Transformation Accountability (TRAC)
Center for Mental Health Services

NOMs Client-Level Measures for Discretionary Programs Providing Direct Services

QUESTION-BY-QUESTION INSTRUCTION GUIDE For Minority AIDs Initiative – TCE, Adult Programs

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GENERAL OVERVIEW

These instructions are for collecting the Center for Mental Health Services (CMHS) NOMs Client-level Measures for Discretionary Programs Providing Direct Services to Adults, **also known as Services Activities.** CMHS grantees that provide direct services to consumers are required to collect data from each consumer who receives grant-funded services. Grantees collect these data from individual consumers using the NOMs Client-level Measures tool, **also known as the Services tool.** Data are collected throughout a consumer's episode of care.

- A ***consumer*** is defined as a person who is actively in treatment with a CMHS funded program.
- ***An episode of care*** begins when the consumer enters treatment or services, as defined by the program, and ends when the consumer is discharged and no longer receiving treatment or services with that grantee. A new episode of care begins when a consumer returns for treatment after a lapse of service of 90 calendar days or more or after being discharged.

For each episode of care, an attempt must be made to interview the consumer at baseline, 6-month reassessment intervals (calculated as 180 calendar days), and discharge.

This guide contains general interviewing and data submission guidelines, an overview of how consent impacts the structure of the interviews, and what data is required at each assessment.

GENERAL GUIDELINES FOR COLLECTING AND SUBMITTING DATA

INTERVIEWING GUIDELINES

Before starting the interview, consider using a calendar to mark off the last 30 calendar days or asking the consumer if he or she keeps a calendar. Many questions in the Services tool refer to the last 30 calendar days and having a calendar present may assist with the consumer's recall.

You must conduct interviews in-person, unless you obtain a waiver by contacting the TRAC Help Desk. (The waiver must be approved by the TRAC Administrator and your GPO). The consumer should answer all applicable questions as described below in Table 1 and Table 2.

Reading the questions:

At the beginning of each section, introduce the next set of questions, (e.g., "Now I'm going to ask you some questions about…").

Read each question as it is written. Instructions written in all capitals and italicized should not be read to the consumer. If a consumer has difficulty understanding a question it is acceptable to explain the question to him/her using the descriptions listed in this guide. However, do not change the wording of the question.

Read response categories that appear in sentence-case lettering, which includes upper-case and lower-case (e.g., Central American or Strongly Disagree).

If all response categories are in capital letters, ask the question open-ended; do not read any of the response categories listed.

Recording the answers:

- NOT APPLICABLE is an available response for appropriate items. For those items, if a consumer does not feel the question applies to them, choose NOT APPLICABLE as his or her response to that question.
- The response option REFUSED is provided for all items that are asked of the consumer. If the consumer refuses to answer a question, check REFUSED.
- The response option DON'T KNOW is provided for all items with the exception of the questions in Sections A. If the consumer does not know the answer to a question, check DON'T KNOW.
- The REFUSED and DON'T KNOW response options are not available for items that are supplied by the grantee.

DATA COLLECTION POINTS

The following tables present the data collection points and required information. A summary of the tables follows.

Table 1. Interviews Completed: ***Data collection points and required information for interviews completed***

Data Collection Points	Record Management	Section A	Sections B, C, D, E & G	Section F	Section H	Section I	Section J	Section K	Data Collected	Data Entered into TRAC	System Lock Dates
Baseline Assessment[1]	X	X	X		X				Complete interview within 7 calendar days of a consumer entering treatment	Enter data within 30 days of completing interview	Data cannot be entered or edited after the system lock date (end of the quarter following when the data was collected). Example: If an interview is collected on June 1st it must be entered before October 1st.
Reassessment	X		X (Except for B5 thru B8)	X	X	X		X	Conduct an interview every 180 calendar days from the Baseline interview date for the duration of the consumer's treatment Timeframe for completing the interview is 30 calendar days before and after interview due date	Enter data within 30 days of completing interview	Data cannot be entered or edited after the system lock date (end of the quarter following when the data was collected). Example: If an interview is collected on July 1st it must be entered before October 1st.
Clinical Discharge	X		X (Except for B5 thru B8)	X	X		X	X	Conduct interview same day (as discharge)[2]	Enter data within 30 days of completing interview	Data cannot be entered or edited after the system lock date (end of the quarter following when the data was collected). Example: If an interview is collected on August 1st it must be entered before January 1st.

[1] Required for all consumers – new; re-enrolling after a discharge; or returning after a 90 day or longer lapse in treatment; except those who refuse or do not provide consent.

[2] If a reassessment interview was conducted within 30 calendar days of when a consumer is discharged, a Clinical Discharge Interview is not required; however, an Admin Clinical Discharge must be submitted.

Table 2. Interviews Not Completed (Admins): ***Data collection points and required information, for interviews not completed***

Data Collection Points	Record Management	Section A	Sections B, C, D, E & G	Section F	Section H	Section I	Section J	Section K[3]	Data Collected	Data Entered into TRAC	System Lock Dates
Baseline Assessment[4]	X	X			X (Only H1 and H2)				Complete admin within 7 calendar days of a consumer entering treatment. Indicate in #2 (Rec Mgmt.) that an interview was not completed and why.	Enter data within 30 days of when the interview was attempted	Data must be entered in TRAC prior to the system lock date (end of the quarter following when the interview was attempted). Example: If the interview was attempted on June 15th the record must be entered into TRAC before October 1st.
Reassessment	X					X		X	Complete admin within 30 days of the interview due date if the consumer cannot be interviewed. Indicate in #2 (Rec Mgmt.) that an interview was not completed and why.	Enter data within 30 days of the interview due date	Data must be entered in TRAC prior to the system lock date (end of the quarter following when the interview was attempted). Example: If the interview was attempted on June 15th the record must be entered into TRAC before October 1st.
Clinical Discharge	X						X	X	Complete admin within 30 days of discharge if consumer cannot be interviewed.[5] Indicate in #2 (Rec Mgmt.) that an interview was not conducted and why.	Enter data within 30 calendar days of discharge	Data must be entered in to the system lock date (end of the quarter following when the interview was attempted). Example: If the interview was attempted on June 15th the record must be entered into TRAC before October 1st.

[3] Some grants may have an Institutional Review Board (IRB) approval that does not allow collection of Section K data without consent. In those cases, Section K data should not be collected as part of an administrative discharge. For all other administrative discharges, Section K data should be collected and entered into the TRAC system.

[4] Required for all consumers – new; re-enrolling after a discharge; or returning after a 90 day or longer lapse in treatment; except those who refuse or do not provide consent.

[5] If a reassessment interview was conducted within 30 calendar days of when a consumer is discharged, a Clinical Discharge Interview is not required; however, an Admin Clinical Discharge must be submitted.

Summary of Table 1 and Table 2:

- **Record Management** is completed by you about the consumer at all data collection points, regardless of whether an interview was conducted.
- **Section A is** asked of the consumer only at baseline. If the grantee is unable to obtain demographic data from a consumer interview, this information may be obtained administratively from other available grant data. If it is unavailable from another source, code it as refused. If the consumer has refused all data collection, and your organization has a policy or IRB decision preventing you from obtaining this information from other records, then these items should be coded as REFUSED.
- **Section B Questions 5 through 8 (Military Family and Deployment)** are asked of the consumer only at baseline.
- **Sections B (except for questions 5 through 8), C, D, E, G, and H** are asked of the consumer during baseline, reassessment and clinical discharge interviews.
- **Section F** is asked of the consumer at reassessment and clinical discharge interviews.
- **Section H** consists of MAI-TCE program specific data. Section H data should be collected for all conducted assessments (Baseline, Reassessment, and Discharge). Questions 1 and 2 of Section H must be answered at Baseline even if the interview is not conducted.
- **Section I** is completed by the grantee about the consumer only at reassessment, regardless of whether an interview was conducted (Administrative reassessment).
- **Section J** is completed by the grantee about the consumer only at clinical discharge, regardless of whether an interview was conducted (Administrative clinical discharge).
- **Section K** is completed by the grantee about the consumer at reassessment and clinical discharge, regardless of whether an interview was conducted (Administrative reassessment or clinical discharge).

CONSENT

The consumer or proxy may indicate that he/she does not want to be interviewed. If this happens the interview should not be conducted. A refusal to the current interview may or may not apply to future interviews or data collection; response options for both cases are available. Upon the start of a new episode of care consumers begin with a "clean slate" and a baseline interview should be attempted.

Items to consider:

- Reassessment interviews should be attempted every 6 months until a consent issue prohibits it or the consumer is discharged.
- Consumers should be interviewed at discharge. If the consumer is unavailable for interview at discharge, the grantee will enter an administrative discharge.
- You should decide whether to provide administrative data at the reassessment based on relevant organizational policies or IRB decisions.

TIMELINES FOR INTERVIEW COMPLETION AND DATA SUBMISSION

The following information is summarized in Tables 1 and 2 above.

Data Collection Timelines

Baseline

For consumers that initiate an episode of care after your grant begins using TRAC, baseline interviews must be completed within seven calendar days after the episode of care is initiated.

For consumers that were already receiving care when your grant began using TRAC, baseline interviews must be completed the next time your project has contact with the consumer.

The completed interview must be entered into the TRAC system within 30 calendar days of the interview date; all edits must be completed no later than the system lock date for the quarter in which the interview was conducted.

Grantees that collect the baseline interview closer to the time the consumer initiates treatment will be advantaged in the reporting of outcomes, since the greatest improvement in outcomes is likely to occur near the start of treatment.

It may not be feasible to conduct a baseline interview for consumers who are seeking treatment after experiencing a crisis or trauma. If it is not possible to conduct the baseline interview right away, you should conduct the interview as soon as possible but no longer than 30 calendar days after an episode of care is initiated.

Requirements for Collecting Administrative Baseline Data
If a consumer is unable or unwilling to provide consent for the baseline interview, you are required to enter administrative information into the TRAC system within 7 calendar days of a consumer entering treatment; all edits must be completed no later than the system lock date for the quarter in which the consumer initiated treatment. The following administrative information is required:

- Record Management
- Section A: Demographic Data
- Section H: Questions 1 and 2

Reassessment

Reassessment interviews should be completed every 6 months (calculated as 180 calendar days) after the baseline interview date for the duration of the consumer's episode of care. The completed interview must be entered into the TRAC system within 30 calendar days of the interview date; all edits must be completed no later than the system lock date for the quarter in which the interview was conducted.

When a new episode of care is initiated because a consumer re-enters treatment after a discharge or a lapse in services of 90 calendar days or more, the timing of the reassessments will be based on the baseline interview date for the new episode of care.

