YO U TH SERVICES SURVEY

SO CE
system of care evaluation

Fall 2019

YSS PROGRAM REQUIREMENTS
WHY DO WE COLLECT YSS DATA?

➢ Assess satisfaction with the services received by the youth and their parents/caregivers

➢ Assess the impact of those services received

➢ State requirement for funding

WHICH PROGRAMS ARE REQUIRED TO PARTICIPATE IN THE YSS?

All mental health service providers are required to participate unless they have received written notice from the County that they are excluded.
SERVICES INCLUDED/EXCLUDED:

Included:
- Outpatient Clinic / School Based Services
- Case Management
- Wraparound Services
- Therapeutic Behavioral Services (TBS)
- Day Treatment

Excluded:
- Juvenile Hall Services
- Juvenile Honor Camps
- Inpatient Hospitals
- State Hospitals
- Crisis Services (only when independent from a treatment program)
- Medication Only Services

YSS PARTICIPANTS

<table>
<thead>
<tr>
<th>Age</th>
<th>Youth</th>
<th>Parent/Caregiver</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 years</td>
<td>-</td>
<td>✓</td>
</tr>
<tr>
<td>13-17 years</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>18+ (still in CYFBHS)</td>
<td>✓</td>
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WHEN WILL YSS DATA BE COLLECTED?

**November 4 - November 8:**
- On all cases that have at least one billable service during this one week period.
- Survey should be completed at each program they received services during this timeframe.
- If the consumer did not receive services during this one week period, no data needs to be collected from the youth or family.

PREPARE THE YSS MATERIALS
YSS MATERIALS

SOCE will provide the following:
- Survey packets for Youth & Family
- An envelope for each survey provided

Programs will need to provide the following:
- Black or Dark Blue pen
- Clipboard (if necessary)

PREPARING THE YSS FORMS & ENVELOPES

1) Determine which packet(s) to administer based on the client’s age and the language needs of the youth & family
2) Fill in essential program information in the YSS packet
3) Write basic information on the YSS envelope that will help link the survey to a service (e.g. Client ID#)
SURVEY ADMINISTRATION

ADMINISTRATION PROCESS

The program will:

- Identify and train the staff who will be administering the surveys
- Establish a process which ensures consumer confidentiality
- Give the appropriate packet (with the **Client ID**, **Date** & **Sub Unit** already completed) to the client/family, who will then complete the survey, seal it in the envelope provided and return it
TRACKING SYSTEM

HOW WILL YOUR PROGRAM KEEP TRACK?

Each program should develop a system to identify and track those clients who should or already have completed the YSS survey.
CONFIDENTIALITY

CLASSIFIED INFORMATION

- Consumer confidentiality **MUST** be ensured as part of the data collection process.
- Direct service staff or clinicians should **NEVER** assist or see the individual responses of their clients or caregiver.
- It is **MANDATORY** that all surveys be returned sealed in an envelope upon completion.
- All surveys should remain sealed and returned to the SOCE team.
DIRECTIONS TO CONSUMERS

- Assure clients that their responses will be confidential and will **NOT** be shared with their clinical/service provider.
- Provide standardized directions to each consumer.
- Provide them with the necessary materials to complete the YSS and direct them to a private area.

**Note:** If the consumer is new and receiving their first clinical service from your program, complete the form directly following the initial service.

RETURNING SURVEYS TO SOCE
HOW DO WE RETURN THE YSS PACKETS?

- All completed YSS packets are to remain sealed in their envelopes.
- All envelopes MUST show the following information:
  - Client ID# (Cerner ID)
  - Sub Unit
  - Form Type
    - Youth or Family
    - English, Spanish or other language

GETTING YSS PACKETS TO SOCE

All YSS must be dropped off:

System of Care Evaluation (SOCE)
3665 Kearny Villa Road, Ste. 200
San Diego, CA 92123 (2nd Floor)

DO NOT fax or submit copies of any surveys!
WHAT HAPPENS WITH THE YSS SUBMITTED TO SOCE?

- Envelopes are logged
- Each envelope is opened
- Forms are sorted
- Forms are packaged and mailed to the State
TIMELINE FOR PROGRAMS

MARK YOUR CALENDAR!

- Administration dates:
  - November 4 - November 8

- Return YSS surveys to SOCE by:
  - Thursday, November 14 (By 4pm)
QUESTIONS?

Please contact SOCE:
Email: soce@casrc.org
Phone: (858) 966-7703 ext. 243604

SOCE Website:
https://medschool.ucsd.edu/som/psychiatry/research/CASRC/resources/SOCE/Pages/YSS.aspx