

# **First Episode Psychosis Data Collector User Manual**

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Tools -- located at <https://mha.ohio.gov/Health-Professionals/About-Mental-Health-and-Addiction-Treatment/Early-Serious-Mental-Illness>

- A. Global Functioning Social Scale
- B. Global Functioning Role Scale
- C. Clinician-Rated Dimensions of Psychosis Symptom Severity Scale (DSM-V)
- D. Modified Colorado Symptom Index
- E. Government Performance Results Act (GPRA) Instrument
- F. Youth Satisfaction Survey/Discharge Survey

Other Required Forms -- located at <https://mha.ohio.gov/Health-Professionals/About-Mental-Health-and-Addiction-Treatment/Early-Serious-Mental-Illness>.

- IC1 Informed Consent for parents/guardians for Ages 5 to 17 Years
- IC2 Informed Assent for Ages 11 to 17 Years
- IC3 Informed Consent for Adults Age 18+

## Background

The Ohio Department of Mental Health & Addiction Services (OhioMHAS) is required to provide a percentage of their community mental health block grant funds provided by the Substance Abuse and Mental Health Services Administration (SAMHSA) to First Episode Psychosis programs throughout the state. The goal of these funds is to make a bold and strategic investment to improve the functioning and quality of life of persons experiencing the first signs of Schizophrenia and other psychotic disorders. Providing treatment and recovery supports early in the person's illness has been found to improve overall functioning and reduce the disability often associated with these disorders.

As a requirement of these funds, consenting participants will receive an array of FEP services and be asked to complete measures in order to report on the major components of the national evaluation funded by SAMHSA.

## Purpose

The FEP data collection is a requirement of the Substance Abuse and Mental Health Services Administration (SAMHSA) for all FEP grant funds. The purpose of collecting the data on FEP participants is to describe characteristics of youth, young adults, and families who are receiving FEP services with block grant funds and track their outcomes over time.

The FEP evaluation is designed to:

- Describe the individual characteristics of participants receiving FEP services
- Track how participant outcomes and experiences change over time

The goal is to collect process and outcomes data on all eligible and consenting participants receiving FEP services.

## Workflow and Interview Process

Each FEP program will have their own workflow unique to their program and community; however, there are some aspects that will be consistent across all teams. Early on in treatment when the teams first make contact with the eligible person, they should be asked if they are willing to sign consent forms for both the FEP services and data collection.

Once the client agrees to participate the person responsible for the data collection will schedule a time and place for the person to be interviewed and complete their baseline assessments. This may happen at various times determined by the clinical team. As many of the measures require clinical judgement on the part of the FEP team, it will be up to the team to decide when it is best to complete the baseline assessment. As you will see, many of the measures may be used in an overall client assessment.

At the time of the interview, which can happen on more than one occasion if need be, it will be up to the interviewer if they would like to enter the information directly in to the portal, or use paper forms and enter the information later. In general, the interviewer should always have a paper version in case of any technical difficulties with computers, etc...

During the interview process, the interviewer can refer to this training manual if they need guidance. They may also contact their supervisors for assistance. During the interview it is important to clearly communicate with the participant, and continually assess for any signs of distress. The interviewer will follow his or her agency's protocol if any signs of distress emerge. More information on recognizing distress can be found on **Pages 10-11**. If any questions or problems arise, the interviewer should contact their supervisor before proceeding with the interview.

To begin the interview, the interviewer will begin with the GPRA instrument (**located on the First Episode Webpage**: <https://mha.ohio.gov/Health-Professionals/About-Mental-Health-and-Addiction-Treatment/Early-Serious-Mental-Illness>). Before starting the interview, if the participant is below the age of 18, the interviewer must obtain the caregiver consent form signed by the caregiver giving permission for the child/youth to be interviewed as well as an assent form to be interviewed signed by the child/youth. The interviewer will then follow the instructions in Appendix A and verbally obtain answers for the questions in each of the included tools beginning after Record Management and Section 1: Administrative Data.

## Data Collection Components

### FEP Measures

FEP programs are responsible for interviewing participants (see Table 1) to collect background information and longitudinal data on participant clinical and functional outcomes. FEP teams may also collect some of the information from the clients' records.

Table 1. FEP Evaluation Components

<b>Instrument</b>	<b>Information</b>	<b>Time to Collect</b>
Clinician-Rated Dimensions of Psychosis Symptom Severity Scale (DSM-V)	Assessment of Psychiatric Symptoms	5 minutes (part of team clinical assessment)
Global Functioning Social Scale	Social Functioning (Rating; 1 item)	5 minutes (part of team clinical assessment)
Global Functioning Role Scale	Functioning in employment, student, or homemaker role (Rating; 1 item)	5 minutes (part of team clinical assessment)
Colorado Symptom Index	Self-report mental health symptoms (14 items)	10 minutes
Government Performance Results Act (GPRA) Instrument	services used, antipsychotic medication usage (type and dosage), employment and/or school attendance status, housing status, substance use (including tobacco and cigarettes), inpatient psychiatric hospitalizations, emergency room visits for psychiatric reasons, criminal justice involvement.	30 minutes
Youth Satisfaction Survey	Perception of care received (collected at 6 month follow-ups and discharge. (26 items and open ended for comments)	10 minutes

The components listed in Table 1 have been designed expressly for assessing symptoms and functioning of individuals experiencing Schizophrenia and other psychiatric disorders. Most of the measures are clinician/team generated. FEP teams may decide on ratings as a team, and clinical charts may also be used if needed, but this is left up to the team. The remaining components are obtained by interviewing the participant or providing them with the measure to fill out (Table 2). Again, how the measures are administered to the participant is left up to the FEP team to decide.