Reassessment Interview Rate
The goal is to conduct reassessment interviews with 100% of consumers for whom a baseline record is submitted. You are not responsible for finding consumers to conduct the reassessment interview unless it is a program or grant requirement.

Window or Timeframe Allowed for Completing the Reassessment
You do not have to complete the 6-month reassessments on the consumer's exact due date. For interviews to count toward your reassessment interview rate, you must complete the reassessment interviews within a window that starts 30 calendar days before and ends 30 calendar days after the interview due date.

You are not required to conduct interviews outside the reassessment window. However, interviews that are conducted and submitted outside the window will be accepted by TRAC and the data will be available in your data download and for use by CMHS. Interviews that are submitted outside of a window (before or after) will not be counted toward your reassessment interview rate.

Requirements for Collecting Administrative Reassessment Data
If a reassessment interview is not conducted, you are required to enter the following administrative information into the TRAC system within 30 days of the interview due date; all edits must be completed no later than the system lock date for the quarter in which the interview was due.

- Record Management. For question 2, which asks whether the interview was completed, select "No" and indicate the reason the interview was not completed.
- Section I (Reassessment status)
- Section K (Services received)

If administrative information is submitted in place of an interview but you are then able to conduct a reassessment interview before the system lock date, you will need to delete the administrative record prior to entering the interview record.

Example: Reassessment
The specific dates for a reassessment interview will be determined by the interview date for a consumer's baseline interview. For example:

- *Reassessment Interview Due (every 180 calendar days for duration of consumer's treatment):* A consumer enters the grant on January 3rd and completes the baseline interview. The consumer will be due for a 6-month reassessment interview on July 2nd and a 12-month reassessment interview on December 29th of the same year. For any reassessment the consumer does not complete, you must submit administrative information, as described above.

Clinical Discharge

Clinical discharge interviews must be completed at the time of discharge. The completed interview must be entered into the TRAC system within 30 calendar days of the interview date; all edits must be completed no later than the system lock date for the quarter in which the interview was conducted.

Clinical Discharge Defined

A clinical discharge is defined by the grant. However, if the consumer has not had contact with the project for 90 calendar days or more or the consumer has died; the consumer should be considered discharged. Contact refers to services or referrals provided, phone calls related to a treatment plan (not scheduling), or crises intervention or emergency services.

Requirements for Conducting Clinical Discharge Interviews

It is up to you to identify when discharge interviews are due. If the consumer is present on the day of discharge, a discharge interview must be conducted that day. You are not responsible for finding the consumer to conduct the clinical discharge interview. This does not apply if a clinical discharge interview is a program or project requirement.

Requirements for Collecting Administrative Clinical Discharge Data

If a clinical discharge interview is not conducted, you are required to enter the following administrative information into the TRAC system within 30 calendar days of discharge or of being notified of the consumer's death. All edits must be completed no later than the system lock date for the quarter in which the consumer was discharged.

- Record Management (check "No" for the question regarding whether the interview was completed and indicate why the interview was not completed)
- Section J (Clinical Discharge Status)
- Section K (Services Received)

If an administrative clinical discharge is submitted in place of an interview and then a clinical discharge interview is conducted, you will need to delete the administrative record prior to entering the interview record.

If a reassessment interview was conducted within 30 calendar days of a discharge, a separate clinical discharge interview is not required. However, an administrative clinical discharge must be completed.

Example Data Collection Points for Clinical Discharge

The dates for clinical discharge interviews or administrative data will be determined by the date of discharge or consumer's death. For example:

- *Clinical Discharge (Grantee Definition):* A consumer enters a program on June 1st and completes a baseline interview. He/she is discharged by the project according to the grantee's definition of discharge on September 1st. If possible, a clinical discharge interview should be conducted on September 1st. If the consumer is not interviewed for any reason, you should complete Record Management and Sections J and K within 30 days of discharge. Note: Some projects may prohibit the collection of Section K.

- *Clinical Discharge – Lost contact with grantee:* A consumer enters a program on June 1st and completes the baseline interview. He/she is then not in contact with the program for 90 calendar days or more since the last service encounter. You must complete the Record Management and Sections J and K in the TRAC system within 30 calendar days after the consumer lost contact (the 91st day he/she was not in contact with the grantee).

- *Clinical Discharge – Consumer death:* A consumer enters a program on June 1st and completes the baseline interview. The grantee is notified of the consumer's death in August. The grantee must complete Record Management and Sections J and K in the TRAC system within 30 calendar days of the notification.

Data Submission Deadlines

NOMs Client-level Measures (Services Activities) data should be entered into the TRAC system within 30 days of the interview date or due date of the interview (for admins). All edits must be made before the system lock date. The system lock dates are shown below for FFY 2014.

FFY 2014

Services Data Collected During this Period:	Grantee should enter (interviews and admins):	System Lock Date:
Quarter 1: October 1, 2013 to December 31, 2013	Within 30 days of the interview date or when the interview was due OR Within 30 days of the discharge	April 1, 2014
Quarter 2: January 1, 2014 to March 31, 2014		July 1, 2014
Quarter 3: April 1, 2014 to June 30, 2014		October 1, 2014
Quarter 4: July 1, 2014 to September 30, 2014		January 1, 2015

This Question-by-Question Instruction Guide is organized according to the sections of the Services tool. For each section there is an overview and definitions that apply to the items in that section. The following information is provided about each question:

Intent/Key Points Describes the intent of the question.

Additional Probes Offers suggestions for probes that may help prompt the consumer's memory during the interview.

Coding Topics Clarifies how to count or record certain responses. Please pay close attention to coding topics because they address questions that could otherwise produce vague answers.

Cross-Check Items Alerts the interviewer to items that should be related, and answers that should be verified if a contradiction occurs during the course of the interview.

Skip Pattern Indicates which items should be skipped and under what circumstances. There are certain questions that are irrelevant based on how a consumer answered a previous question.

In cases where a consumer speaks a language other than English, you should follow the same procedures for collecting the data as used to obtain any other information for that consumer.

RECORD MANAGEMENT

OVERVIEW

This section pertains to the collection of the consumer's identification for the TRAC system, the grantee information, and consumer's interview information.

The Record Management Section is **not** asked of the consumer, but is supplied by you. The Record Management information must be filled in for each interview, regardless of whether an interview was conducted.

Coding Topics/Definitions

Consumer ID A unique consumer identifier that is determined by the grantee. It can be between 1 and 11 characters and can include both numerals and letters. It cannot begin with a dash or contain non-alphanumeric characters, including any of the following: "."[]!@#$%^&*(.)", with the exception of dashes or underscores. This ID is intended to track a specific consumer through his/her interviews, baseline, clinical discharge, and 6-month reassessments (calculated as 180 calendar days), while maintaining the anonymity of the consumer. The same unique ID is used each time, regardless if the consumer has more than one episode of care (i.e., if he/she is discharged or leaves treatment for 90 days or more and then returns). This consumer ID allows for unduplicated counts across all CMHS service programs. To protect the consumer's identity, do not use any information that could identify the consumer. This includes using, but is not limited to, the consumer's name, initials, date of birth or Social Security Number as all or part of the Consumer ID.

Contract/Grant ID The CMHS assigned grant identification number. The identifier begins with a single number between 1 and 5. For example, a grant ID may be 1 SM12345. For the purpose of the TRAC project, the identifying portion of the number is SM12345; the first number is not needed. A maximum of 10 digits may be used.

Site ID The purpose of the Site ID is to associate the consumer data entered for a grant to a specific grant location. It is used by grantees to help them track where the services were provided or where the interview was conducted. **Grants will need to have a Site ID(s) in order to enter records in TRAC.** To request a Site ID(s), the Project Director must go into "My Account" > "Update my Grant" on the TRAC website and complete the questions under the "For Consumer Service Program Grants Only Section". The Help Desk will contact the grant with questions as necessary. The Site ID will be emailed to the grant from the TRAC Help Desk.

1 ASSESSMENT TYPE

Intent/Key Points

Indicate the type of assessment that is being completed. **Remember these questions are not asked of the consumer, but are completed by you.** Please refer to the Introduction for more information about the timing of assessments, and the requirements for conducted and administrative interviews.

Coding Topics/Definitions

Baseline —The initial assessment conducted at the start of an episode of care. If a consumer ends one episode of care and begins another, as described in the Introduction section, a new baseline must be administered using the same consumer ID.

If you choose baseline, answer the follow-up question:

- *Enter the month and year when the consumer first received services under the grant for <u>this</u> episode of care*

  Enter the date [month/year], using numbers. The date the consumer first began receiving grant-funded services for the current episode of care must be after the grant start date. An episode of care begins when the consumer enters treatment or services, as defined by the program, and ends when the consumer is discharged and is no longer receiving treatment or services with that grantee. A new episode of care begins when a consumer returns for treatment after a lapse of service of 90 calendar days or more or after being discharged.

Reassessment—Periodic reassessments conducted every 6 months for the duration of the consumer's treatment, (calculated as 180 calendar days).

If you choose reassessment, answer the follow-up question:

- *Which 6-month reassessment?*

  Fill in the number which corresponds to the reassessment. For example: 06 for the 6-Month Reassessment, 12 for the 12-Month Reassessment, 18 for the 18-Month Reassessment, etc.

Clinical discharge—A final assessment conducted at the time the consumer is discharged from the program.

Cross-Check Items None

Skip Pattern None

2 WAS THE INTERVIEW CONDUCTED?

Intent/Key Points

The intent of this question is to indicate whether or not an interview with the consumer is going to be conducted at this time.

Additional Probes and Coding Topics/ Definitions

Yes

If you indicate YES, answer the follow-up question:

- *When?*

Enter the month, day, and year when the interview was conducted.

For a Baseline – This date should be on or after the grant start date and the grant target start date and on or before the current date. The baseline interview date will determine when subsequent reassessment interviews are due.

For a Reassessment – This date must be after the date of any previous baseline or reassessment record entered in the TRAC system.

For a Clinical Discharge – This date must be after the most recent interview date.

No

If you indicate NO, answer the follow-up question:

- *Why not? Choose only one.*

Select one of the following reasons why the interview was not conducted.

Not able to obtain consent from proxy: The grantee was unable to get consent from the consumer's proxy.

Consumer was impaired or unable to provide consent: The consumer was unable to provide consent; typically due to cognitive impairment.

Consumer refused this interview only: The consumer refused to participate in this interview only and the grantee will try to reach them for the next interview.

Consumer was not reached for interview: For reasons other than consent or refusal issues, the grantee was unable to reach the consumer in order to conduct an interview.

Consumer refused all interviews: The consumer refused to participate in this and all future interviews for TRAC. If this is selected, you will not be required to submit

reassessment data and will not receive notification for future reassessments. However, you will be responsible for submitting an administrative discharge for the consumer. This includes completing the record management section and Sections J & K.

