

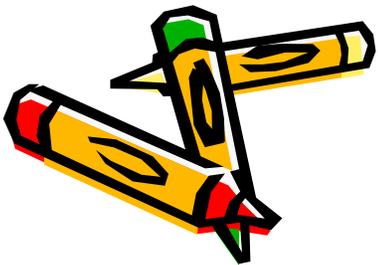
Behavioral and Emotional Rating Scale - 2

Parents, Caregivers and Youth Information
on BERS-2 Parent Rating Scale
April 13, 2012



What this presentation is about

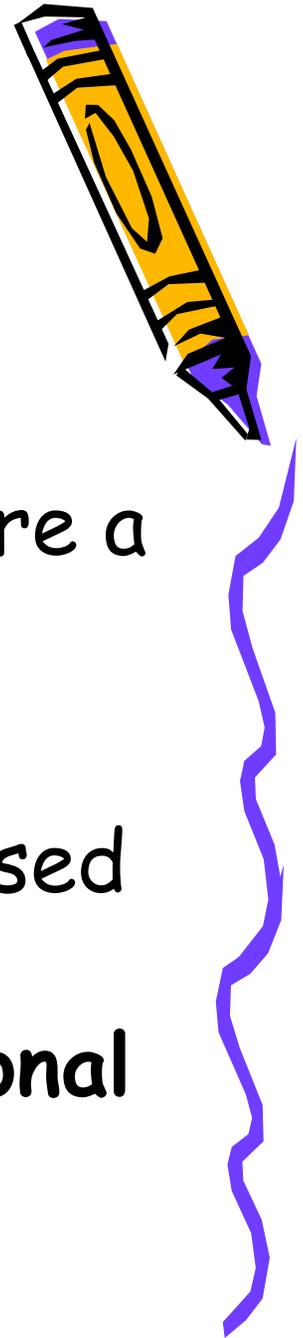
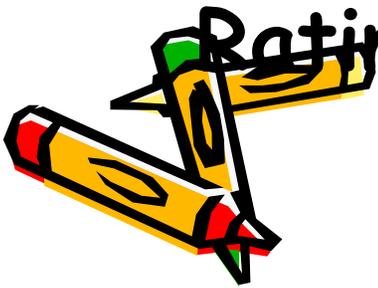
- Introduces parents, caregivers and youth to the steps involved in being asked questions for the ISA Progress Review BERS-2 Parent Rating Scale.
- To understand the reason why the outcome data collection tools are used and why they are important
- To understand how the scores are used in treatment and how grouped data may be shared



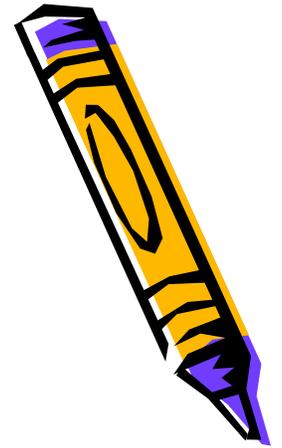
ISA Progress Review/BERS-2

ISA stands for Integrated Service Array. It describes the level of care a child needs, based on information gathered when they enter care.

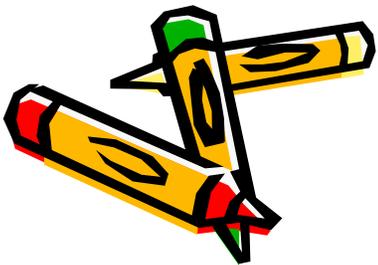
The ISA Progress Review is comprised of the Progress Report Form and includes the Behavioral and Emotional Rating Scale, or BERS-2.



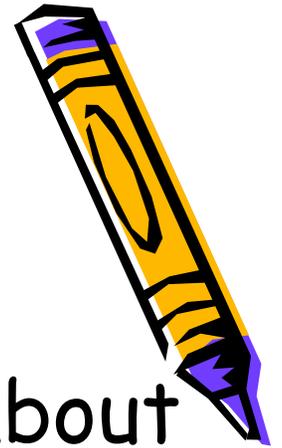
What is the BERS-2?



The BERS-2 is a rating scale designed to assess the behavioral and emotional *strengths* of children, instead of their problems or weaknesses. The BERS-2 is being used for, and has been studied to be accurate for children 6-18 years of age.



