

How to Administer the Outcomes Measurement System (OMS) Interview

April 2017

Outcomes Measurement System (OMS)

Background

Purpose of OMS

- To track how individuals in outpatient services in the Public Behavioral Health System (PBHS) are doing over time.
- Designed to be useful at the clinician, provider, jurisdiction, State levels.
- Clinicians/counselors are also encouraged to use OMS interview in assessment and treatment planning.
- The OMS questionnaires are not intended to be all-inclusive of information that may be needed for assessment, treatment planning, and service provision.

OMS Providers

- These outpatient treatment providers are included in OMS:
 - Outpatient Mental Health Clinics (OMHC),
 - Federally Qualified Health Centers (FQHC),
 - Hospital-based behavioral health clinics,
 - Level I Substance-Related Disorder (SRD) Services, and
 - Opioid Treatment Programs (OTPs).

Clients Included in OMS

- Clients included in OMS are:
 - treated by one of the applicable provider types included in OMS,
 - between 6 and 64 years of age, and
 - require authorization for services through Beacon Health Options.

Outcomes Measurement System Questionnaires

OMS Questionnaires

- There are two versions of the OMS Questionnaires:
 - Adult Questionnaire – for individuals 18-64 years of age
 - Child/Adolescent Questionnaire – for individuals 6-17 years of age
- The Beacon Health Options authorization system automatically directs the provider to the appropriate questionnaire, based on client birthdate in eligibility files.

OMS Domains

Child/Adolescent

- Living Situation
- Psychiatric Symptoms
- Substance Use
- Functioning
- School
- Legal
- General Health
- Employment
- Resilience

Adult

- Living Situation
- Psychiatric Symptoms
- Substance Use
- Recovery and Functioning
- Legal
- General Health
- Employment

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Conducting the Interview

Interviewing Guidelines

- An OMS Interview Guide is available on the Beacon Health Options website.
- The Guide is intended to be a reference tool and is not designed to be read cover to cover.
- Chapter 2 “Conducting the OMS Interview” is a concise, helpful overview of key procedures in administering the questionnaire and is recommended reading.

Interviewing Terms

- “Interviewer” – The clinician/counselor conducting the interview. The interviewer reads the questions, records the responses, and probes/discusses as appropriate.
- “Client” – The recipient of services. Refers to either adult or youth client.
- “Respondent” – The client, child/adolescent, and/or caregiver who is being interviewed and is responding to the questions.

Primary Respondent (PR)

- The use of a PR is only relevant to the OMS Child and Adolescent Questionnaire.
- The Primary Respondent (PR) is the respondent whose responses to the questions are recorded.
- When both child and caregiver are present, both should be encouraged to participate.
- However, the clinician/counselor must decide who is most appropriate to serve as the PR.
- If it is not clear who is most appropriate to be the PR, these general guidelines can be helpful:
 - ages 6-11: caregiver
 - ages 12-17: youth

General Procedures

- Ask **all** of the questions.
- Conduct the interview in person.
- The client/caregiver is free to follow along with a copy of the questionnaire or view the computer screen during the interview.

How to Introduce the Questionnaire

- The interviewer can explain that:
 - It will help track treatment progress.
 - It will assist staff to provide the best care and improve the program overall.
 - How the client/caregiver answers the questions will not affect his/her ability to receive services.
 - There are no right or wrong answers.

Reading the Questions

- The questions should be read exactly as written and in the order they are written.
 - This ensures that all respondents are asked the same questions in the same way.
 - Even slight wording changes can impact the perception of the question and therefore the information collected.

Using the OMS Interview to Stimulate Discussion

- Once the interviewer has read the question as written, it is fine to discuss the respondent's answer with him or her.
- It may provide a good opportunity to discuss treatment issues or goals.
- If the discussion changes the initial response, clearly endorse the final response.

Stem Questions

- In both questionnaires there are several sets of questions that include a stem question followed by several different items. For example,
 - In the past week, on how many days...
 - Did you have trouble falling asleep or staying asleep?
 - Did you feel depressed or sad?
- In these situations, once the interviewer reads the stem question at least once, it does not have to be repeated for every question in the set.
- In some situations, it is helpful to repeat the stem every few questions to ensure accurate responding.

Useful Interviewing Techniques

- Most of the time the respondent will answer the question directly and the interview will proceed smoothly.
- If the respondent has difficulty answering a question, the following techniques or tools may help:
 - Repetition
 - Neutral probing
 - Definitions

Useful Interviewing Techniques - Repetition

- If the respondent is having difficulty answering a question:
 - Re-reading the question might be helpful. However, do not reinterpret the question.
 - Re-reading all of the answer options may also help the respondent. Be sure to read all of the options, not just a few.
 - There are OMS Response Cards available on the Beacon Health Options website that can help clients remember answer options.

Useful Interviewing Techniques - Neutral Probing

- Neutral probing is an interview technique used to clarify a respondent's answer without inadvertently biasing it.
- Neutral probing is particularly relevant when asking questions that are meant only to be the client or caregiver's opinion.
- It may be difficult at first because it can be different from some counseling approaches.
- Examples of neutral probing include:
 - "Whatever it means to you."
 - "Yes, but which answer fits best?"