Cross-Check Items None

Skip Pattern

For Baselines: If this is a baseline, go to Section A.

For Reassessments:

- If an interview was conducted, go to Section B.
- If an interview was not conducted, go to Section I.

For Clinical Discharges:

- If an interview was conducted, go to Section B.
- If an interview was not conducted, go to Section J.

SECTION A: DEMOGRAPHIC DATA

OVERVIEW

This section pertains to consumer demographic information. These questions are only asked at baseline. **Please ask the question and mark the response given by the consumer.** While some of the information may seem apparent, **ask all questions** for verification. Do not complete a response based on the consumer's appearance. If the consumer refuses to answer a question, check the REFUSED option and go to the next question. Do not read response options in ALL CAPS.

A1 What is your gender?

Intent/Key Points

The intent of the question is to determine the consumer's gender. Ask the question open-ended and enter the consumer's response, even if the consumer's response does not match his/her obvious appearance.

Additional Probes

If the consumer does not understand or asks what is meant by gender you may clarify the question by asking if they prefer to be seen or if they see themselves as a man or male, woman or female, as a transgender, or other. If the consumer identifies a category that is not listed, mark OTHER and record the response in the space provided.

Coding Topics/ Definitions None

Cross-Check Items None

Skip Pattern None

A2 Are you Hispanic or Latino?

Intent/Key Points

The intent of the question is to determine whether the consumer is Hispanic or Latino, and, if Hispanic/Latino, of which ethnic group he/she considers him/herself.

Note that this is a two-part question. Read the first question open-ended and record the consumer's response. If the answer is yes, read the follow-up question with the available ethnic response options.

Additional Probes None

Coding Topics/Definitions

If the consumer responds that he/she is Hispanic or Latino, check YES **and** then inquire about which ethnic group the consumer considers himself/herself. Read the available ethnic group response options and allow the respondent to answer YES, or NO to each. If the consumer identifies a group that is not represented on the list, select OTHER and record his/her response in the space provided.

The consumer can indicate YES to as many ethnic groups that he/she wants.

The consumer cannot indicate NO for all ethnic groups.

Cross-Check Items None

Skip Pattern

Skip the follow-up question, "*[IF YES]* What ethnic group do you consider yourself?", if the answer to A2 is NO or REFUSED.

A3 What race do you consider yourself? Please answer yes or no for each of the following. You may say yes to more than one.

Intent/Key Points

The intent of the question is to determine what race the consumer considers himself or herself. Record the response given by the consumer, not the interviewer's opinion.

Read the available race response options, and allow the respondent to answer YES, or NO to each. Ask this question to all consumers, even those who identified themselves as Hispanic or Latino.

Additional Probes None

Coding Topics/Definitions

The consumer can choose YES, to as many as apply.

The consumer may respond NO to all races.

Cross-Check Items None

Skip Pattern None

A4 What is your month and year of birth?

Intent/Key Points

The intent is to record the consumer's month and year of birth. Only the month and year will be entered and saved in the TRAC system.

Additional Probes None

Coding Topics/Definitions

Enter the date as mm/yyyy. The TRAC system will only save the month and year. Day is not asked nor saved in the TRAC system to protect the identity of the consumer.

Cross-Check Items None

Skip Pattern

If a baseline interview was not conducted, go to Section H; otherwise continue to Section B.

SECTION B: FUNCTIONING, MILITARY FAMILY AND DEPLOYMENT, AND VIOLENCE AND TRAUMA

OVERVIEW

This section pertains to issues of physical, emotional/mental health, substance use, consumer and family veteran status, and experiences with violence or trauma. The scales in this section ask the consumer to report on their perception of their current general health (physical and emotional), daily functioning, and use of tobacco, alcohol, and other substances. Do not read REFUSED, DON'T KNOW or NOT APPLICABLE as options.

FUNCTIONING

The functioning questions (B1 – B4) are asked at all interviews; the GAF score and date are optional but may be submitted for all interviews.

B1 How would you rate your overall health right now?[1]

Intent/Key Points

The intent is to determine information about the consumer's overall health status at the time of the interview. This question applies to both physical and emotional/mental health.

For this item, read the question and response choices ranging from "excellent" to "poor" and record the consumer's answer.

Additional Probes

If needed, clarify that the question refers to physical, emotional and/or mental health. If you have direct knowledge about the client that appears to contradict their answer or if the answer does not seem consistent with how the client is presenting (e.g., doing an interview after serious injury or illness)—you may ask the client to clarify their answer based on this information. However, if the client chooses to remain with their original answer—record their original response and continue to the next item.

Coding Topics/Definition None

Cross-Check Items None

Skip Pattern None

B2 In order to provide the best possible mental health and related services, we need to know what you think about how well you were able to deal with your everyday life during the past 30 days. Please indicate your disagreement/agreement with each of the following statements.

a. I deal effectively with daily problems.
b. I am able to control my life.
c. I am able to deal with crisis.
d. I am getting along with my family.
e. I do well in social situations.
f. I do well in school and/or work.
g. My housing situation is satisfactory.
h. My symptoms are not bothering me.

Intent/Key Points

The intent is to determine information about the consumer's recent functioning. Ask specifically about how the consumer was able to deal with everyday life during "the past 30 calendar days". Do not use "in the past month" as a substitute—this may lead to confusion and inaccurate responses. For example, if the interview occurs on May 15th, the last 30 calendar days covers April 15 to May 15.

Read the instructions and then each statement followed by the disagreement/agreement categories to the consumer; do not read the REFUSED option. It is important to read all of the functioning statements (items B2a-h) regardless of whether the consumer refuses to respond to one of the statements.

Additional Probes

If needed, clarify that the mental health and related services refer to services, treatment, and/or medications that are provided as a result of the grant.

Coding Topics/Definition

If the consumer refuses to answer question B2a, for example, check the REFUSED option and proceed to question B2b.

If the consumer indicates the question or an answer does not apply, mark NOT APPLICABLE in those cases where it is provided. Otherwise ask the consumer to choose an answer; those answers that do not provide the NOT APPLICABLE option as a possible choice are considered to apply to all consumers and require an answer or refusal.

> *Mental health and related services:* Services provided as the result of this grant that pertain to people with mental illness or at risk of mental illness. When people with mental illness are the population of focus, a wide array of subject areas may be considered to be mental health-related by virtue of the connection with this population. Under such circumstances, mental health-related areas may include, for example, (but

are not limited to) those pertaining to physical health, housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, financial well-being, etc.

Cross-Check Items None

Skip Pattern None

B3 During the past 30 days, about how often did you feel…

a. Nervous
b. Hopeless
c. Restless or Fidgety
d. So depressed that nothing could cheer you up
e. That everything was an effort
f. Worthless

Intent/Key Points

The intent is to assess how frequently the consumer experienced psychological distress within the past 30 days.

Read the instructions, then each question followed by the response options ranging from "all of the time" to "none of the time."

Additional Probes None

Coding Topics/Definition

If the consumer refuses to respond to a particular item, check the REFUSED option and go to the next item or question in B3.

Cross-Check Items None

Skip Pattern None

B4 (a-t) During the past 30 days, how many days have you used …

a. **Tobacco products (cigarettes, chewing tobacco, cigars, etc.)?**
b. **Alcoholic beverages (beer, wine, liquor, etc.)? *[IF b=0, RF, DK, THEN SKIP TO ITEM e.]***
c. **Alcohol to intoxication (5+ drinks in one sitting)?**
d. **Alcohol to intoxication (4 or fewer drinks in one sitting and felt high)?**
e. **Illegal drugs?**
f. ***[IF b or e =0, RF, DK, THEN SKIP TO ITEM g]***
Both alcohol and drugs (on the same day)?
g. **Cannabis (marijuana, pot, grass, hash, joints, blunts, chronic, weed, Mary Jane etc.)?**
h. **Cocaine (coke, crack, etc.)?**
i. **Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.)?**
j. **Methamphetamine or other amphetamines (crystal meth, uppers, speed, ice, chalk, glass, fire, crank, etc.)?**
k. **Inhalants (nitrous oxide, glue, gas, paint thinner, poppers, snappers, rush, whippets, etc.)?**
l. **Benzodiazepines, sedatives or sleeping pills (Serepax, Ativan, Librium, Rohypnol, GHB, etc.) Diazepam (Valium); Alprazolam (Xanax); Triazolam (Halcion); and Estasolam (Prosom and Rohypnol–also known as roofies, roche, and cope)?**
m. **Barbiturates: Mephobarbital (Mebacut) and pentobarbital sodium (Nembutal)?**
n. **Non-prescription GHB (known as Grievous Bodily Harm; Liquid Ecstasy; and Georgia Home Boy)?**
o. **Ketamine (known as Special K or Vitamin K)?**
p. **Other tranquilizers, downers, sedatives or hypnotics?**
q. **Hallucinogens/psychedelics, PCP (Angel Dust, Ozone, Wack, Rocket Fuel) MDMA (Ecstasy, XTC, X, Adam), LSD (Acid, Boomers, Yellow Sunshine), Mushrooms or Mescaline?**
r. **Street opiates – heroin (Smack, H, Junk, Skag, opium etc.)?**
s. **Prescription opioids (fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine, morphine, Diluadid, Demerol, Darvon, Codeine, Tylenol 2, 3, 4, etc.) or non-prescription methadone?**
t. **Other illegal drugs – specify: _____**

Intent/Key Points[2]

The intent is to record information about the consumer's recent tobacco, alcohol and other substance use in the past 30 days.

Note that this is a two-part question for some of the types of substances. Read the instructions, question stem, and then each substance and record the consumer's response. It is important to ask about all of the substances (a-t) in question B4.

Additional Probes

Probe for non-medical use of prescription-type drugs (e.g., taking more than what is prescribed, taking someone else's prescription medication). Probe for misuse of over-the-counter (OTC) products (e.g., misuse of OTC cough syrups, cold medicines, etc.). Probe for marijuana use that is not covered by a medical marijuana card or prescription.

Coding Topics/Definition

If the consumer responds "zero", doesn't know, or refuses to answer an item, record 0, REFUSED, or DON'T KNOW as applicable and continue by asking the question for the next substance in the list. If the consumer responds with a number greater than zero, record the answer and then ask the consumer the route of administration as described below, if applicable.

Unprescribed use of prescription medication or misuse of prescribed medication, misuse of over-the-counter products should be counted and coded under the appropriate class of drug in the list. (e.g., misuse of OTC cough syrups or cold medicines can be coded as OTHER, misuse of prescribed medication, such as Vicodin, should be coded under prescription opioids, etc.)[3] Marijuana use that is not covered by a medical marijuana card or prescription should be counted and coded as "Cannabis."