Table 2. Instruments by Respondent Category

<b>Instrument</b>	<b>FEP Participant</b>	<b>FEP TEAM/Clinician</b>
Clinician-Rated Dimensions of Psychosis Symptom Severity Scale (DSM-V)		<input checked="" type="checkbox"/>
Global Functioning Social Scale		<input checked="" type="checkbox"/>
Global Functioning Role Scale		<input checked="" type="checkbox"/>
Colorado Symptom Index	<input checked="" type="checkbox"/>	
Government Performance Results Act (GPRA) Instrument	<input checked="" type="checkbox"/>	
Youth Satisfaction Survey	<input checked="" type="checkbox"/>	

## When Data Are Collected

Most components are collected at baseline, and at reassessment at 6 and 12 months or discharge (whichever comes first). However, the Youth Satisfaction Survey (YSS) is only collected at follow-up administrations and/or at discharge.

Table 3. When Data Are Collected

Data Collection	Collection Frequency
Baseline	<ul style="list-style-type: none"> <li>• Baseline data should be collected within 30 days of the participant first receiving FEP services.</li> <li>• If a new episode of care is initiated because the participant re-enters treatment after a discharge or has a lapse in treatment for 90 days or more, a new baseline interview should be conducted</li> <li>• If a youth is already receiving FEP services with the data collection begins, data collection should proceed as a baseline record.</li> </ul>
Reassessment every 6 months	<ul style="list-style-type: none"> <li>• Reassessments should be completed every 6 months after the baseline data collection.</li> <li>• Data may be collected 30 days before, or 30 days after, the 6- or 12-month target date.</li> </ul>
Discharge	<ul style="list-style-type: none"> <li>• Regardless of the time since baseline, a discharge interview should be performed when the youth is officially discharged from services.</li> <li>• The discharge interview should occur within 30 days of discharge or the end of services. If a 6- or 12-month reassessment has been conducted within 30 days of discharge, do not conduct a discharge interview.</li> </ul>

## How the Data Will Be Used

The staff at OhioMHAS will create several reports for SAMHSA’s Center for Mental Health Services (CMHS) to meet federal requirements, including a *Report to Congress*, annual evaluation reports, and other ad hoc reports as requested. Aggregated participant data will be used to complete reports and presentations on behalf of SAMHSA to summarize findings from the Evaluation. At no time will personally identifiable information be shared. OhioMHAS evaluation staff may also prepare site-specific or cross-site reports to help disseminate the findings. Participant-specific and site-specific will also be available through the reports tab in the data portal.

Evaluators at OhioMHAS will generate semi-annual reports to be disseminated to department leadership as well as local programs. Data will be broken down by both regions to assist local sites with continuous quality improvement. Reports will be published via the OhioMHAS FEP webpage. Study participants will have access to all reports.

## Benefits of the Evaluation for Grantees

Providers also benefit from the information received through the evaluation. The evaluation can help programs:

- Understand the results of their efforts
- Identify effective processes, programs, and activities
- Obtain practical suggestions for FEP expansion implementation
- Understand specific ways in which participants improve

As a site, you will have access to the data that you report for the evaluation. Data may be used for your own analysis, reporting, and quality monitoring. Evaluation findings may be used locally or nationally to generate support for First Episode Psychosis programs. Demonstrating the positive impact of program efforts may encourage support from funders.

## What's the GPRA?

It is important to be aware that all FEP programs nationwide are required to collect process and outcomes data. While the federal government has allowed the states some flexibility in their data collection approach thus far, the federal government strictly follows the Government Performance and Results Act (GPRA) National Outcomes Measurement (NOMs) system (also called the NOMs Client-Level Measures for Discretionary Programs Providing Direct Services) for all CMHS funded programs.

The GPRA/NOMs tool collects basic demographic information, functioning, mental health symptoms, drug and alcohol use, military and family deployment, housing stability, hospital stays/visits, criminal justice involvement, education, perception of care, and social connectedness.

The FEP data collection tools cover all aspects of the participant's treatment. As the FEP program evolves there may be changes to the data collection instruments. This will be decided by all FEP programs through our ongoing FEP data collection meeting.

## Participants, Enrollment, and Data Collection

Data collection for the FEP programs will be coordinated and conducted by FEP staff. The goal is to collect FEP data on all participants receiving services within an FEP site. In general, enrolling a participant into the FEP program and data collection efforts may involve the following steps.

