# CAFAS® Aggregate Report of Outcomes®

State Data: FY 2011-2012 Final Report

Includes: Outcomes for inactivated (closed) cases

## Constraints specific to outcomes for inactivated cases report:

- Includes cases that:
  - Were "inactivated" in the FAS Outcomes application between 10/1/2011 through 9/30/2012
  - Had at least 2 CAFAS evaluations, including an initial CAFAS

#### General constraints on the database:

- The case had a CAFAS with an "Initial Assessment" or "Revised Initial Assessment" (within or prior to Fiscal Year 2011-2012)
- 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.

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# CAFAS® Aggregate Report Outcomes Assessment

Organization: State Data Service Area/Program(s): ALL

Time Range: Start Data: 10/1/2011 End Date: 09/30/2012

Active/Inactive Status: Inactive

Sample Size for Initial to Most Recent Assessment: 4,767

Demographics

Age Mean: 12.14

Age Grouping: 46% Preadolescent; 53% Adolescent

Age Range: 3-21 years old

Gender: 56.3% Male: 43.6% Female: 0.0% Unspecified

CAFAS<sup>®</sup> 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.

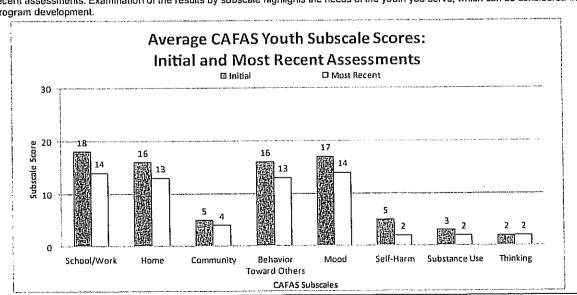
For this administrative report, CAFAS Total Scores are aggregated across youth and a comparison is made between the average scores for the initial and most recent assessments. A lower average score at the most recent assessment indicates a positive change. The average difference score is also calculated: A positive number indicates improvement in functioning, 0 indicates no change, and a negative number indicates greater functional impairment.

Difference Between Average CAFAS Youth Total Score for Initial and Most Recent Assessments: 18.19

Average CAFAS Youth Total Score at Initial Assessment: 82.86

Average CAFAS Youth Total Score on Most Recent Assessment:: 64.67

CAFAS<sup>®</sup> Subscale Scores The CAFAS subscales reflect the youth's day to day functioning across life domains. This chart presents a comparison of the average scores by subscale (aggregated across the clients selected) for the initial and most recent assessments. Examination of the results by subscale highlights the needs of the youth you serve, which can be considered in program development.



#### Report 2

Outcome Indicators "At a Glance" The following indicators show the percent of youth who improved on three outcome indicators, which vary in degree of ambitiousness. Not all youth would be expected to achieve success on all these outcome indicators, depending on their environmental circumstances and other issues related to treatment success. As below, the number of cases excluded is given (i.e., the indicator could not be determined for the case). These cases were not included in calculating the percents for "improved" and for "not improved." Comparisons are between each youth's initial and most recent assessments.

#### Improvement on One or More Outcome Indicators

The # and % of cases who improved on at least one of 3 indicators between Initial and Most Recent CAFAS Assessments. The outcome indicators include: Meaningful and Reliable Improvement, # Severe Impairments, and Pervasive Behavioral Impairment.

 Improved
 55.7%
 57%

 Not Improved
 41.7%
 43%

Excluded (2.5% excluded) (Ignoring Excluded)

### Meaningful and Reliable Improvement

The # and % of cases with an improvement in CAFAS Total Score of 20 points or greater.

Improved 50.7% 52% Not Improved 46.8% 48%

Excluded (Total score at (2.5% excluded) (ignoring excluded)

Initial Assessment ≤ 20)

#### Severe Impairments

The # and % of youth who did not have any severe impairments at Most Recent CAFAS Assessment ("Improved) and those who still had at least 1 severe impairment at Most Recent Assessment ("Not Improved").

Improved 24.5% 48% Not Improved 26.3% 52%

Excluded (No severe (49.2% excluded) (ignoring excluded)

Impairment at intake)

#### Pervasive Behavioral Impairment (PBI)

The # and % of youth who were identified as being Pervasively Behaviorally Impaired at Initial Assessment and no longer meet PBI criteria at Most Recent Assessment ("Improved") and those who still met PBI criteria at Most Recent Assessment ("Not Improved"). PBI criteria is defined as severely or moderately impaired on three CAFAS subscales: School, Home, and Behavior Towards Others.

Improved 18.3% 52% Not Improved 16.9% 48%

Excluded (Not pervasively (64.8% excluded) (ignoring excluded)

Impaired at intake)

Outcome by CAFAS Tiers<sup>®</sup> The chart below shows change in average CAFAS Total Score by client type. It compares youth total CAFAS scores at two time points: initial and most recent assessment. Youth were assigned to the client type determined at initial assessment, regardless of the youths' client type at most recent assessment.

The purpose of this comparison is to provide a general indicator of the degree to which youth in each client type are able to make gains. This information can be useful in determining whether any programmatic changes may be needed.

More background on 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 reflect more salient impairment. 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.