Cross-Check Items

The response cannot be more than 30 days for any one substance category.

Cross-check items B4c and B4d with item B4b. The number of days reported in items B4c and B4d (either individually or the combined total) cannot be more than the number of days reported in item B4b.

Cross check items B4g - B4t with item B4e. The number of days reported in item B4e must be greater than or equal to the number of days reported for any drug in items B4g-B4t. If the client reports no use of illegal drugs in item B4e, then items B4g through B4t should be zero.

The number of days reported in B4f cannot exceed the number of days reported in either B4b or B4e.

Skip Patterns

Skip questions B4c and B4d if the response to B4b is "zero", REFUSED or DON'T KNOW.

Skip question B4f if the response to B4b or B4e is "zero", REFUSED or DON'T KNOW.

B4 (g- t) Route of Administration

Intent/Key Points

The intent is to record information about the typical way in which the consumer administers the illegal drugs he/she uses. Ask this question for items B4g-B4t when at least 1 day of use is indicated.

Additional Probes

If more than one route of administration is used for the same illegal drug over the past 30 days, choose the one that is used most often. If there is more than one route of administration used most often, and they are used equally, choose the most severe. The routes of administration are numbered in order of their severity with one being the least severe and five being the most severe.

Example: The interviewer asks the consumer: "During the past 30 days, how many days have you used the following…Cocaine/crack?" If the consumer reports at least 1 day of use, the interviewer then asks: "What was the route of administration?" and reads the options. If the consumer has difficulty understanding what is meant by "route of administration," the interviewer may say: "How did you most commonly take the drug?" and record the response.

Example: A consumer smokes an illegal drug 6 days in the past 30 days and injects the same illegal drug for 4 days, record "3—smoking" because it was the most common route of administration.

Example: A consumer smokes and intravenously (IV) injects the same illegal drug for 6 days (equally), record "5-IV," because it is the most severe route of administration used equally.

Coding Topics/Definitions

If the consumer indicates that he/she injected a substance, non-IV or IV injection needs to be specified.

1. *Oral*—Includes ingesting, swallowing, drinking, or dissolving drugs in the mouth or sublingually.

2. *Nasal*—Includes snorting, sniffing, or otherwise inhaling substances to get high. Includes huffing or sniffing a product or fumes from a product in order to get high. Includes use of anal suppositories, since the drug is also absorbed through the "membrane," (per ASI 11-8-05). Also includes absorption through the skin (e.g., a patch).

3. *Smoking*—Includes lighting or heating the drug and inhaling the resulting smoke. This includes smoking the drug on its own (in a pipe, bong, etc.) and putting the drug in a tobacco cigarette to be smoked.

4. *Non-IV Injection*—Includes injecting drugs subcutaneously (skin popping) or into muscles.

5. *IV*—Includes injecting drugs into veins.

Record REFUSED or DON'T KNOW as applicable.

Cross-Check Items None

Skip Pattern

Only ask for items B4g-B4t in which at least 1 day of use is indicated during the past 30 days. Do not ask if the response to "During the past 30 days, how many days have you used" was "zero", DON'T KNOW, or REFUSED.

B4A In the past 30 days, how often did you use a syringe/needle, cooker, cotton or water that someone else used?

Intent/Key Points

The intent is to record information about HIV/AIDS and other infectious disease risks associated with injection behavior in the past 30 days. Read all response options for frequency of needle or paraphernalia sharing.

Additional Probes None

Coding Topics/Definitions

If the consumer does not recognize the items listed, you may ask if they have used "works," or other local slang terminology, that someone else has used in the last 30 days.

Cross-Check Items None

Skip Pattern

Only ask if the consumer indicated a route of 4 or 5 (non-injection IV or IV) for at least one item in B4g-B4t.

If the consumer did not indicate a route of administration in B4g-B4t of 4 or 5, skip this question and go to optional question 1 (Date GAF was administered).

OPTIONAL QUESTION 1	**DATE GAF WAS ADMINISTERED**

Intent/Key Points

The intent is to record the date the Global Assessment of Functioning (GAF) Scale was administered (if applicable). This information is submitted at the discretion of your project and obtained from the consumer's record. Do not ask the consumer the date of his/her GAF assessment.

Additional Probes None

Coding Topics/Definitions

Enter date as mm/dd/yyyy. The GAF date must be prior to the current interview date but cannot be more than 6 months older than the current interview date. Partial dates are not allowed.

Cross-Check Items

If the date the GAF was administered is recorded, the GAF score must also be recorded.

Skip Pattern

Skip the optional question regarding date the GAF was administered if the GAF score is not known or recorded and go to B5.

OPTIONAL QUESTION 2	**WHAT WAS THE CONSUMER'S SCORE?**

Intent/Key Points

The intent is to record the consumer's GAF score. This information is submitted at the discretion of your project and obtained from the consumer's record. Do not ask the consumer his/her GAF score.

Additional Probes Not applicable

Coding Topics/Definitions

Enter the GAF score as a number between 0 and 100.

Cross-Check Items

If the GAF score is recorded, the date the GAF assessment was conducted must also be recorded.

Skip Pattern

Do not enter the GAF score if the GAF was administered more than 6 months prior to the current interview date or if the complete date (mm/dd/yyyy) the GAF was administered is not known.

MILITARY FAMILY AND DEPLOYMENT

Questions B5 and B6 (and all sub-questions) are only asked at Baseline. NOTE: You may designate an alternate/appropriate provider to collect this section of responses from the consumer as the consumer may have a sensitive or traumatic reaction. At the very least, be prepared to have an appropriate provider available if the consumer needs additional support when responding to these questions. Do not read response options that are shown in ALL CAPS.

B5 Have you ever served in the Armed Forces, the Reserves, or the National Guard?
***[IF YES],* In which of the following have you ever served? Please answer for each of the following. You may say yes to more than one.**

Armed Forces, Reserves, National Guard

Intent/Key Points

The intent is to determine whether the consumer ever served in the U.S. military, and if so, for which type of service. This information will allow CMHS to better serve military families through service coordination between SAMHSA and other Federal agencies.

If the answer is yes, read the follow-up question with the available military group response options and allow the respondent to answer YES or NO to each.

Additional Probes None

Coding Topics/Definitions

If the consumer responds that he/she served in the U.S. military, check YES **and** then inquire in which military group(s) the consumer served.

If the consumer refuses to answer the question "Armed Forces," for example, check the REFUSED option and proceed to the next military group listed.

The consumer can indicate YES, or NO to as many as apply.

> *ARMED FORCES***:** all branches of the U.S. military including the Army, Air Force, Navy, Marines, and Coast Guard.[4]
>
> *THE RESERVES*: armed forces that are not on active duty but can be called in an emergency.[5]
>
> *THE NATIONAL GUARD:* state-organized units of the U.S. Army and Air Force composed of citizens who undergo training and are available for service in emergencies.

Cross-Check Items None

Skip Pattern

Questions B5 through B8 (and all sub-questions) are only asked at baseline. Skip to B9 if this is a reassessment or discharge interview.

For baseline interviews, skip the follow-up question, *[IF YES]* "In which of the following have you ever served?" if the answer to the first part of the question was NO, REFUSED, or DON'T KNOW.

B5a Are you currently serving on active duty in the Armed Forces, the Reserves, or the National Guard?
***[IF YES],* In which of the following are you currently serving? Please answer for each of the following. You may say yes to more than one.**

Armed Forces, Reserves, National Guard

Intent/Key Points

The intent is to determine the consumer's current U.S. military status (at time of interview).

Note that this is a two-part question. Read the first question open-ended and record the consumer's response. If the answer is yes, read the follow-up question with the available military group response options and allow the respondent to answer YES or NO to each. It is important to read all of the active duty military groups regardless of whether the consumer refuses to respond to one of them.

Additional Probes None

Coding Topics/Definitions

If the consumer responds that he/she is serving on active duty in the U.S. military, check YES, **and** then ask in which specific military group he/she is serving.

If the consumer refuses to answer the question "Armed Forces," for example, check the REFUSED option and proceed to the next military group listed.

The consumer can indicate YES, or NO to as many as apply.

> *ACTIVE DUTY:* does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
>
> *ARMED FORCES***:** all branches of the U.S. military including the Army, Air Force, Navy, Marines, and Coast Guard.
>
> *THE RESERVES*: armed forces that are not on active duty but can be called up in an emergency.
>
> *THE NATIONAL GUARD:* state-organized units of the U.S. Army and Air Force composed of citizens who undergo training and are available for service in emergencies.

Cross-Check Items None

Skip Pattern

Skip the follow-up question, [IF YES] "In which of the following are you currently serving? Please answer for each of the following" if the answer to the first part of B5a was NO, REFUSED, or DON'T KNOW.

B5b Have you ever been deployed to a combat zone?
***[IF YES],* To which of the following combat zones have you been deployed? Please answer for each of the following. You may say yes to more than one.**

Iraq or Afghanistan (e.g., Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn)
Persian Gulf (Operation Desert Shield or Desert Storm)
Vietnam/Southeast Asia
Korea
WWII
Deployed to a combat zone not listed above (e.g., Somalia, Bosnia, Kosovo)

Intent/Key Points

The intent is to determine whether the consumer was ever deployed to combat.

Note that this is a two-part question. Read the first question open-ended and record the consumer's response. If the answer is yes, read the follow-up question with the available combat zone response options and allow the respondent to answer YES or NO to each. It is important to read all of the combat zones regardless of whether the consumer refuses to respond to one of them.

Additional Probes None

Coding Topics/Definitions

If the consumer responds that he/she was deployed to a combat zone, check YES, **and** then inquire about to which specific combat zone the consumer was deployed.

If the consumer refuses to answer the question "Korea," for example, check the REFUSED option and proceed to the next combat zone listed.

The consumer can indicate YES or NO to as many as apply.

> *COMBAT ZONE:* An area designated by the President of the U.S. as a zone where troops are or have engaged in combat during a specified period.[6]

Cross-Check Items

The system will run a cross-check between the year of the consumer's date of birth and the combat zone selected for this question. This check will give the interviewer an opportunity to confirm the consumer's response if the consumer was not at least 18 years of age during the combat timeframe. This is a soft-edit check, meaning that the interviewer or data entry coder may proceed to the next question regardless of the consumer's answer.

Skip Pattern

Skip the second half of the question, [IF YES] "To which of the following combat zones have you been deployed?", if the answer to the first part of B5b was NO, REFUSED, or DON'T KNOW.

B6 Is anyone in your family or someone close to you currently serving on active duty in or retired/separated from the Armed Forces, the Reserves, or the National Guard?

Intent/Key Points

The intent is to determine whether the consumer has a family member or close friend, etc., that is either currently serving on active duty or has formerly served in the U.S. military, and if so, for which type of service.