- Determine eligibility for the FEP programs
- Obtain all necessary informed consents and/or assents
- Schedule baseline interview

### Determining Eligibility for FEP Evaluation

To be included in the evaluation, respondents will need to:

- Receive services from one of OhioMHAS funded FEP programs
- Be age of eligible age
- Have a diagnosis of a schizophrenia-spectrum disorder, major depressive disorder with psychotic features, or bipolar disorder with psychotic features
- Have baseline data collected within 30 days of entry into service system
- Provide informed consent/assent prior to the initial interview, as appropriate based on client age

Clients who are already receiving FEP services may also be enrolled. Eligibility for participation may be assessed using information from the client record.

### Obtaining Informed Consent

A participant must provide consent or assent in order to participate in the FEP program and its data collection. OhioMHAS has created three separate IRB approved forms that need signed to be legally able to participate in the evaluation interviews. The three separate consent forms include; assent form (for children ages 11-18), caregiver consent form (for interviews with children/adolescents below the age of 18), and adult consent form (for ages 18-21). Data collectors will be responsible for getting the appropriate form(s) signed prior conducting the interviews. They should be kept in a locked file cabinet at your local administrative office. In case of audit, they need to be readily accessible.

### Scheduling Interviews

Schedule participant interviews as soon as possible. If time is a constraint, then the interview may be conducted over multiple sessions. Interviews should be held in a safe, private space. Privacy should be secured prior to the start of the interview. No other party should be able to hear the discussion outside of the room. The interviewer will suggest that the door (if any) to the private space remain ajar if it will not compromise privacy, particularly if there are no windows in the space. However, it is also important to allow the client to choose a location that is comfortable for them. This could be inside their home or a local service provider.

After conducting your intake/baseline interviews, you will need to determine at what date the client is eligible for their reassessment interview. This window opens exactly 5 months after the intake is completed and remains open until 7 months after the intake. We want to be able to assess reliable change over time for program participants, so we are aiming for an 80% reassessment rate minimum for these interviews, so keeping in contact with program participants and successfully collecting both reassessment and discharge interviews is very important.

## Participant Protections

All research activities involving human subjects must be reviewed and approved by an IRB unless the research falls into a category of exemption established by federal regulation. While the FEP study is considered program evaluation, and not technically research, it has still been reviewed by an IRB. The Ohio Department of Health (ODH) Institutional Review Board (IRB) is the governing body under which all human subjects research performed by state government agencies must submit through. The FEP evaluation have gone through IRB review and approval. Protecting our client's privacy and mental well-being is a primary focus in any evaluation or study of mental health services. We have made sure to take every precaution to secure data when a risk of breach is possible.

## Data Collection and Data Entry Processes

Each program will assign their own unique IDs for participants. We may use this unique ID to match data moving forward in the evaluation. Participants may leave and re-enter services over the period of grant funding. In this case, it is important to maintain a system that recognizes participants who previously participated and re-enter the system so that multiple unique identifiers are not created for these participants.

## Distress Protocol

As the FEP program study is focused on individuals with serious mental illness, it is necessary to ask questions that are potentially sensitive. The FEP program evaluation is not introducing new, sensitive domains of inquiry, but is paralleling standard procedures in the field of FEP. It is possible that the information collected during the interviews may cause interviewees to become uncomfortable or experience distress. A distress protocol will be important to have in place if and when these situations arise. If needed, the following is a sample distress protocol that could be adapted to your own FEP. This is a sample and is not meant to replace your own processes or clinical judgment.

### How to Recognize Distress

#### Low to Moderate Distress

The interviewee is showing any of the following signs of low to moderate distress with no perceived or expressed threat to their own safety or the safety of others:

- Crying
- Change in mood
- Change in tone
- Trembling or shaking voice
- Allowing distractions frequently
- Signs of intense fear or sensation of being trapped

- Experiencing flashbacks

The interviewer will ask a question to assess the situation such as, Are you okay? How are you doing? Do you have any questions? Would you like to continue or stop?

- If the interviewee responds with “okay,” the interview will continue.
- If the interviewee does not respond or says something to indicate distress, the interviewer will ask if they need a short break or need to stop the interview.
- If the interviewee does not want to stop the interview, the interviewer will continue.
- If the interviewee would like a break or wants to stop the interview, the interviewer will take a break and then reassess by asking if the interviewee would like to continue.

-If they say yes, the interview can begin from where it left off.

-If they say no, the interviewer will thank them and ask if they would like to continue the interview at a later date.

#### Elevated emotional state

The interviewee is showing any of the following signs of extreme distress, such as expressing intent to self-harm or harm others:

- Uncontrollable crying
- Emotional outbursts
- Speaking but not making any sense
- Being disassociated
- Experiencing flashbacks that continue through course of interview
- Plans to hurt or kill themselves
- Statements indicating they might hurt or kill themselves
- Statements indicating they have no reason to live or life has no purpose
- Plans to hurt or kill someone else
- Statements indicating they might hurt or kill someone else
- Statements about planning or thinking about using a weapon
- Statements about ongoing abuse/neglect

If an interviewee is showing signs of an elevated emotional state, the interviewer should stop the interview and say, “It seems you are upset, and it may be helpful to stop the interview.” At this point, they should enact their program’s safety plan in order to assist the interviewee.