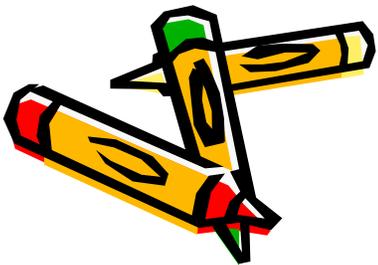
Advantages of BERS-2



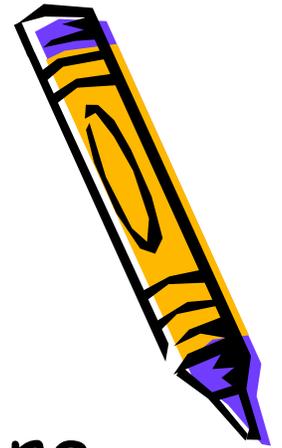
The BERS-2 provides unbiased data about outcomes, showing:

- Youth's functioning in various key areas
- Comparison of results regarding the youth's functioning to a national sample
- Progress over time

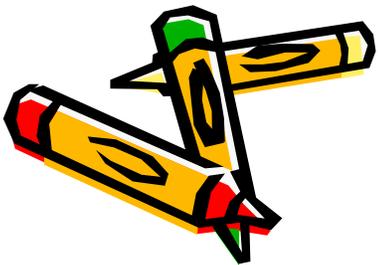
AMH requires use of one of the BERS-2 scales, the Parent Rating Scale. This is the version written into the MHO agreement to ensure caregiver input in the outcome data collection process.



Why do we do both measures every 3 months?

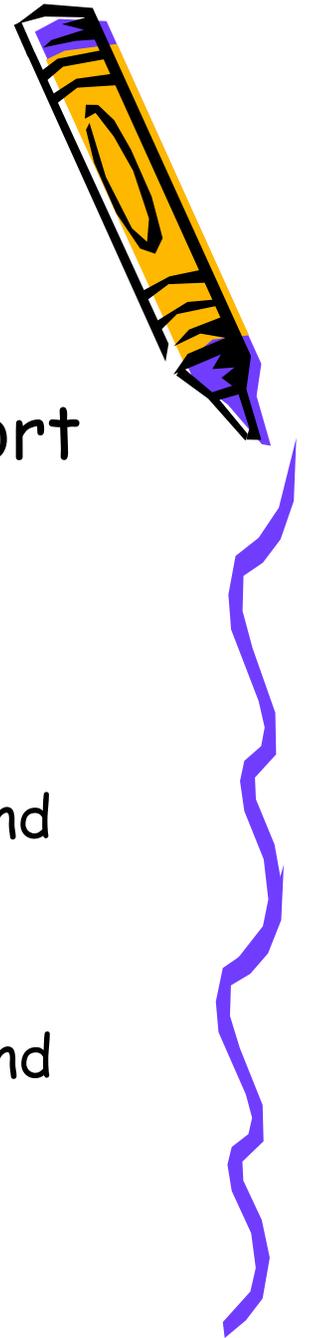
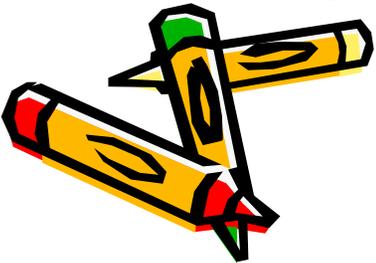


- It is important to track changes more often in this group of children, whose behavior is quite changeable.
- Data collection is required by the state office AMH:
 - Within 30 days of admission to ISA (Entry)
 - Quarterly (Continuing Review)
 - On Exit from ISA (Exit)

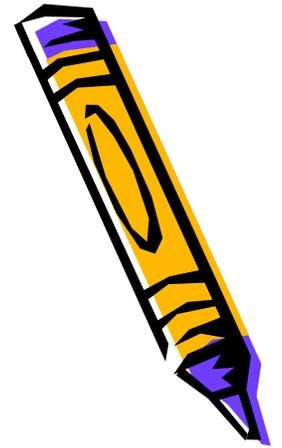


Why do we do both measures every 3 months?

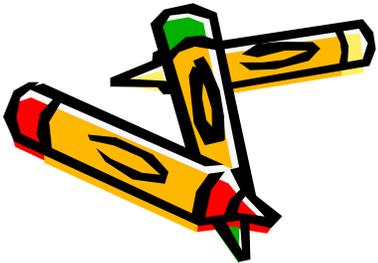
- AMH is interested in being able to report on the progress children in this higher level of care achieve *while in care*.
- This information is used
 - to provide progress information to the child and family team,
 - for advisory stakeholder review
 - to form a foundation for legislative reports, and other reports.