Read the question followed by the response options, "Yes, only one person," "Yes, more than one person," and "No."

Additional Probes None

Coding Topics/Definitions

If the consumer responds that he/she has a relative or someone close to him/her currently serving on active duty or who formerly served in the U.S. military, check either "Yes, only one person," or "Yes, more than one person".

Cross-Check Items None

Skip Pattern

Question B6 is only asked at baseline. Skip to B9 if this is a reassessment or discharge interview.

TRAUMA AND VIOLENCE

Questions B7 and B8 are only asked at baseline; B9 is asked at all interviews. NOTE: You may designate an alternate/appropriate provider to collect this section of responses from the consumer as the consumer may have a sensitive or traumatic reaction. At the very least, be prepared to have an appropriate provider available if the consumer needs additional support when responding to these questions. Do not read response options that are shown in ALL CAPS.

B7 Have you ever experienced violence or trauma in any setting (including community or school violence; domestic violence; physical, psychological, or sexual maltreatment/assault within or outside of the family; natural disaster; terrorism; neglect; or traumatic grief)?

Intent/Key Points

The intent is to determine if the consumer has experienced any violence or trauma. This information will help in CMHS' overall goal of reducing the behavioral health impacts of violence and trauma.

Additional Probes None

Coding Topics/Definitions

Read the question open-ended to the consumer and record the response.

TRAUMA—mental health professionals define a traumatic event as a situation where both of the following occurred:

- The person experienced, witnessed, or was confronted with an event where there was the threat of actual death or serious injury. The event may also have involved a threat to the person's physical well-being or the physical well-being of another person.
- The person responded to the event with strong feelings of fear, helplessness or horror.[7]

Some examples may include: experiencing or witnessing childhood or adult physical, emotional, or sexual abuse; experiencing or witnessing physical assault; adult experiences of sexual assault, accidents, drug addiction, or illnesses complications; employment in occupations exposed to war (such as soldiers) or disaster (such as emergency service workers); and/or getting a diagnosis of a life-threatening illness.

Cross-Check Items None

Skip Pattern

Questions B7 and B8 are only asked at baseline. If this is a reassessment or discharge interview go to B9.

For baselines, if the answer to B7 was YES, go to B8; otherwise skip to B9.

B8 Did any of these experiences feel so frightening, horrible, or upsetting that in the past and/or the present you:

a. Have had nightmares about it or thought about it when you did not want to?
b. Tried hard not to think about it or went out of your way to avoid situations that remind you of it?
c. Were constantly on guard, watchful, or easily startled?
d. Felt numb and detached from others, activities, or your surroundings?

Intent/Key Points

The intent is to determine what effect or impact the violent or traumatic experience has had on the consumer.

Note that this question has four sub-questions. Read the initial question stem, then the sub-questions (B8a, B8b, B8c, and B8d) as open-ended questions.

Additional Probes None

Coding Topics/Definitions

If the consumer responds YES or NO to any of the questions, check YES or NO, and continue with the next question in B8.

If the consumer doesn't know the answer or refuses to answer any of the questions in B8, check DON'T KNOW or REFUSED, and go to the next question in B8.

Cross-Check Items None

Skip Pattern

Question B8 is only asked at baseline. Skip to B9 if this is a reassessment or discharge interview.

B9 In the past 30 days, how often have you been hit, kicked, slapped, or otherwise physically hurt?

Intent/Key Points

The intent is to determine if the consumer has suffered any physical violence in the past 30 days.

Additional Probes None

Coding Topics/Definition

Read the question followed by the response options "Never", "Once", "A few times," and "More than a few times".

> *(Physical) violence* is defined by the World Health Organization as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, maldevelopment or deprivation. This definition associates intentionality with the committing of the act itself, irrespective of the outcome it produces.[8]
>
> *"A few times"* can be considered up to five times, but it is ultimately left to the consumer's interpretation.

Cross-Check Items None

Skip Pattern None

SECTION C: STABILITY IN HOUSING

OVERVIEW

Section C is asked at all interviews. This section pertains to the consumer's housing situation in the past 30 calendar days. Do not read options that are shown in ALL CAPS.

C1 In the past 30 days how many…

a. nights have you been homeless?
b. nights have you spent in a hospital for mental health care?
c. nights have you spent in a facility for detox/inpatient or residential substance abuse treatment?
d. nights have you spent in a correctional facility including jail, or prison?
e. times have you gone to an emergency room for a psychiatric or emotional problem?

Intent/Key Points

The intent of these questions is to determine the consumer's ability to maintain life within the community during the past 30 days. Read each question and record the number of days spent in each type of setting.

Additional Probes

If the consumer is having trouble remembering, start with the past week and work backward in small increments.

Coding Topics/Definitions

HOMELESS—defined as living in a shelter, on the street (in cars, vans, or trucks), outdoors, or in a park.

HOSPITAL FOR MENTAL HEALTH CARE—defined as a hospital for the care and treatment of patients affected with acute or chronic mental illness; includes a stay in the psychiatric ward of a general hospital. Do not count veteran's hospitals.[9]

DETOX/INPATIENT OR RESIDENTIAL SUBSTANCE ABUSE TREATMENT FACILITY—defined as a medically supervised treatment program for alcohol or drug addiction designed to purge the body of intoxicating or addictive substances. [10]

CORRECTIONAL FACILITY INCLUDING JAIL OR PRISON—defined as living in lockup and/or holding cells in courts or other locations, in addition to living in a prison facility.

Cross-Check Items

Add up the total number of nights spent homeless, in hospital for mental health care, in detox/inpatient or residential substance abuse treatment, or in a correctional facility (the total of items a-d cannot exceed 30 nights).

Skip Pattern

Skip to Section D if the consumer indicates in items a-d that they have spent 16 or more nights in any one setting.

C2 In the past 30 days, where have you been living most of the time?

Intent/Key Points

The intent is to determine information about the consumer's housing situation in the past 30 calendar days. Read the item as an open ended question and then code the consumer's response in the appropriate category.

Fifteen or more calendar days is considered most of the time.

Additional Probes

If the consumer asks what is meant by where he/she has been living most of the time, explain that it means where he/she has been staying or spending his/her nights. If the consumer is having trouble remembering, start with the past evening and work backward in small increments, (i.e., "Where did you sleep last night?" "Where did you sleep most of last week?")

Coding Topics/Definitions

Check only one response. If the consumer has been living in more than one place for the past 30 calendar days, count where he/she has been living for 15 or more calendar days, or where he/she has been living the longest.

If the consumer reports that he/she has been living in 2 different places for 15 calendar days each, record the most recent living arrangement.

> *OWNED OR RENTED HOUSE, APARTMENT, TRAILER, ROOM*—count living in a room, house, boarding house, dorm, public or subsidized housing, hotel/motel, room at the YMCA/YWCA, and living in an RV or trailer. This also includes SRO, more commonly referred to as a single room occupancy or single resident occupancy (a multiple-tenant building that houses one or two people in individual rooms). Also count living in permanent supportive housing.
>
> *SOMEONE ELSE'S HOUSE, APARTMENT, TRAILER, ROOM*—count living in the home of parent, relative, friend, and guardian.

HOMELESS (SHELTER, STREET/OUTDOORS, PARK)—count living in a shelter, on the street (in cars, vans, or trucks), outdoors, or in a park.

GROUP HOME—count living in moderately staffed housing arrangements for consumers.[11]

ADULT FOSTER CARE—count living in facilities and foster care family homes for adults who are aged, mentally ill, developmentally disabled, or physically disabled who require supervision on an ongoing basis but who do not require continuous nursing care.[12]

TRANSITIONAL LIVING FACILITY—count living in facilities focused on moving the consumer to a more independent housing arrangement; excludes living in a group home. Often includes rehabilitative services, community reentry training, and aids for independent living [13]

HOSPITAL (MEDICAL)—count living in any hospital environment (state, county, or private) that primarily provides medical services. Do not count veterans or psychiatric hospitals.[14]

HOSPITAL (PSYCHIATRIC)—count living in a hospital for the care and treatment of patients affected with acute or chronic mental illness; includes a stay in the psychiatric ward of a general hospital. Do not count veteran's hospitals.[15]

DETOX/INPATIENT OR RESIDENTIAL SUBSTANCE ABUSE TREATMENT FACILITY—count living in a medically supervised treatment program for alcohol or drug addiction designed to purge the body of intoxicating or addictive substances. [16]

CORRECTIONAL FACILITY (JAIL/PRISON)—count living in lockup and/or holding cells in courts or other locations, in addition to living in a prison facility.

NURSING HOME—count living in a private residential institution equipped to care for persons unable to look after themselves, as the aged or chronically ill; the difference between a group home and a nursing home is the group home is moderately staffed.[17]

VA HOSPITAL—count living in hospital facilities that the U.S. Department of Veterans Affairs operates jointly or independently.[18]

VETERAN'S HOME—count living in a nursing home, domiciliary and/or adult day health care facilities that are run by the Department of Affairs State Home Program.[19]

MILITARY BASE—count living at facilities maintained as part of a military installation or other military facility.

OTHER HOUSED—If the consumer's housing situation is not included in the previous categories check OTHER and describe the consumer's response in the space provided. Do not simply record the name of their housing situation; instead describe the type of housing it is.

Cross-Check Items None

Skip Pattern None

SECTION D: EDUCATION AND EMPLOYMENT

OVERVIEW

Section D is asked at all interviews. This section pertains to the respondent's education and employment status. **Only read and explain the choices if necessary.**

D1	**Are you currently enrolled in a school or a job training program?** **[If Enrolled], Is that full time or part time?**

Intent/Key Points

The intent is to determine whether the consumer is currently involved in any educational or job training program.

Note that this is a two-part question. Read the first question and if the consumer responds that he/she is enrolled, ask the follow-up question.

Additional Probes

Job training programs can include apprenticeships, internships, or formal training for a trade.

Coding Topics/Definitions

If the consumer responds that he/she is not enrolled, check "NOT ENROLLED".

If the consumer responds that he/she is enrolled, ask if that enrollment is full- or part-time or other.

Full- or part-time definitions will depend on the institution where the consumer is enrolled.

If a consumer is incarcerated, code as "NOT ENROLLED". However, if there are credits and/or a degree earned, include these in item D2.

> *ENROLLED, FULL TIME*—The consumer is enrolled in an undergraduate program for 12 or more credit hours per week or a graduate program for 9 or more credit hours per week. Full-time job training programs may include those programs that are for 20 hours per week or more.
>
> *ENROLLED, PART TIME*—The consumer is enrolled in an undergraduate program for 11 credit hours per week or less, a graduate program for 8 credit hours per week or less, or a job training program for 19 hours per week or less.
>
> *OTHER*—The consumer is enrolled in school or a job training program, but not full or part time. Check "OTHER" and specify the terms of his/her enrollment in the space provided.