The following questions are asked in the GPRA protocol. If the answer to any of the questions below is “yes,” then please use your own system’s safety planning procedures:

#### Participant Interview

- Have you ever tried to kill yourself? (*baseline*)
- At any time in the past 6 months (including today), did you seriously think about trying to kill yourself? (*reassessment*)
- During the past 6 months (including today), did you try to kill yourself? (*reassessment*)

## Availability of Data

Using the FEPIS data entry portal will give you access to the data you report. You may download data for service planning, quality improvement, and other internal needs. Instructions for downloading data may be found in the “Accessing Data Entered in the System” section of this manual.

## Entering the Data

### Submitting data through the FEPIS

The First Episode Psychosis Information System (FEPIS) is the online data entry system that grantees will use to submit data.

- FEPIS website: <https://apps.mha.ohio.gov>

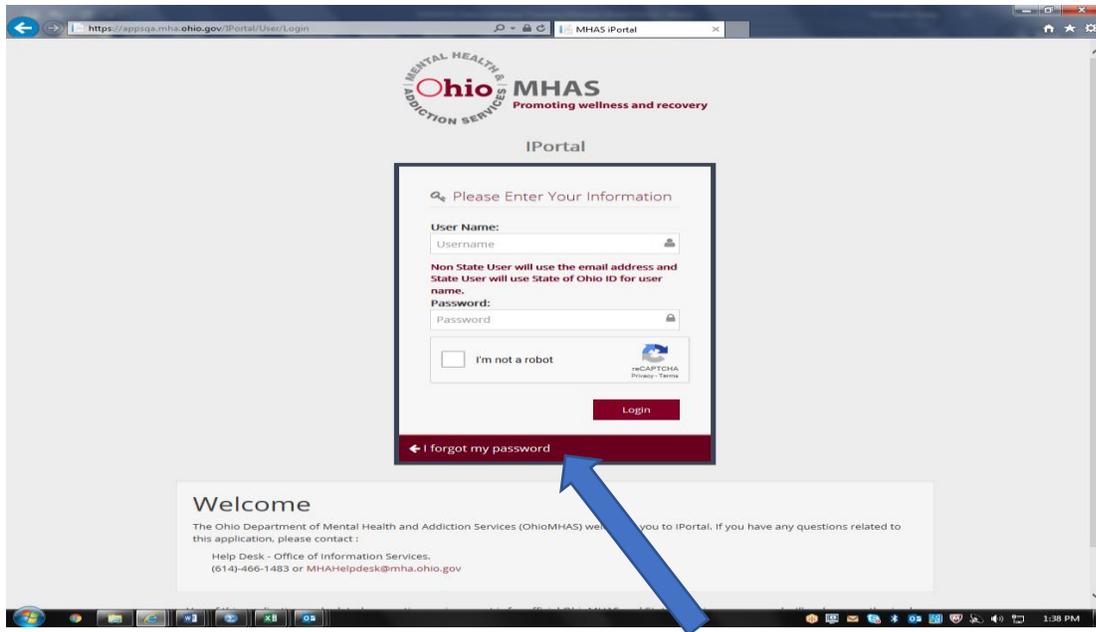
If you have any questions about FEPIS you may email the OhioMHAS helpdesk at:

[MHAShelpdesk@mha.ohio.gov](mailto:MHAShelpdesk@mha.ohio.gov)

