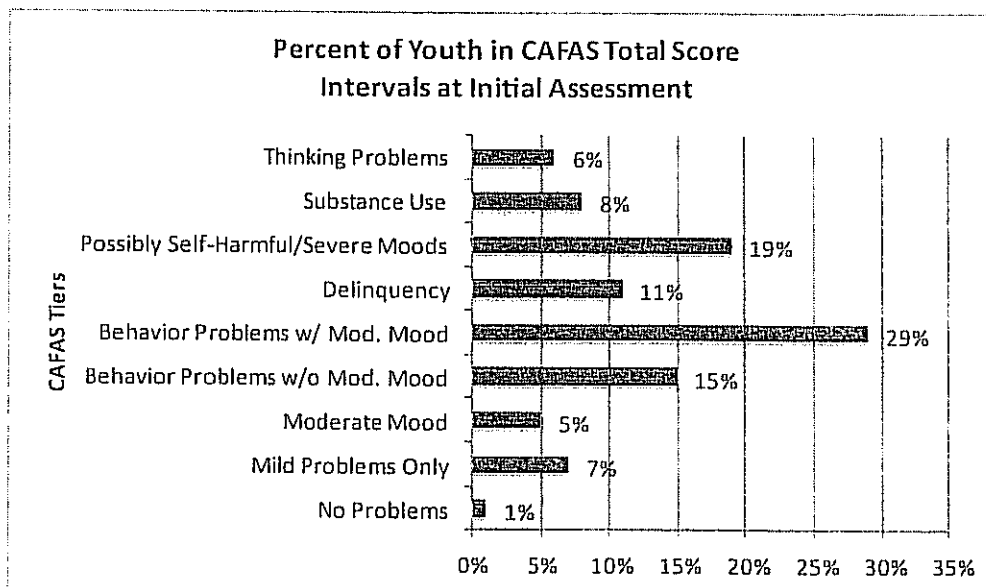
CAFAS® Youth High-Risk Behaviors The frequencies and percents presented in this chart are based on a rater's endorsement or specific CAFAS items. This information on high-risk behaviors can be useful in determining the services/interventions that your clients may need at intake, especially if minimizing out-of-home services is a goal.

CAFAS® Risk Behaviors	Youths	
	#	%
Potentially psychotic or organic symptoms in the context of severe impairment	126	0.8
Has made a serious suicide attempt or is considered to be potentially suicidal	807	5.2
Possibly suicidal, as suggested by ideation, verbalizations, or behavior	2454	15.9
Aggressive or threatening behavior in school, at home, or in the community	2845	18.4
Sexual behavior	330	2.1
Fire setting or playing with fire	155	1.0
Substance use rated at severe impairment level	520	3.4
Runaway behavior	546	3.5

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Caregiving Risk Factors Note: Not all cases included caregiver ratings		
Youth's needs far exceed primary caregiver's resources	304	2.0
Youth's needs far exceed non-custodial caregiver's resources	120	0.8
Youth's needs far exceed surrogate caregiver's resources	6	0.0

CAFAS Tiers® CAFAS Tiers is a classification system based on the youth's profile of subscale scores. The CAFAS Tiers grouping can be helpful in matching a youth's needs to the most appropriate and/or effective treatment protocol. It is a hierarchical system, such that the youth is assigned to the first tier to which he or she meets the criteria. The nine mutually exclusive "client types" are arranged such that the first ones considered are those that may need specialized care and/or generally reflected more salient impairment. This information can be useful in program development, with the aim of ensuring that youths receive the services they need in order to improve their functioning. For the algorithm used for determining CAFAS Tiers categories, refer to the *CAFAS Manual for Training Coordinators, Clinical Administrators, and Data Managers* or the *Evidence-Based Treatments for Children and Adolescents: A Compilation of Resources and Guide for Matching CAFAS Profiles to Evidence-Based Treatments*.



CAFAS® Clinical Markers

49.2% of youth have one or more Severe Impairments (score of 30) at initial assessments.

34.3% of youth who have Pervasive Behavioral Impairment at initial assessment. These youths are severely or moderately impaired on three CAFAS subscales: School, Home, and Behavior Toward Others. The families of these children may need specialized treatments, enhanced services, or additional supports in order to observe improvement in functioning.

42.5% of youth who may potentially benefit from their caregivers improving their Child Management Skills (e.g., PMT), as part of initial treatment. These youths are severely (30) or moderately (20) impaired on the Home subscale, with no severe co-morbidity (i.e., no severe impairments on the following scales: Thinking, Self-Harm, Mood, and Community).