Cross-Check Items None

Skip Pattern None

D2 What is the highest level of education you have finished, whether or not you received a degree?

Intent/Key Points

The intent is to ascertain basic information about the consumer's formal education.

Additional Probes None

Coding Topics/Definitions

Read the question open-ended and check the appropriate response to indicate the grade or year of school that the consumer has **finished, whether or not he/she received a degree.** This can include education received while incarcerated.

LESS THAN 12TH GRADE—The consumer never attended school or dropped out prior to completing 12th grade.

12TH GRADE COMPLETED/HIGH SCHOOL DIPLOMA/EQUIVALENT(GED)—The consumer completed 12th grade, graduated from high school, or completed a general equivalence degree.

VOC/TECH DIPLOMA—The consumer received his/her vocational or technical diploma training after high school.

SOME COLLEGE OR UNIVERSITY—The consumer completed one full year of college or university coursework or received his/her associates degree. This typically corresponds with completing between 30 and 59 credit hours of college or university coursework, or moving on to, but not completing "Sophomore" status at a college or university.

BACHELOR'S DEGREE (BA, BS)—The consumer received his/her undergraduate degree.

GRADUATE WORK/GRADUATE DEGREE—The consumer completed some graduate work or received a Master's or Doctorate-level degree.

Cross-Check Items None

Skip Pattern None

D3 Are you currently employed?

Intent/Key Points

The intent is to determine the consumer's current employment status. Focus on the consumer's status during most of the previous week to determine whether he/she worked at all or had a regular job but was off work. Only legal employment (i.e., the job activity is legal) is counted as employment.

Note: This is a two-part question. First determine whether or not the consumer is employed, then his/her status. If the consumer indicates that he/she is employed you must then determine whether it is full- or part-time. If the consumer indicates that he/she is unemployed, you must then determine his/her current status as it relates to his/her unemployment.

Additional Probes

If the consumer responds "EMPLOYED", ask if the job is full-or part-time.

If the consumer responds "UNEMPLOYED", ask if he/she is currently looking for employment. You may read the response categories as a probe. Check the appropriate category. Do not make assumptions about the consumer's reason for unemployment.

Gambling, even if it is in a legal casino is not counted as employment, unless the consumer is an employee of the casino as a dealer or in some other capacity.

Coding Topics/Definitions

Four or more days is considered most of the previous week.

> *EMPLOYMENT*—Includes work performed even if the consumer is paid "under the table" or is working without a permit (in the case of undocumented persons) **as long as the work would be considered legal otherwise.** Employment also includes consumers who are self-employed and those who are receiving services in exchange for their work, e.g., housing, schooling or care.
>
> *FULL TIME*—The consumer works 35 hours or more a week, regardless of how many jobs make up this time. Full time also includes day work or day labor for 35 or more hours per week. "Or would have been," means that the consumer usually works 35 hours or more per week but in the past 30 days he/she may have taken time off due to illness, maternity/paternity leave, or a vacation. In this situation, the consumer should be intending to continue to work 35 hours or more per week.
>
> *PART TIME*—The consumer works 1 to 34 hours per week. Part time also includes day work or day labor for fewer than 35 hours per week.

UNEMPLOYED—If the consumer indicates that he/she is unemployed, ask if he/she is currently looking for employment. If necessary, read all unemployed response options. Check the appropriate unemployed category.

OTHER—If the consumer's work status covers more than one category, (e.g., is retired, disabled and does volunteer work) code "OTHER" and record his/her response in the space provided.

Cross-Check Items

Cross check the consistency of the consumer's response for this question with the response for D1. For example, if the consumer indicates that he/she is employed full-time and enrolled full-time in school or a job-training program, ask for clarification.

Skip Pattern

If the consumer indicates he/she is "UNEMPLOYED", skip to Section E.

D3a If Employed:

- **Are you paid at or above the minimum wage?**
- **Are your wages paid directly to you by your employer?**
- **Could anyone have applied for this job?**

Intent/Key Points

The intent is to collect detailed information about the type of the consumer's employment. More specifically, the questions asked in D3a are used to determine if the consumer's type of employment is generally considered "competitive" (e.g., working in an integrated setting and compensated at or above the minimum wage) or "sheltered" (e.g., working, but not in the labor force, possibly working for therapeutic purposes in conjunction with a mental health agency/program, in a closely supervised or protective setting.)

Additional Probes None

Coding Topics/Definitions

Read each sub-question open-ended and record the consumer's responses.

The minimum wage is the lowest wage that employers may legally pay to employees. The federal minimum wage is set by the U.S. congress. Many states also have minimum wage laws. In cases where an employee is subject to both state and federal minimum wage laws, the employee is entitled to the higher minimum wage.

- The federal minimum wage can be found on this website: http://www.dol.gov/whd/flsa/index.htm

- The states' minimum wages can be found on this website: http://www.dol.gov/whd/minwage/america.htm

Cross-Check Items None

Skip Pattern None

SECTION E: CRIME AND CRIMINAL JUSTICE STATUS

OVERVIEW

Section E is asked at all interviews. This section asks basic information about the consumer's involvement with the criminal justice system. It addresses information about arrests. Even if the consumer is court mandated to treatment, these questions must be asked, and the consumer's answers recorded. There may be additional information that was not part of the court mandate. Some consumers may be reluctant to offer this information. Reassure the consumer that their identity will be protected when providing this information. Do not read response options shown in ALL CAPS.

E1 In the past 30 days, how many times have you been arrested?

Intent/Key Points

The intent is to determine how many **times** the consumer has been formally arrested and official charges were filed in the last 30 calendar days. These instances should only include formal arrests, not times when the consumer was just picked up or questioned.

Read the question open-ended and record the consumer's response.

Additional Probes None

Coding Topics/Definitions

Count multiple arrests for the same charge as separate arrests.

If there is more than one charge for a single arrest, only count the arrest once.

If the consumer refuses to answer or does not know, check the appropriate box.

> *ARREST*—An instance when a person is seized or forcibly restrained by a law enforcement officer and is in the custody of legal authorities for a criminal charge. This does not include times when the consumer was just picked up, rousted, or questioned[20].

Cross-Check Items None

Skip Pattern

For baseline interviews, skip to Section G.

SECTION F: PERCEPTION OF CARE

OVERVIEW

Section F is only asked at reassessment and clinical discharge interviews. This section pertains to the consumer's perception of the services he/she received during the past 30 calendar days. Ask specifically about the consumer's perceptions during "the past 30 calendar days". Do not use "in the past month" as a substitute—this may lead to confusion and inaccurate responses. For example, if the interview occurs on May 15th, the past 30 calendar days covers April 15 to May 15. The source of these questions is the MHSIP survey.[21] Do not read the response options shown in ALL CAPS.

F1 In order to provide the best possible mental health and related services, we need to know what you think about the services you [your child] received during the past 30 days, the people who provided it, and the results. Please indicate your disagreement/agreement with each of the following statements.

a. Staff here believe that I can grow, change and recover.
b. I felt free to complain.
c. I was given information about my rights.
d. Staff encouraged me to take responsibility for how I live my life.
e. Staff told me what side effects to watch out for.
f. Staff respected my wishes about who is and who is not to be given information about my treatment.
g. Staff were sensitive to my cultural background (race, religion, language, etc.)
h. Staff helped me obtain the information I needed so that I could take charge of managing my illness.
i. I was encouraged to use consumer run programs (support groups, drop-in centers, crisis phone line, etc.)
j. I felt comfortable asking questions about my treatment and medication.
k. I, not staff, decided my treatment goals.
l. I like the services I received here.
m. If I had other choices, I would still get services from this agency.
n. I would recommend this agency to a friend or family member.

Intent/Key Points

The intent is to ascertain information about the consumer's perception of care for services recently received.

Read the instructions and then each statement followed by the disagreement/agreement categories to the consumer. The grantee may designate an alternate to collect this section of questions from the consumer in cases where the information collected pertains to care given by the interviewer (in many cases the provider may also be the interviewer).

It is important to read all of the perception of care statements (items F1a-n) regardless of whether the consumer refuses to respond to one of the statements.

Additional Probes

If needed, clarify that the statements refer to mental health or related services, treatment, and/or medications. Consider preparing a list of grant-funded services that can be read to the respondent if necessary.

Coding Topics/Definitions

If the consumer refuses to answer question F1a, for example, check the REFUSED option and proceed to question F1b.

If the consumer indicates the question or answers do not apply, leave the question unanswered and select the MISSING DATA option in the TRAC system.

If the consumer indicates the question or an answer does not apply, mark NOT APPLICABLE in those cases where it is provided. Otherwise ask the consumer to choose an answer; those questions that do not provide this option as a possible response choice are considered to apply to all consumers and require an answer or refusal.

> *Mental health and related services:* Services provided as the result of this grant that pertain to people with mental illness or at risk of mental illness. When people with mental illness are the population of focus, a wide array of subject areas may be considered to be mental health-related by virtue of the connection with this population. Under such circumstances, mental health-related areas may include, for example, (but are not limited to) those pertaining to physical health, housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, financial well-being, etc.

Cross-Check Items None

Skip Pattern None

F2 Indicate who administered Section F - Perception of Care to the consumer for this interview

Intent/Key Points

The intent is to record information about who administered Section F—Perception of Care—to the consumer for each interview. This item contains information provided by you and is not asked of the consumer.

Additional Probes Not applicable

Coding Topics/Definitions

Please use the OTHER category only in cases where no other category provided adequately describes who completed this portion of the tool with the consumer.

Cross-Check Items None

Skip Pattern None

SECTION G: SOCIAL CONNECTEDNESS

OVERVIEW

Section G is asked at all interviews. This section pertains to the consumer's recent social support by persons other than his/her mental health care providers. Ask specifically about the consumer's social connections over "the past 30 days." Do not use "in the past month" as a substitute—this may lead to confusion and inaccurate responses. For example, if the interview occurs on May 15th, the last 30 calendar days covers April 15 to May 15. The source of these questions is the MHSIP survey. Do not read the response options shown in ALL CAPS.

G1 Please indicate your disagreement/agreement with each of the following statements. Please answer for relationships with persons other than your mental health provider(s) over the past 30 days.

a. I am happy with the friendships I have.
b. I have people with whom I can do enjoyable things.
c. I feel I belong in my community.
d. In a crisis, I would have the support I need from family or friends.

Intent/Key Points

The intent is to determine information about the consumer's perception of his/her recent social support other than that given by a mental health provider.