BERS-2 Parent Rating Scale (PRS) for Parents and Caregivers

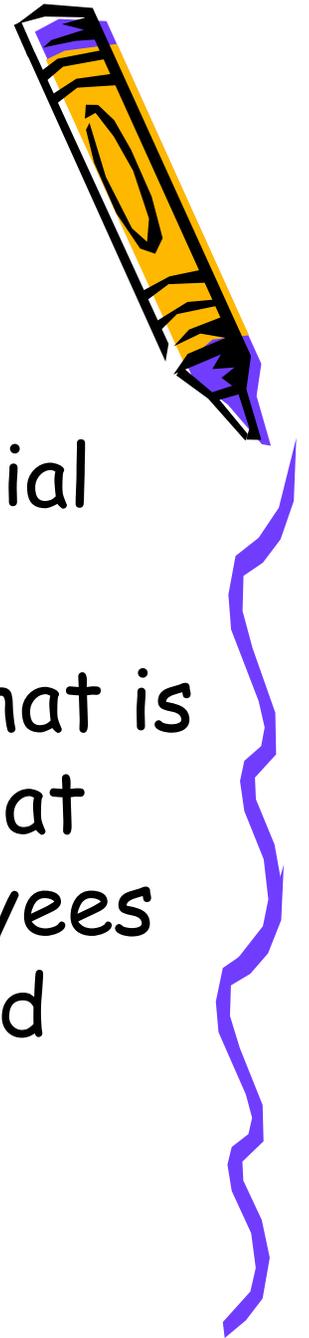
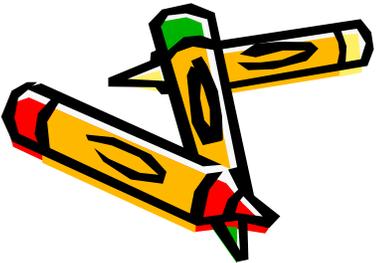


- Parent/ Caregiver is defined as the person who has the most knowledge of the child over the past 30 days. Preferably this person has been living with and caring for the child or has daily contact with the child.



Responses Are Kept Confidential

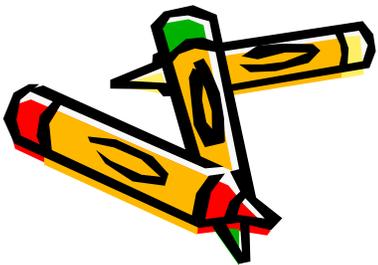
- All responses a parent or caregiver makes on the BERS-2 are confidential information.
- Data are entered into a database that is password protected. This means that only selected and authorized employees of organizations serving children and families may enter the data.



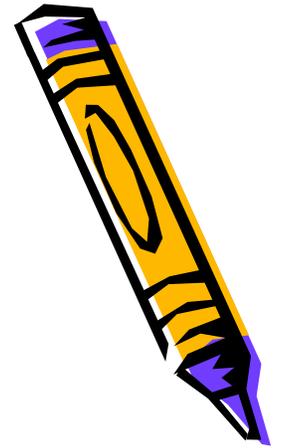
Does the BERS-2 Measure What We Want It To?



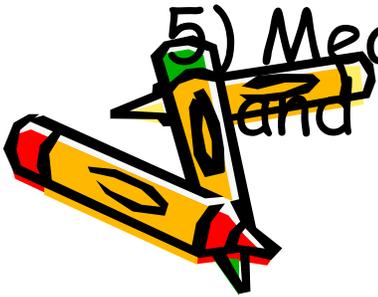
Since it was first developed in 1998, the BERS-2 has been studied and compared to other tools many times. These studies show that the BERS-2 accurately measures the personal and emotional strengths of children.



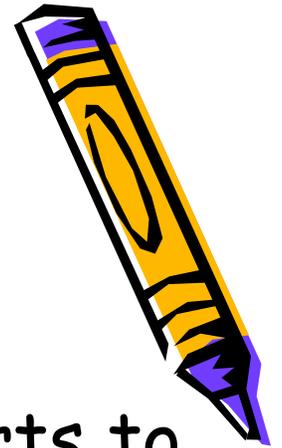
Uses for BERS-2



- 1) Identifies children with limited strengths
- 2) Targets goals for an individual treatment plan
- 3) Identifies strengths and weaknesses for treatment
- 4) Documents progress in a strength area as a result of specialized services
- 5) Measures strengths for use in research and evaluation projects

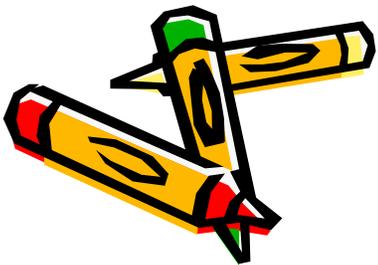


3 Types of BERS-2 Rating Scales



The BERS 2 may be done in up to three parts to allow for a complete picture of a youth's functioning. There is quite a bit of overlap of the questions in the three types.