### How to Enter FEPIS

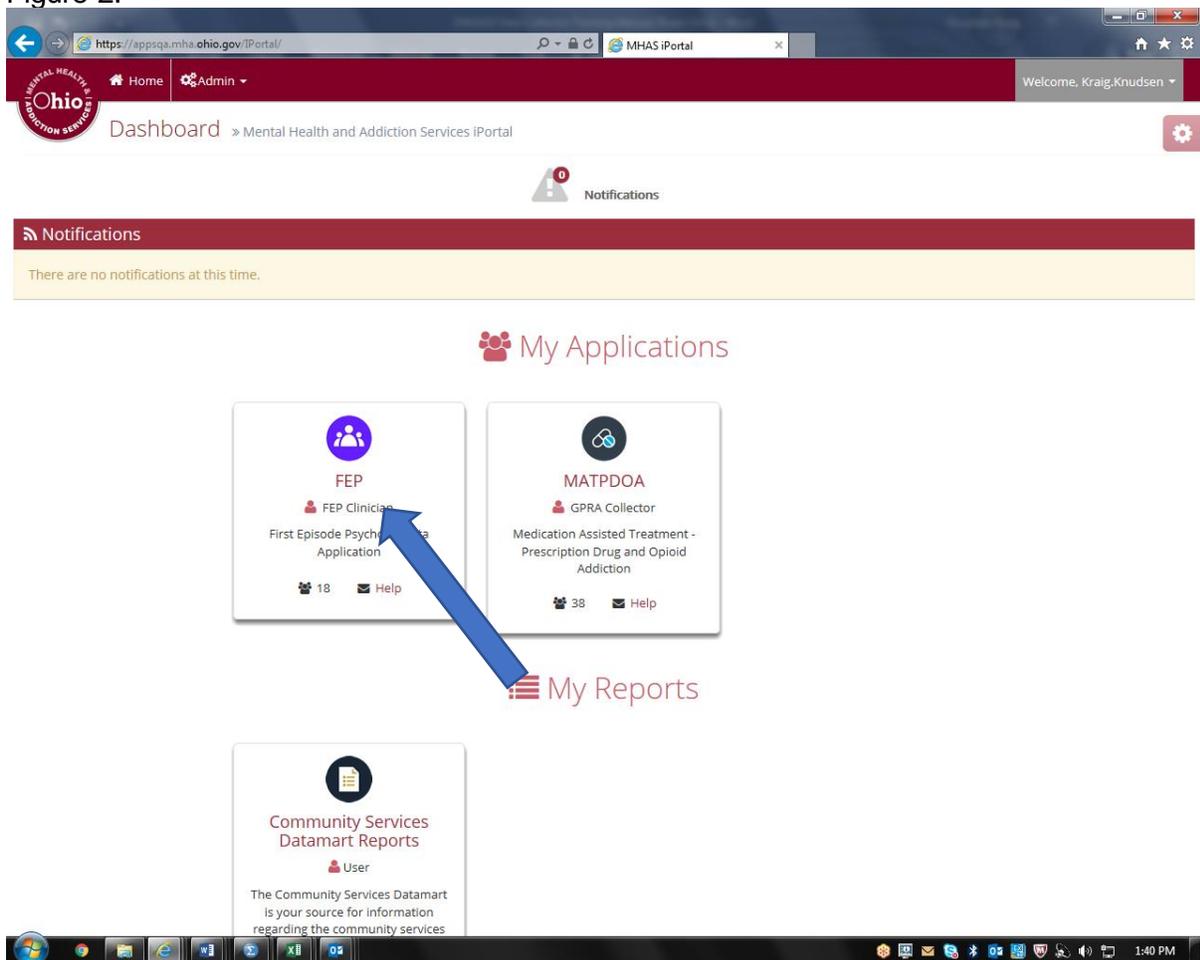
- To enter FEPIS go to the FEPIS website (<https://apps.mha.ohio.gov>) (Figure 1 below) and enter your username and password that you have created. If you have not created a username and password, enter your email address into the username and click on “I forgot my password”. You will be asked to create a new password.

Figure 1.



Next, you will be directed to a “My Applications” page (see Figure 2). Click on the FEP application. The system can take a minute to load, do not exit.

Figure 2.



The next window will be the “home” window, which is the dashboard for all of your FEP data collected (Figure 3). In this window you will find Notifications, Start Assessment, Incomplete Interviews, Past Due Interviews, and Follow-Up Interviews Due. To start an interview, click on Start Assessment above the notifications tab (Figure 3).

Figure 3.

Dashboard » First Episode Psychosis Data System

Notifications Start Assessment

Notifications

There are no notifications at this time.

★ Incomplete Interviews:

	Consumer ID	Interview Type	Create Date	Clinician	
Continue Interview	K.Knudsen	Baseline	05/15/2018		Cancel Interview
Continue Interview	h.hjkghj	Baseline	05/17/2018		Cancel Interview
Continue Interview	f.fdsghsfdg	Baseline	05/18/2018		Cancel Interview
Continue Interview	k.knudsen	Baseline	08/15/2018		Cancel Interview
Continue Interview	K.Knudsen	Baseline	09/10/2018		Cancel Interview
Continue Interview	t.jones	Baseline	09/11/2018		Cancel Interview

★ Past Due Interviews:

There are currently no past due follow up interviews.

★ Follow-Up Interviews Due:

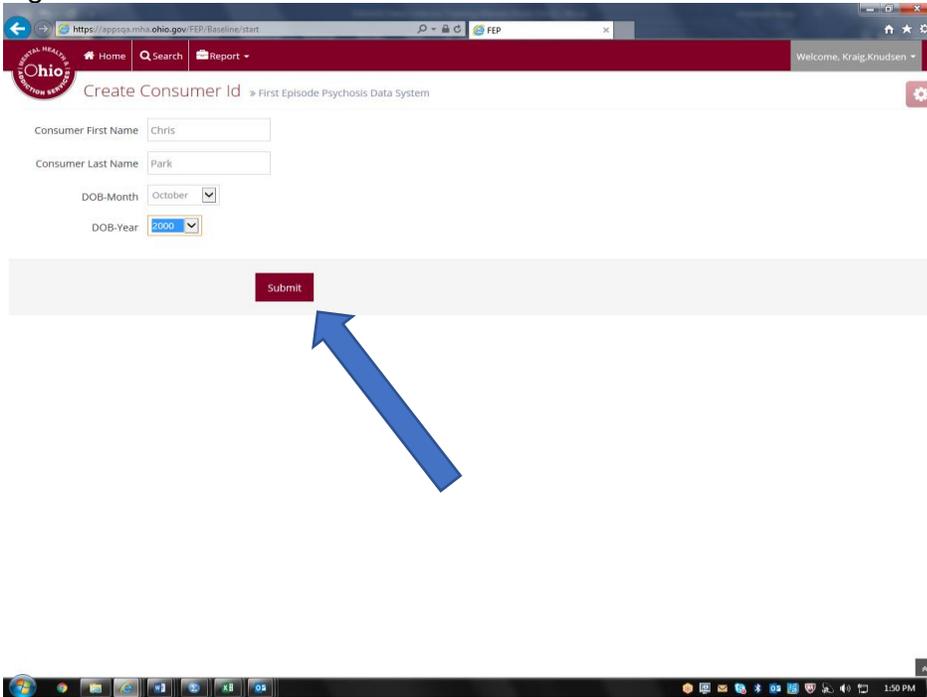
There are currently no follow up interviews due.