Read the instructions and then each statement followed by the disagreement/agreement categories to the consumer. It is important to read all of the social connectedness statements (items G1a-d) regardless of whether the consumer refuses to respond to one of the statements.

Additional Probes None

Coding Topics/Definitions None

If the consumer refuses to answer question G1a, for example, check the REFUSED option and proceed to question G1b.

Cross-Check Items None

Skip Pattern None

SECTION H: PROGRAM SPECIFIC QUESTIONS

Minority AIDs Initiative - TCE program grants have program specific data that is submitted to TRAC.

H1 Indicate the programmatic focus for the client/consumer below.

	1a. PROGRAMMATIC FOCUS (CHECK ALL THAT APPLY.)	***1b. PREDOMINANT FOCUS (CHECK ONLY ONE.)***
SUBSTANCE ABUSE TREATMENT	○	○
MENTAL HEALTH TREATMENT	○	○
SUBSTANCE ABUSE PREVENTION	○	○

Intent/Key Points

The intent is to determine the identified program focus and this will serve to link each consumer/client to the three service areas (mental health (illness) treatment, substance abuse treatment and substance abuse prevention). This item contains information provided by you and is not asked of the consumer.

Additional Probes None

Coding Topics/Definitions

For the client's/consumer's Programmatic Focus (H1a), select all that apply. For the client's/consumer's Predominant Focus (H1b) select only one based on the below information.

Indicate a predominant programmatic focus as follows:

- For SA/HIV Prevention Intervention programs, grantees will select "*Substance Abuse Prevention"* as the predominant focus for SA/HIV Prevention Intervention participants.

- For mental health (illness) and substance abuse treatment(s) activity, grantees will select *one predominant programmatic focus,* either mental-health (illness) treatment or substance abuse treatment.

Whether or not the MAI-TCE program/project has an integrated co-occurring (mental illness/substance abuse disorder) treatment approach or whether it has a distinct mental health or substance abuse treatment focus, grantees must indicate a predominant programmatic focus for each client/consumer at baseline.

Cross-Check Items None

Skip Pattern

This question is completed by the grantee only at baseline and regardless of whether the interview is conducted or not conducted. If this is a reassessment or discharge interview skip to question H3.

H2 Which of the following do you consider yourself to be?

Intent/Key Points

The intent is to determine the consumer's sexual identity. If they are unsure, DON'T KNOW should be indicated.

Additional Probes None

Coding Topics/Definitions

Remind the consumer that this information will not be used to identify the consumer.

Cross-Check Items None

Potential Issue: Respondents may be uncomfortable answering this question or may express confusion over which response option to choose.

Recommended Solution: Remind respondents that all answers will be kept private. Ask them to choose the response that best describes them as an individual- there are no right or wrong answers.

Skip Pattern

This question is only recorded at baseline and regardless of whether the interview is conducted or not conducted. If this is a reassessment or discharge interview skip to question H3.

H3 Do you have health care coverage?

Intent/Key Points[22]

The intent is to determine if the consumer is covered by health insurance.

Additional Probes None

Coding Topics/Definitions Government Insurance includes Medicaid and Medicare.

Cross-Check Items None

Skip Pattern None

H4 How much do people risk harming themselves physically or in other ways when they smoke one or more packs of cigarettes per day?

H5 How much do people risk harming themselves physically or in other ways when they smoke marijuana once or twice a week?

H6 How much do people risk harming themselves physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?

Intent/Key Points

The intent of questions H4 – H6 is to determine what the consumer thinks about the actions described in the question. These questions ask respondents how much they think people risk harming themselves physically or in other ways by using alcohol, tobacco, and drugs. If they are unsure, they should mark DON'T KNOW and continue to the next statement.

Additional Probes None

Coding Topics/Definitions

No risk	You think nothing bad will happen if people do this.
Slight risk	You think something bad MIGHT happen if people do this.
Moderate risk	You are pretty sure something bad will happen if people do this.
Great risk	You really think something bad will happen if people do this.
Don't know	You really don't know about this substance or don't know how risky it is to use it.

Cross-Check Items None

Skip Pattern None

How much do people risk harming themselves physically…

H7 if they have sex without a condom?

H8 if they have sex under the influence of alcohol?

H9 if they have sex while high on drugs?

Intent/Key Points

The intent of questions H7 – H9 is to determine what the consumer thinks about the actions described in the question. These questions ask respondents how much they think people risk harming themselves physically by having sex under certain circumstances. There are no wrong or right answers.

Additional Probes None

Coding Topics/Definitions

No risk	You think nothing bad will happen if people do this.
Slight risk	You think something bad MIGHT happen if people do this.
Moderate risk	You are pretty sure something bad will happen if people do this.
Great risk	You really think something bad will happen if people do this.

Cross-Check Items None

Skip Pattern None

The following questions are to determine what you know about HIV/AIDS.

H10 Birth control pills protect women from getting the HIV/AIDS virus.

H11 There are drugs available to treat HIV that can lengthen the life of a person infected with the virus.

H12 There is no cure for AIDS.

Intent/Key Points

The intent of questions H10 – H12 is to test consumers' knowledge about HIV/AIDS and the risk of certain actions for contracting the HIV virus. This section asks consumers what they think about the given statements. Consumers are asked if each statement is true or false. If they are unsure, they should mark DON'T KNOW and continue to the next statement.

Additional Probes None

Coding Topics/Definitions None

Cross-Check Items None

Skip Pattern None

Potential Issue for H12: Respondents do not understand the use of the word "cure."

Recommended Solution for H12: Explain that "cure" refers to a way of eliminating AIDS from a person's body forever.

H13 Would you know where to go in your community to see a health care professional regarding HIV/AIDS or sexually transmitted health issues?

Intent/Key Points

The intent is to determine if the consumer would know where to go for HIV/AIDS or other sexually transmitted health issues.

Additional Probes None

Coding Topics/Definitions None

Cross-Check Items None

Skip Pattern None

H14 Would you know where to go in your community to see a health care professional regarding a drug or alcohol problem?

Intent/Key Points

The intent of question H14 is to determine if the consumer would know where to go for a drug or alcohol problem.

Additional Probes None

Coding Topics/Definitions None

Cross-Check Items None

Skip Pattern None

H15 During the past 30 days, did you engage in sexual activity?

Intent/Key Points[23]

The intent is to determine if the consumer engaged in sexual activity in the past 30 days.

This activity can be with main partners and anyone else with whom the respondent has had sexual activity. This includes male and female partners.

Additional Probes None

Coding Topics/Definitions

Response options for this question are:

YES—Consumer has engaged in sexual activity.

NO—Consumer has not engaged in sexual activity.

NOT PERMITTED TO ASK— In cases where the project staff cannot ask this question of a consumer (i.e., the state or program does not permit sexual activity questions to be asked of an adolescent consumer), enter "NOT PERMITTED TO ASK" as the response option. Projects that serve adolescents are not automatically excused from asking this question. In fact, many programs ask this question of all of their consumers. If you are unsure, please speak with your grant's Project Director. Note: Refusing to ask the questions because it may be embarrassing to the consumer is not a reason for not asking the question.

Sexual activity includes the following sexual acts:

> Vaginal sex—Penetration of the vagina by a penis or other body part; includes vagina-to-vagina contact.
>
> Oral sex—Placement of the mouth or tongue on or in a penis, vagina, or anus during sexual activity.
>
> Anal sex—Penetration of the anus by a penis or other body part. This would include "fisting".

Do not count the use of sex toys.

Count all sexual contacts, whether consensual or not.

Masturbation, if done alone, should not be counted. If someone else is masturbating the consumer, count it as a sexual act.

Cross-Check Items None

Skip Pattern

H15a-c should be skipped if the consumer's response to H15 is "NO", REFUSED, "DON'T KNOW, or if the program is not permitted to ask this question.

H15a	**[*IF YES*], Altogether how many sexual contacts (vaginal, oral, or anal) did you have?**

Intent/Key Points

The intent is to determine the number of sexual contacts the consumer has had in the past 30 days. This includes sexual contact with the main partner and any other sexual partners.

Prompt the respondent to estimate the actual sexual contacts, not the number of days in the last 30 that he/she had sex nor the number of partners with whom he/she had sexual contact.

Additional Probes

For respondents who have a large number of partners, start by estimating daily, then weekly, then monthly sexual contacts.

Explain to the consumer that he/she should count each *act* as a separate sexual contact (e.g., if the respondent has had oral, vaginal, and anal sex in one encounter, it would count as three contacts).

Coding Topics/Definitions

Record repeated contacts with the same partner as separate sexual contacts. Count each act as a separate sexual contact (e.g., if the respondent has had oral, vaginal, anal sex, and returned to oral in one encounter, it would count as four contacts).

Do not count the use of sex toys.

Count all sexual contacts, whether consensual or not.

Masturbation, if done alone, should not be counted. If someone else is masturbating the consumer, count it as a sexual act.

Cross-Check Items None

Skip Pattern

H15a should be skipped if the consumer's response to H15 is "NO", REFUSED, "DON'T KNOW, or if the program is not permitted to ask this question.

H15b [*IF YES*], Altogether how many unprotected sexual contacts did you have?

Intent/Key Points

The intent is to determine the number of unprotected sexual contacts the consumer has had in the past 30 days. This includes contact with both main and other partners.

Prompt the consumer to estimate the number of unprotected sexual contacts, not the number of days in the last 30 that he/she had unprotected sexual contact nor the number of partners with whom he/she had unprotected sexual contact.

Additional Probes

Remind the consumer that he or she should count each act as a separate sexual contact (e.g., if the respondent has had oral, vaginal, and anal sex in one encounter, that would be three contacts).

Coding Topics/Definitions

Record repeated contacts with the same partner as separate sexual contacts. Count each act as a separate sexual contact (e.g., if the respondent has had oral, vaginal, and anal sex in one encounter, it would be counted as *three contacts*).

Unprotected sex is defined as "vaginal, oral, or anal sex without a condom or other latex barrier (i.e., female condom or dental dam)."

Cross-Check Items

Cross-check with item H15a. The number of unprotected sexual contacts in item H15b should not be more than the number of sexual contacts in item H15a.

Skip Pattern

For Baselines: If the response was "NO", REFUSED, DON'T KNOW, or if the program is not permitted to ask this question, stop now. The interview is complete.

For Reassessments: If the response was "NO", REFUSED, DON'T KNOW, or if the program is not permitted to ask this question go to Section I.

For Clinical Discharges: If the response, was "NO", REFUSED, DON'T KNOW, or if the program is not permitted to ask this question go to Section J.