Useful Interviewing Techniques - Definitions

- If a respondent asks for clarification about a question, there are several questionnaire items that include definitions that may be helpful.
- These are underlined in the on-line version-click on the word and the definition will appear. They are also included in the Interview Guide.
- Examples include: living situation, homelessness, employment, and terms such as “cope” and “symptom.”

Types of OMS Questions

- There are two basic types of OMS questions:
 - Objective questions
 - Subjective questions

Objective Questions

- Objective questions are those that are essentially factual and that are not influenced by personal opinions.
- Within the OMS questionnaire, several objective questions must be completed for submission.
 - These are marked by an “*”.
 - If information is not available from the client/caregiver, the clinician/counselor should choose the best response based on the most recent information available.
- An example of an objective OMS question is: “Where are you living right now?”

Subjective Questions

- Subjective questions are those that are based on the personal opinions of the client or caregiver.
- Within the OMS questionnaire, the subjective questions are called “Client/Caregiver Opinion Only” items. They are marked with a “Ψ” symbol.
- Once these questions have been read as they are written, it is fine to discuss the respondent’s answer. However, the interviewer should not try to influence the client’s opinion.
- If the discussion changes the initial response, clearly endorse the respondent’s final answer.
- An example of a subjective OMS question is: “In general, how satisfied are you with where you currently live?”

Interviewer Directions

- Throughout the questionnaires, special instructions are provided to the interviewer through:
 - Interviewer Instruction Boxes
 - Skip Patterns, including Child and Adolescent Age-Related Skip Patterns

Interviewer Instruction Boxes

- In both questionnaires, there are shaded boxes which include instructions to the interviewer.
- They include important reminders or directions for conducting the interview.
- The text in these boxes is not intended to be read aloud.
- These are included in both the online and hard copy versions.

Questions with Skip Patterns

- There are a few questions with “skip patterns” within each questionnaire.
- In these situations, the interviewer will skip over one or more questions based on the response provided to a previous question.
 - In the online version, these are automatically programmed; the next appropriate question will appear.
 - In the hard copy version, it is necessary to follow the instructions carefully. They will say, “Please skip to...” and will provide a question number.

Child and Adolescent Age-Related Skip Patterns

- Age filters for asking certain questions reflect approximate elementary, middle, and high school ages.
 - Online, these age-filtered questions are driven by the child's date of birth in the system.
 - On the hardcopy version, instruction boxes are used to help the interviewer follow the appropriate skip patterns (this information is not entered online).

Child and Adolescent Age-Related Skip Patterns

- All children are asked living situation, psychiatric symptoms, functioning, school performance, and general health questions.
- 11-17 year olds are also asked smoking, legal system involvement, and alcohol/substance use questions.
- Only 14 -17 year olds are asked employment and resilience questions.

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Interview Challenges

Potential Interview Challenges

- Occasionally the interviewer may encounter some challenges when attempting to complete an OMS interview. These may include:
 - Client/caregiver/clinician/counselor disagree about an answer
 - Refusals
 - Language issues
 - Crisis situations
- The following guidelines provide information on addressing such challenges

Disagreement About an Answer

- Occasionally the client, caregiver, and/or clinician/counselor may disagree about the best response to a question.
- If consensus cannot be reached quickly (within 1-2 minutes):
 - Adult client: record the client's response.
 - Child/Adolescent client: record the Primary Respondent's response.

Refusals

- In rare situations, the client or caregiver refuses to answer one or more questions.
- In these situations:
 - the clinician/counselor may complete the objective question(s) if he/she is reasonably sure of the correct answer.
 - the clinician/counselor should not complete the subjective question(s).

Language Issues

- Service providers may administer the OMS to clients speaking other languages in the same manner that treatment is conducted.
- This may include the use of interpreters or other communication aids.

Crisis Situations

- If the client is in crisis and the OMS questionnaire cannot be submitted for authorization, contact the Beacon Health Options Care Manager regarding obtaining authorization.
- Good clinical judgment always prevails.

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Additional Resources

Additional OMS Resources

- Several additional OMS resources are available on the Beacon Health Options website :
(http://maryland.beaconhealthoptions.com/provider/prv_oms.html).
- These include:
 - Resources for conducting the OMS interview
 - Resources for using OMS data

Resources for Conducting the OMS Interview

- OMS Interview Guide – more detailed description of interview techniques, including question-by-question instructions. Most of the Guide is for reference only. Chapter 2, “Conducting the OMS Interview”, is a concise, overview of key interview procedures and is recommended reading.
- OMS Interview Guide Reference Sheet – two page overview of reminders regarding general administration procedures.
- OMS Tools – OMS questionnaires, forms, and response cards.

Resources for Using OMS Data

- OMS Datamart – aggregated data presented in tables and graphs; users can choose analysis options.
- OMS Datamart Navigation – guidelines for Datamart users.
- Using the OMS Data – variety of training materials regarding data analysis and using OMS data for system and program development.