OVERVIEW

- Rationale for Using Outcomes Clinically
- PSC Overview
- Clinical Utility of PSC
  - Evaluate treatment progress
    - Discussing progress with families
  - Identifying treatment goals
  - Choosing appropriate interventions
- Reading the PSC Graphs
Two Versions

- **PSC:** Parent/Caregiver report on youth who are ages 3-18

- **PSC-Y:** Youth Self-Report for ages 11-18
ELEMENTS OF THE PSC

- Individual items – 35 items rated as:

<table>
<thead>
<tr>
<th>Never (0)</th>
<th>Sometimes (1)</th>
<th>Often (2)</th>
</tr>
</thead>
</table>

- Subscale scores:

  - **Externalizing**
    - “Does not listen to rules”
  - **Internalizing**
    - “Feels sad, unhappy”
  - **Attention Problems**
    - “Has trouble concentrating”

- Total Scale Score
PSC SUBSCALES AND CLINICAL CUTOFF SCORES

- **Externalizing:**
  - Scores of 7 or higher may reflect significant problems with conduct

- **Internalizing:**
  - Scores of 5 or higher are suggestive of significant impairments with anxiety and/or depression

- **Attention Problems:**
  - Scores of 7 or higher are indicative of impairments in attention
PSC TOTAL SCALE SCORE

- PSC Total Scale Score: Range = 0-70
  - If four or more items left blank = INVALID

<table>
<thead>
<tr>
<th>PSC (Parent/Caregiver Completed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 6-18</td>
</tr>
<tr>
<td>• Score of 28 or above = indicates psychosocial impairment</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

- PSC-Y (Youth Self-Report)
  - Score of 30 or above* = indicates psychosocial impairment
WHY REVIEW THE PSC GRAPH WITH A CLIENT?

- Track treatment progress
- Engage families in treatment
- Jointly identify treatment goals
- Identify clients’ strengths and weaknesses
PSC Parent

Client ID: 900000001
Client Name: Client1, Test
Unit: 9000
CCBH Intake Date: 9/18/2017

PSC Parent Subscales

- Attention Problems Subscale
- Externalizing Problems Subscale
- Internalizing Problems Subscale

PSC Parent Total Scale

<table>
<thead>
<tr>
<th>Initial</th>
<th>Reassessment</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attention Problems Subscale (0-10)</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>Internalizing Problems Subscale (0-10)</td>
<td>3</td>
<td>5 (AT-RISK)</td>
</tr>
<tr>
<td>Externalizing Problems Subscale (0-14)</td>
<td>8 (AT-RISK)</td>
<td>6</td>
</tr>
<tr>
<td>Total Score (0-70)</td>
<td>36 (IMPAIRED)</td>
<td>26</td>
</tr>
</tbody>
</table>

a. AT RISK - Children with scores of 7 or higher on this subscale usually have significant impairments in attention.
b. AT RISK - Children with scores of 5 or higher on this subscale usually have significant impairments with anxiety and/or depression.
c. AT RISK - Children with scores of 7 or higher on this subscale usually have significant problems with conduct.
d. IMPAIRED - Children ages 6-18 with scores of 28 or higher and children ages 3-5 with scores of 24 or higher usually have psychological impairment.
EVALUATING TREATMENT PROGRESS

- Examine the graph

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do the lines go up?</td>
<td>Indicates an increase in symptoms</td>
</tr>
<tr>
<td>Do the lines go down?</td>
<td>Suggests a reduction in symptoms</td>
</tr>
<tr>
<td>Are the lines flat?</td>
<td>Indicates no change</td>
</tr>
</tbody>
</table>

![Graph showing symptom levels over time for different subscales.](image-url)
- Have the at-risk/impairment categories changed?
- Does the client now fall in the not ‘at-risk’ or not ‘impaired’ range at follow-up?

<table>
<thead>
<tr>
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BENEFITS OF DISCUSSING TREATMENT PROGRESS

- To celebrate successes!
- Increase self-efficacy
- Can help move a client toward change
- Can improve communication
Using the graph

- Why do you think the blue line, which measures how well you listen and get along with others, is going down? It tells me your mom thinks you are listening more.

- This graph indicates you think you are improving but your mom’s graph suggests things are staying the same. What do you think about that? Why might that be?
Using individual symptoms

- At the start of treatment you said you sometimes felt “unhappy or sad,” now you say that you often feel “unhappy or sad.”
  - What does this mean?
  - What do you think caused this change?
Use straightforward language:

- **Externalizing**
  - Acting out, fighting, yelling, arguing, lying

- **Internalizing**
  - Feeling sad, worried

- **Attention Problems**
  - Trouble focusing or sitting still
IDENTIFYING BROAD TREATMENT GOALS

Examine scale scores

Is the client above the clinical cut-off on the total scale score and or subscale scores?

If any of the subscales are in the ‘at-risk’ range, this can be formulated as a treatment goal: Increase attention

- Measured by a decrease on the PSC Attention Problems subscale
- Measured by client falling below the clinical cutoff on the Attention Problems subscale at discharge
Which individual items were endorsed “often”?

- For example, a child in the Impaired range on the Externalizing subscale may score ‘Often’ on the items “Does not listen to rules” and “Fights with others”
- Increasing compliance and decreasing fighting may be identified as treatment goals
With clear treatment goals it is easier to identify and select appropriate interventions.

**Example**

- Caregiver rated the child in the *Impaired* range on the Externalizing subscale (but not the other subscales).

- What type of intervention(s) are indicated?
  - Parent Management Training
  - Behavior therapy
All data should be taken into context with other sources of information.

- PSC or PSC-Y
- Referral source
- Child Presenting Problems
- Caregiver and child interviews
- School report
- Clinician observation
1. **Data entry staff** will access and print the PSC graphs when a second (follow-up) PSC is entered into CYF mHOMS.

2. If a **clinician** is registered in CYF mHOMS, they can also follow the instructions in the CYF mHOMS training document to access and print the PSC graphs.

**CYF mHOMS training (under Training Forms header), can be accessed here:**
https://medschool.ucsd.edu/som/psychiatry/research/CASRC/resources/SOCE/Pages/CYFmHOMS-DES.aspx
More information can be found on the developers website:

- https://www.massgeneral.org/psychiatry/services/psc_home.aspx

PSC Forms, Assessment Cover sheet (Client Information Form), and CYF mHOMS data entry information can be found here:

- https://medschool.ucsd.edu/som/psychiatry/research/CASRC/resources/SOCE/Pages/CYFmHOMS-DES.aspx