The Louisiana Mental Health Client-Outcome Evaluation Project:
An Initial Progress Report

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ABSTRACT: The Louisiana Mental Health Client-Outcome Evaluation Project is assessing the effectiveness of the Schainblatt-Hatry system of client-oriented outcome monitoring as applied to Louisiana CMHC outpatient settings. This system involves incorporating a self-administered mental health questionnaire into the routine center intake procedures and use of a combination mail-out and telephone follow-up data collection method. Follow-up procedures can be operated by a small evaluation staff through the State central office. This initial progress report provides an overview of the instruments and procedures being utilized and discusses results of the project obtained thus far.

Over the past decade, state mental health agencies have felt increasing pressures to evaluate the effectiveness of the programs they operate. As states spend millions of tax dollars to provide mental health services to thousands of clients, it has become increasingly important that agencies have data to document how well programs are accomplishing their objectives. The budgetary constraints and accountability mandates of recent years have increased the need for program performance data. Without information about the effectiveness of services, program funding decisions are ultimately based on cost factors or service activity data alone.

Accountability is not the only reason for increased program evaluation efforts in mental health. There has been a growing interest in the use of evaluation as a management tool contributing to program planning and development. For example, systematic monitoring of the outcome of services could provide data useful to initiating program improvements, monitoring quality assurance, identifying inservice training needs, and in aiding other areas of program management.

Recently, the Louisiana Office of Mental Health and Substance Abuse (OMHSA) has intensified efforts toward development of data collection systems for purposes of program monitoring and evaluation. Following recom-
recommendations by the Division of Administration (DOA), Office of the Governor, the State Legislature provided funds for the development of a statewide Management Information System, which was to include a treatment outcome monitoring component. The goal of the system was to provide a uniform and comprehensive data base to aid in the management of the 65 state-operated community facilities across the state.

Initial efforts toward establishing a statewide outcome monitoring system in Louisiana began in 1978. A pilot project was conducted by the DOA program evaluation staff in conjunction with OMHSA (State of Louisiana, DOA, 1980). Guided by the evaluation model developed by Ciarlo (Ciarlo & Reihman, 1977), the Denver Community Mental Health Questionnaire was utilized to interview a large sample of adult clients at admission and at six months after admission to one of six CMHCs across the state. Questionnaires were administered by a contingent of trained interviewers hired for the project. Client outcomes were evaluated by comparing scale scores at follow-up with those at admission and with the Louisiana community norms established during the course of the project. The DOA project was fairly successful in demonstrating the feasibility of a multi-site, uniform program evaluation system in Louisiana. However, the process of evaluation using in-person interviews was found to be very costly (per-client-costs were estimated at $241.00), and there was concern about the expense to be borne in establishing and operating such a system on an ongoing, statewide basis.

It was recommended that OMHSA continue efforts to develop an evaluation system, yet that use of the in-person interview format be abandoned in favor of a less costly means of data collection. An evaluation methodology such as that developed and piloted by Schainblatt and Hatry (1977, 1979, 1980) was suggested. The Schainblatt-Hatry model involves incorporating a self-administered mental health questionnaire into the routine intake procedures of the center and use of a stepwise mail-out and telephone follow-up data collection method. Follow-up procedures can be performed by a small evaluation staff through the State central office. Schainblatt (1980) reported that the average total cost per intake/follow-up questionnaire pair is $31.00.

Although the Schainblatt-Hatry evaluation model was viewed as an attractive alternative from the perspective of cost, OMHSA was concerned about the effectiveness of use of self-administered questionnaires and a mail-out/back follow-up procedure with the Louisiana outpatient population. With little data regarding the literacy and general abilities of CMHC clients, there was concern that a sizeable proportion of the clientele may not be capable of self-administering a questionnaire and that the quality of information obtained through the procedure would be poor. There was also concern that the percentage of clients returning their questionnaires at follow-up would not be large enough to provide a representative measure of the outcome of services. Mail-out/back follow-up response rates are typically quite