


I. Three Research-based Key Performance Indicators

A. Valid initial Outcome Rating Scale (ORS); Duncan, 2014

- 35+: Invalid initial score – why coming to see you?
 - 35+ is rarely a valid initial score, even mandated don't score this high
 - Craving or Recurring Experiences (CORE): identify the primary reason(s) for seeking service/support and where the CORE is reflected by mark(s) on the ORS subscale(s); subsequently discuss [or rate (0-10)] during every interaction
 - Role play introducing the ORS during performance support, discussing overall and subscale scores when they don't match the peer/client's description of her/his recent lived experience
- ORS average, 500,000+ administrations: 18-20
- Goal: Less than 1/3rd over the Clinical Cutoff (25, 28, 32)
 - If 30% or more of initial ORS over the Cutoff
 1. Peer/client or service provider doesn't understand the ORS
 2. Role play introducing the ORS during performance support

B. Reliable change index (RCI*)

- 6+ point increase from the initial ORS
 - Saw-tooth graphs : ORS is used as an emotional thermometer to reflect current feelings instead of past week's experiences
 1. Role play during performance support connecting the peer/client's reason(s) for service to the marks on one or more of the ORS subscales

C. Clinically significant change index (CSCI*)

- 6+ point increase and cross the Clinical Cutoff

*Jacobson, N. S., Roberts, L. J., Berns, S. B., & McGlinchey, B. (1999). Methods for defining and determining clinical significance of treatment effects: Description, application, and alternatives. *Journal of Consulting and Clinical Psychology, 67*, 300-307.

*Jacobson, N. S., & Truax, P. (1991). Clinical significance: A statistical approach to defining meaningful change in psychotherapy research. *Journal of Consulting and Clinical Psychology, 59*, 12-19.

II. Four Step Appreciative PCOMS Performance Support for currently experienced and cumulative career growth

- A. **Start** by looking at all graphs or lists of peer/client ORS scores. **Job One:** ensure valid use of the measures & data integrity (see I.A.)



- B. **Spend** the most time on **at-risk peers/clients**: shape discussion and brainstorms options; look for over-utilization
- C. **Review** stats on the three key performance indicators (II. below); discuss ways to improve; Engage in **reflection then action**
- D. **Mentor** for **skill building**, peer/client teachings & ongoing reflections

III. An Appreciative PCOMS Performance Support Conversation Regarding At-risk Peers/Clients

- A. What does the peer/client say?
- B. Is the peer/client engaged? What do the ORSs/SRSs/RRSs/GSRSs suggest?
- C. What have you done differently?
- D. What can be done differently now?
- E. What other resources can be rallied?
- F. Is it time for a planned transfer/collateral referral discussion?

IV. Appreciative PCOMS Performance Supports

- A. Self-assessment, reflection and journaling that informs your professional development plan: PCOMS Report; Appreciative Inquiry (AI) questions to identify challenges and successes
 - ✓ What's working well (right with you)?
 - ✓ What could be better (improvement opportunities)?
 - ✓ What keeps you hopeful (celebrate successes)?
- B. Peer support: who is doing what that produces better results per the key performance indicators; discuss AI questions
- C. Individual and group performance support: face-to-face, e-meetings
- D. Quality improvement site visits and rapid-cycle process/outcome improvement projects



V. Additional tools

A. brauchtworks.com/toolkit

- ✓ Services and Performance Support Tracking Spreadsheet
- ✓ PCOMS Performance Support Report

B. Better Outcomes Now (BON): betteroutcomesnow.com

- ✓ The web-based application of the PCOMS with 15 features that make this outcome measurement tool superior, Use on any smart device
- ✓ 100s of videos, webinars and papers on implementing PCOMS
- ✓ Meet accreditation standards, maintain HIPAA compliance and improve quality of care: decrease no-shows and dropouts while increasing retention
- ✓ Available in 27 languages for adults, children and young children!
- ✓ Peer and professional service provider versions!
- ✓ PCOMS data are recognized by administrators and payers as reliable, valid and feasible metrics of provider and agency performance, and importantly, the service recipients' quantitative view of service effectiveness.
- ✓ BON enables unlimited data analyses and reporting in single page views for service recipients, providers, administrators, and funders.
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 - c. \$129 per user for 101 to 150 providers
 - d. \$109 per user for 151 to 250 providers
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