https://appsqa.mha.ohio.gov/Home/Dashboard

1:43 PM

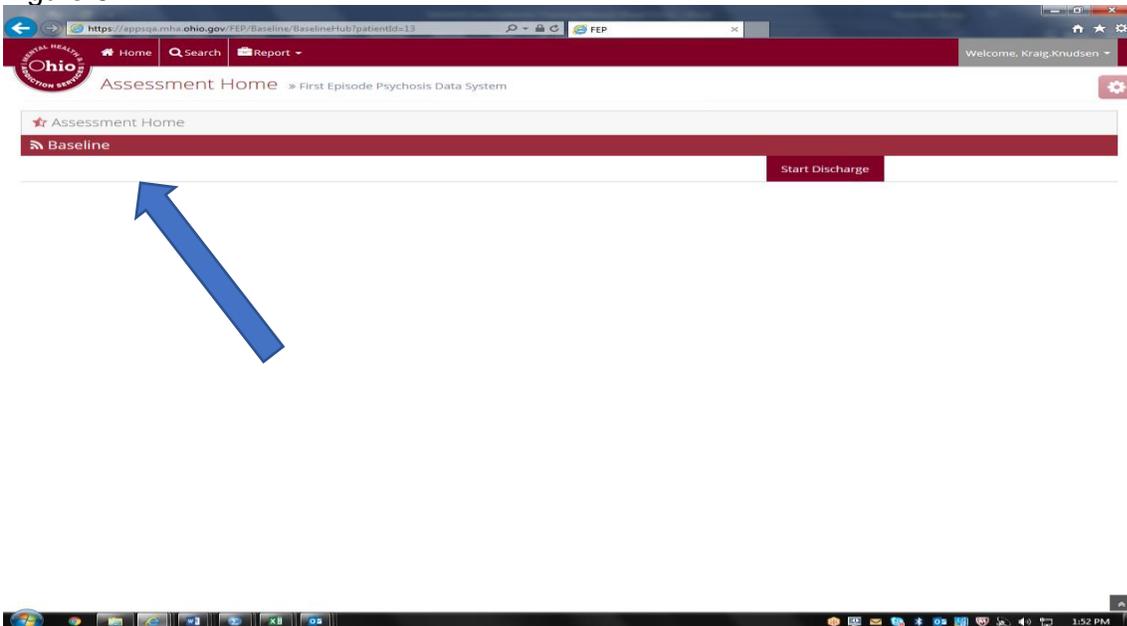
Next, a “Create Client ID” page will load. Fill in the client’s name and date of birth (figure 4). Click submit. In order for your work to be saved in the system you must always click “submit” or “save”.

Figure 4.



The next screen to appear will be an “Assessment Home” page (figure 5). Click on the red area named “Baseline”

Figure 5.



Once you have clicked on “Baseline” all of the measures to be completed will be displayed. To start the baseline GPRA/NOMs assessment, click on “Continue GPRA Interview” under “Available Actions” (Figure 6).

Figure 6.

The screenshot displays the 'Assessment Home' page for the 'First Episode Psychosis Data System'. At the top, there is a navigation bar with 'Home', 'Search', and 'Report' options. The main content area is titled 'GPRA Baseline' and contains a table with the following data:

Assessment Type	Date of Assessment	Status	Available Actions
GPRA Baseline	11/17/2020	Incomplete	Continue GPRA Interview