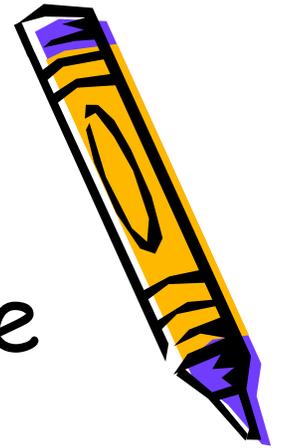
- Parent/Caregiver (Parent Rating Scale-PRS)
- Youth (Youth Rating Scale-YRS) for youth ages 11-18 with a 5th grade reading ability or better
- Teacher or Other Professional (Teacher Rating Scale-TRS)



AMH requires the use of the Parent Rating Scale.

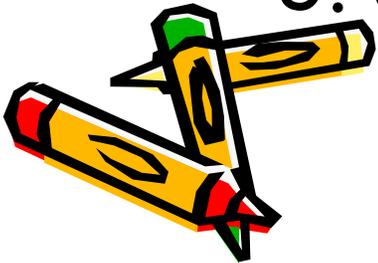


What are the five subscales?



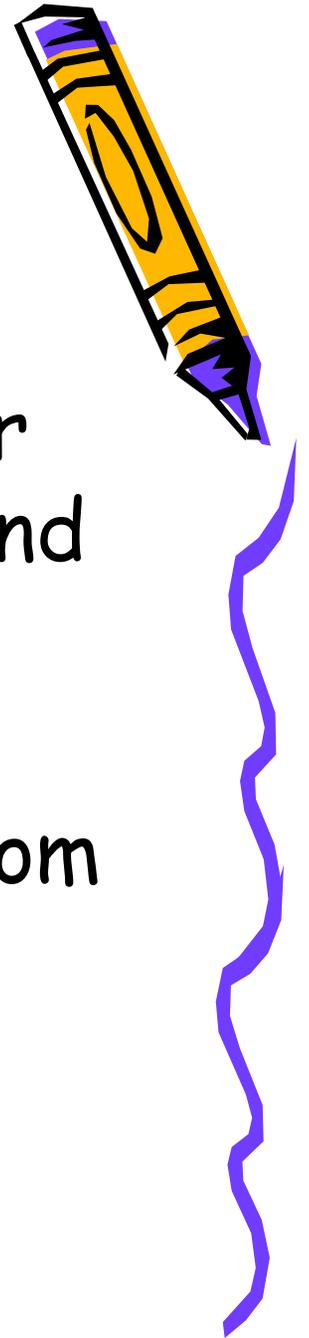
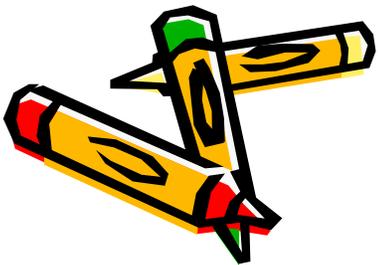
The 52 item scale measures five areas:

1. Interpersonal Strength- a child's strengths in relating to others
2. Family Involvement - a child's strengths in relationship with and participation in family life
3. School Functioning- a child's strengths in school task participation



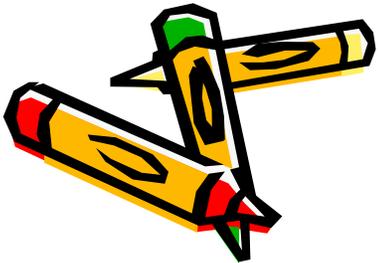
What are the five subscales?

4. Intrapersonal Strength- a child's internal emotional strengths: their outlook on their own competence and accomplishments
5. Affective Strength - a child's strength in accepting affection from and expressing feelings toward others



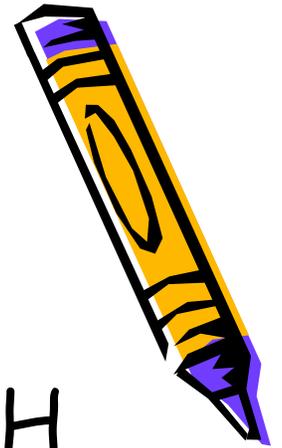
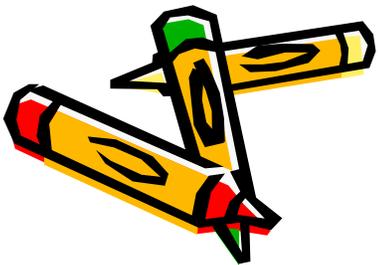
How is the data used?