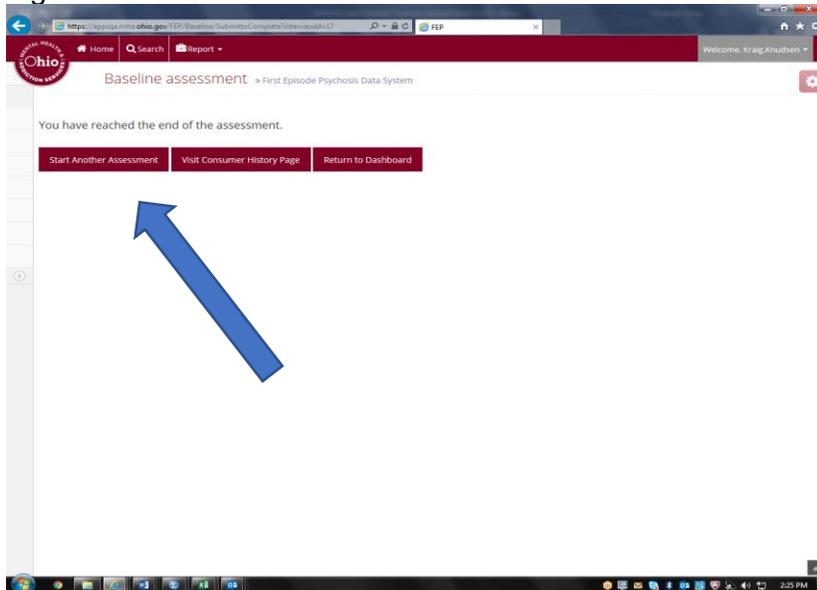
Below the table, three assessment modules are listed: 'Clinician-Rated Dimensions of Psychosis Symptom Severity', 'Modified Colorado Symptom Index', and 'Global Functioning: Social and Role Scale'. A blue arrow points to the 'Continue GPRA Interview' link in the table.

## Within the GPRA Baseline

The next screen to open will be Section A, or the *Record Management* screens for the interview. The first screen asks to identify FEP clinicians and their roles with the participant. Complete and click “save”. The next screen to open will ask you to enter your name (the person entering the data). Enter your name and click “save”. The next screen will identify the client and is self-populated with information you already entered. Click “save”. The next screens will ask about the participant’s diagnoses, medications, race/ethnicity, veteran status, and planned services. Section B asks questions about *Drug, Alcohol and Tobacco use*. Section C asks questions about *Family and Living Situation*. Section D asks questions about *Education and Employment*. Section E is about *Criminal Justice* involvement, and Section G is about *Social Connectedness*.

Once you have finished entering data on an instrument such as the baseline GPRA/NOMS questions, a screen will appear that says you have completed the assessment (Figure 7). You have three options, Start Assessment, Visit Consumer History Page, and Return to Dashboard. To stay within this client's file and continue entering data on other instruments, click on "Start Another Assessment". A list of all measures will show up on the next page all the assessments will show up. Click on any of the assessments in red to enter the data for those assessments. Remember to always click "save" or "submit" when you are finished entering data.

Figure 7.



A detailed training which demonstrates a more detailed walkthrough of the FEPIS can be found on the FEP website.

## Data Entry Summary

1. To enter FEPIS go to the FEPIS website ( <a href="https://apps.mha.ohio.gov">https://apps.mha.ohio.gov</a> ) and enter your username and password that you have created. If you have not created a username and password, enter your email address into the username and click on "I forgot my password". You will be asked to create a new password.
2. Next, you will be directed to a "My Applications" page. Click on the FEP application. The system can take a minute to load, do not exit.
3. The next window will be the "home" window, which is the dashboard for all of your FEP data collected. In this window you will find Notifications, Start Assessment, Incomplete Interviews, Past Due Interviews, and Follow-Up Interviews Due. To start an interview, click on Start Assessment above the notifications tab.
4. Next, a "Create Client ID" page will load. Fill in the client's name and date of birth. Click submit. In order for your work to be saved in the system you must always click "submit" or "save".
5. The next screen to appear will be an "Assessment Home" page. Click on the red area named "Baseline"
6. Once you have clicked on "Baseline" all of the measures to be completed will be displayed. To start the baseline GPRA/NOMS assessment, click on "Complete Assessment under "Available Actions".
7. The next screen to open will be Section A, or the <i>Record Management</i> screens for the interview. The first screen asks to identify FEP clinicians and their roles with the participant. Complete and click "save". The next screen to open will ask you to enter your name (the person entering the data). Enter your name and click "save". The next screen will identify the client and is self-populated with information you already entered. Click "save". The next screens will ask about the participant's diagnoses, medications, race/ethnicity, veteran status, and planned services. Section B asks questions about <i>Drug, Alcohol and Tobacco use</i> . Section C asks questions about <i>Family and Living Situation</i> . Section D asks questions about <i>Education and Employment</i> . Section E is about <i>Criminal Justice</i> involvement, and Section G is about <i>Social Connectedness</i> .
8. Once you have finished the baseline GPRA/NOMS questions, a screen will appear that says you have completed the assessment. You have three options, Start Assessment, Visit Consumer History Page, and Return to Dashboard. To complete the other instruments, click on "Start Another Assessment". On the next page click on "baseline" and all the assessments will show up. Click on any of the assessments in red to enter the data for those assessments. Remember to always click "save" or "submit" when you are finished entering data.

## Adding a Follow-Up Interview or a Discharge Interview

1. You will find all the follow-up interviews that are due on your homepage dashboard. Simply click on the person's interview you would like to complete and start the data entry. Use the same steps for the re-assessment and discharge instruments as you did for the baseline assessments.
2. You can enter discharge data at any time, by simply clicking on "discharge".