The Addictions and Mental Health Division (AMH) collects and analyzes this grouped outcome data to present to the legislature and interested stakeholder groups such as state and local advisory groups. This is important to make a case for funding and planning of children's mental health system needs.

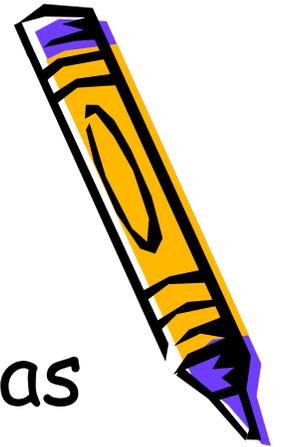


Why is the data so important?

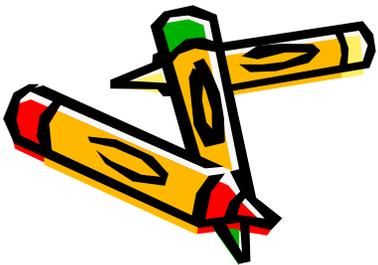
Having this data available helps AMH advocate for continued funding for children's intensive mental health services, and to educate the public on the outcomes for this group of children.



But I'm tired of answering the same questions....

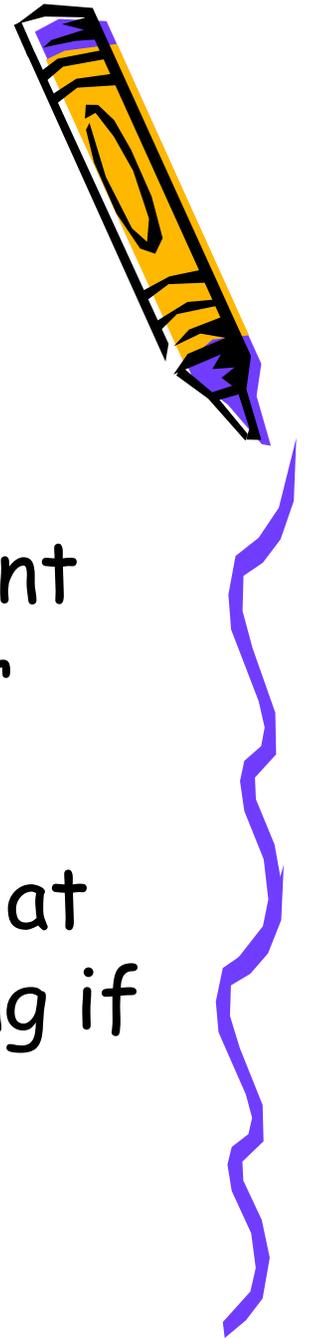
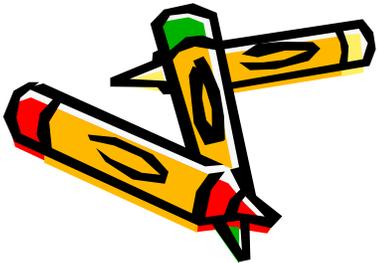


- Please try to answer all the questions as best you can, even if there haven't been big changes. This helps show whether or not your child has made progress from the treatment, or if changes are needed.
- If all the questions aren't answered, it is not possible to score the questions you did answer-- which could make the BERS unusable.

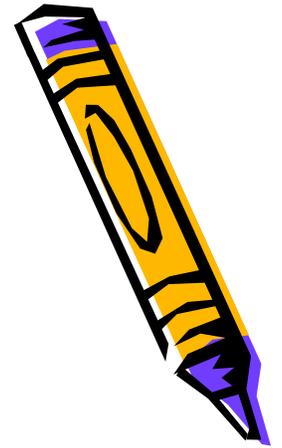


I want to see my child's progress

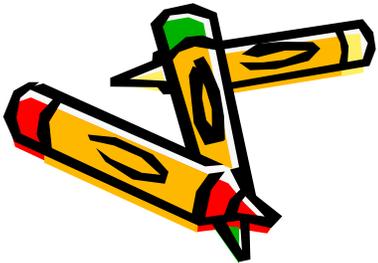
- Your child's care coordinator can arrange to have a printed document to share with you that shows your child's progress over time.
- You can ask to see this document at your child and family team meeting if it is not shared with you.



What if I can't do the BERS-2 or Progress Review?



- It is best to do whatever part you can, and maybe rescheduling with the care coordinator/facilitator will make this easier for you.
- If you just cannot do it, tell the care coordinator. Hopefully you will be able to do it the next time.



Oregon Health Authority Staff to Call if Questions

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