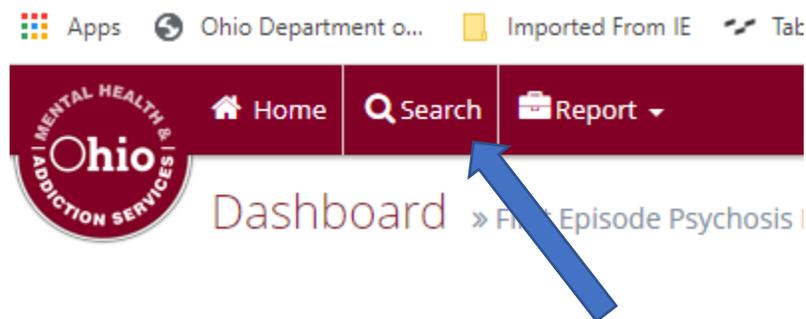
## Accessing and Utilizing Data Entered in the System

1. On the “Consumer Assessment History” page you can view all data entered by clicking on “view assessment”.
2. The “Consumer Assessment History” page also allows the user to view charts to examine change over time scores by simply clicking on “generate a report”. Importantly, this function is only useful with more than one time point completed.
3. If needed, OhioMHAS may also send you an Excel file of data in the portal for your site. Simply send an email to the helpdesk, include the name of your grant (First Episode Psychosis), your role on the project, indicate the data you would like to see, and we will send the data to you.

## Search Page

1. The Search Page link is found at the top left-hand corner of the FEPIS homepage (Figure 8).

Figure 8.



2. The system will then require the user to enter Search criteria on the page seen in Figure 9 below.
3. The page requires the user to enter data on at least one search measure for a search to begin.
4. The specificity of a search is dependent upon the number of search levels used.
5. The population of available clients is first limited by the user’s role within FEPIS. For example, a clinician can only search among those clients who are assigned to him or her, while a Program Administrator’s search population begins with all clients within that agency who have data within FEPIS.
6. The reports are currently limited to twelve clients/applicable cases per page. Please be sure to view all available pages within the produced by a search.

Figure 9.

Select your search criteria

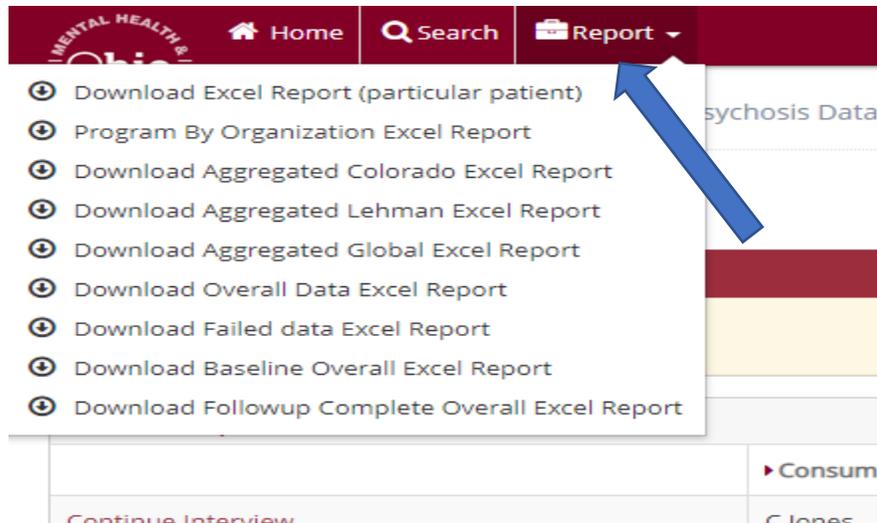
The form contains the following fields and controls:

- Consumer ID:  [Search icon]
- Consumer Last Name:
- Clinician:  [Dropdown arrow]
- Status:  [Dropdown arrow]
- Organization:  [Dropdown arrow]
- Assessment Type:  [Dropdown arrow]
- Start Date:  [Calendar icon]
- End Date:  [Calendar icon]
- Buttons: Search (red), Clear Search (grey)

### Creating Reports within FEPIS

1. Reports tab is found at the top left-hand corner of the FEPIS Homepage.

Figure 10.



2. Once you have entered data into the portal, you can download the data directly from the portal website. Simply click on the “Report” tab and click on “Download Excel Report.” This will give you the option to download an Excel file with all the data that have been entered in the system for that client. You can view or save these files on your local computer.
3. A single mouse click will demonstrate a list of all available reports.
4. Choose your report of interest and click again.
5. Reports will be generated using MS Excel and can then be downloaded and saved.
6. Please be sure to check the Report tab regularly, as we expect the types and number of available reports to grow over time.

## Questions? / Contact information

If you have questions or problems with data entry, please send an email to [MHAHelpdesk@mha.ohio.gov](mailto:MHAHelpdesk@mha.ohio.gov) and we will address your concerns.

Questions related to other aspects of the evaluation should be directed to [Kraig.Knudsen@mha.ohio.gov](mailto:Kraig.Knudsen@mha.ohio.gov)