H15c (1-3) **[*IF YES*] Altogether, how many unprotected sexual contacts were with an individual who is or was:**

1. **HIV positive or has AIDS**
2. **An injection drug user**
3. **High on some substance**

Intent/Key Points

The intent is to determine the number of unprotected sexual contacts the consumer has had in the last 30 days with individuals who were likely to be at high risk for HIV infection. This question includes sexual contact with the main partner and other partners.

Prompt the consumer to estimate the number of unprotected sexual contacts, not the number of days in the last 30 that he/she had unprotected sexual contact nor the number of partners with whom he/she had unprotected sexual contact.

Additional Probes

Remind the consumer that he or she should count each act as a separate sexual contact (e.g., if the respondent has had oral, vaginal, and anal sex in one encounter, that would be *three contacts*).

The high-risk categories in item H15c are not mutually exclusive. Ask the consumer about all categories. His/her sexual partner may be counted in more than one category.

Coding Topics/Definitions

Record repeated contacts with the same partner as separate sexual contacts. Count each act as a separate sexual contact (e.g., if the respondent has had oral, vaginal, and anal sex in one encounter, it would be counted as *three contacts*).

An injection drug user can be either an intravenous (i.e., into the vein) or non-intravenous (i.e., into a muscle or under the skin) drug user. If the respondent reports a partner who uses both injected and non-injected drugs, count the respondent as an "injection drug user."

If the respondent is unsure of the status of his or her sexual partner, record the response as DON'T KNOW.

Cross-Check Items

Cross-check with item H15b**.** The number of unprotected sexual contacts in H15c1, H15c2, or H15c3 should not be more than the number of unprotected sexual contacts in item H15b.

Skip Pattern

H15c1-3 should be skipped if the consumer's response to H15 is "NO", REFUSED, DON'T KNOW, if the program is not permitted to ask this question, or if the consumer's response to H15b is "zero".

For Baselines: The interview is complete.

For Reassessments: Go to Section I.

For Clinical Discharges: Go to Section J.

SECTION I: REASSESSMENT STATUS

THIS SECTION IS REPORTED BY GRANTEE STAFF ABOUT THE CONSUMER AT REASSESSMENT.

OVERVIEW

This section pertains to the consumer's status 6-months (180 calendar days) after the baseline interview or subsequent reassessment interview(s). This information is only completed at reassessment, and is reported by the grantee staff without asking the consumer. This information is required regardless of whether a reassessment interview was conducted with the consumer.

I1 Have you or other grant staff had contact with the consumer within 90 days of the last encounter?

Intent/Key Points

The intent is to document whether the consumer's episode of care has ended.

Additional Probes Not applicable

Coding Topics/Definitions

This is a YES or NO question. For this item, you would answer NO, if:

> **The grant has not had contact with the consumer for 90 calendar days or more** and knows nothing more about the consumer's status. For the purposes of this item "contact" refers to actual services provided, referrals/phone calls made related to a treatment/service plan (not for scheduling appointments), crisis intervention, or emergency services. When this response category is checked, you will be required to conduct either a new baseline interview or a clinical discharge for the consumer at the next encounter.

Cross-Check Items None

Skip Pattern None

I2 Is the consumer still receiving services from your project?

Intent/Key Points

The intent is to record whether CMHS funded services are ongoing for the consumer at your agency at the time of the reassessment interview.

Additional Probes Not applicable

Coding Topics/Definitions

This is a Yes or No question.

Cross-Check Items None

Skip Pattern

Go to Section K.

SECTION J: CLINICAL DISCHARGE STATUS

THIS SECTION IS REPORTED BY GRANTEE STAFF ABOUT THE CONSUMER AT CLINICAL DISCHARGE.

OVERVIEW

This section is only completed at the clinical discharge, as determined by the grantee. The information in this section pertains to the consumer's clinical discharge status and is reported by the grantee without asking the consumer. This information is required regardless of whether a clinical discharge interview was conducted with the consumer.

J1 On what date was the consumer discharged?

Intent/Key Points

The intent of the question is to document when the consumer was clinically discharged from the treatment. Enter the date (month and year only) the consumer was discharged, not the date of the discharge interview.

Additional Probes Not applicable

Coding Topics/Definitions

Enter the date as mm/yyyy. The TRAC system will only save the month and year. Day is not saved in the TRAC system to protect the identity of the consumer. The clinical discharge date recorded must be greater than or equal to the dates of all other interviews and/or administrative records (month and year only) that precede it for the current treatment episode.

A clinical discharge is defined by the grant. However, if the consumer has not had contact with the project for 90 calendar days or more or the consumer has died; the consumer should be considered discharged. Contact refers to services or referrals provided, phone calls related to a treatment plan (not scheduling), or crises intervention or emergency services.

The completed interview (or administrative data) must be entered into the TRAC system within 30 calendar days of the interview, clinical discharge, or notification of consumer's death.

Administrative clinical discharge information for a deceased consumer is required. This information should not be entered in the reassessment status section.

Cross-Check Items None

Skip Pattern None

J2 What is the consumer's discharge status?

Intent/Key Points

The intent of this question is to determine the consumer's clinical discharge status. If more than one response category applies, choose the primary reason the consumer is being discharged.

Additional Probes None

Coding Topics/Definitions

Mutually agreed cessation of treatment—consumer was compliant with the project/treatment plan and either completed or graduated or left before completion with the agreement of the treatment staff.

Withdrew from/refused treatment—consumer ended or did not follow the treatment against medical advice.

No Contact within 90 days of last encounter—consumer was not in contact with the grant for 90 calendar days or more since his/her last encounter. No other information is known about his/her status. Contact refers to services/referral provided, phone calls related to a service plan (not scheduling), or crises intervention or emergency services.

Clinically referred out—consumer was referred to another program or services; this includes referrals to non-CMHS funded services.

Death—consumer died prior to completing treatment.

Other—consumer's status does not meet any of the above noted conditions. For example, the consumer was **not** compliant with the treatment plan and was terminated by the grantee. Check "Other" and specify the reason for the clinical discharge the space provided.

NOTE: If a clinical discharge record (interview or administrative data) is submitted, you will have to conduct a new baseline interview for the consumer if the consumer reenters treatment at the same grantee project.

Cross-Check Items

If the clinical discharge interview was completed by the consumer (i.e., you checked "Yes" for conducted clinical discharge interview), then "Death" or "No contact" are not valid options for clinical discharge status.

Skip Pattern

Continue to Section K.

SECTION K: SERVICES RECEIVED

THIS SECTION IS REPORTED BY GRANTEE STAFF AT REASSESSMENT AND DISCHARGE UNLESS THE CONSUMER REFUSED THIS INTERVIEW OR ALL INTERVIEWS, IN WHICH CASE IT IS OPTIONAL.

OVERVIEW

This section describes the services provided to the consumer over the course of his/her treatment. Services recorded in this section should include those funded or not funded by this CMHS grant. This information is not asked of the consumer, but filled in by the grantee. This information is required regardless of whether a reassessment or clinical discharge interview was conducted with the consumer. Identify the number of days and sessions of service provided to the consumer during the course of treatment. The number of days refers to the number of days that the consumer is enrolled in the program.

K1 On what date did the consumer last receive services?

Intent/Key Points

The intent is to document the date (month and year only) the consumer last received services from the grantee, including CMHS-funded and non-funded services. Only the month and year is recorded to protect the identity of the consumer.

Additional Probes None

Coding Topics/Definitions

Enter date as mm/yyyy. The date provided must be on or before the reassessment or the clinical discharge date (month and year only), as applicable. The date provided must be on or after the baseline interview date (month and year only). The date provided must be on or after the most recent date recorded for the last date services were received (month and year only) if a reassessment interview or administrative data were previously recorded.

Cross-Check Items

The date the consumer last received services must be on or before the current interview date and the clinical discharge date (for consumers who were discharged).

Skip Pattern None

Modality

Intent/Key Points[24]

The intent of this question is to determine the number of DAYS of services provided to the consumer during the client's course of treatment/recovery. Enter "0" if the service was not provided. There should be at least 1 day for a modality. If it is unknown whether or not the consumer received the service record "UNK" in the space provided. If your organization does not provide this service to consumers record "SNA".

Modality

1. Case Management – defining, initiating, and monitoring the medical, drug treatment, psychosocial, and social services provided for the client and the client's family.

2. Day Treatment – a modality used for group education, activity therapy, etc., lasting more than four continuous hours in a supportive environment.

3. Inpatient/Hospital (other than detoxification) – a patient who is admitted to a hospital or clinic for treatment that requires at least one overnight stay.

4. Outpatient – a patient who is admitted to a hospital or clinic for treatment that does not require an overnight stay.

5. Outreach – educational interventions conducted by peer or paraprofessional educator face to face with high risk individuals in the clients' neighborhoods or other areas where clients' typically congregate.

6. Intensive Outpatient – intense multi-modal treatment for emotional or behavioral symptoms that interfere with their normal functioning. These clients require frequent treatment in order to improve, while still maintaining family, student, or work responsibilities in the community. Intensive outpatient services differ from outpatient by the intensity and number of hours per week. Intensive outpatient services are provided two or more hours per day for three or more days per week.

7. Methadone – provision of methadone maintenance for opioid addicted clients.

8. Residential/Rehabilitation – a residential facility or halfway house that provides on-site structured therapeutic and supportive services specifically for alcohol and other drugs.

9. Detoxification (select only one) – a medically supervised treatment program for alcohol or drug addiction designed to purge the body of intoxicating or addictive substances.

    A. Hospital Inpatient – client resides at a medical facility or hospital during his/her treatment.

B. Free-Standing Residential – patient resides at a facility other than a hospital while treatment is provided.

C. Ambulatory Detox – treatment that is performed in a specialized therapeutic environment and is designed to provide both psychological and physiological stabilization to ensure safe withdrawal from alcohol and/or drugs.

10. After Care – treatment given for a limited time after the client has completed his/her primary treatment program, but is still connected to the treatment provider.

11. Recovery Support – support from peers, family, friends and health professionals during recovery. Includes any of the following: assistance in housing, educational, and employment opportunities; building constructive family and other personal relationships; stress management assistance; alcohol- and drug-free social and recreational activities; recovery coaching or mentoring to help manage the process of obtaining services from multiple systems, including primary and mental health care, child welfare, and criminal justice systems.

12. Other (Specify) – specify any other service modalities to be received by the client.

Services (Treatment, Case Management, Medical, After Care, Education, and Peer-To-Peer Recovery Support)

Intent/Key Points

The intent of this question is to determine the number of SESSIONS provided to the client during the client's course of treatment/recovery. Enter zero if no services provided. If it is unknown whether or not the consumer received the service record "UNK" in the space provided. If your organization does not provide the service record "SNA".

Treatment Services

1. Screening – a gathering and sorting of information used to determine if an individual has a problem with AOD abuse, and if so, whether a detailed clinical assessment is appropriate. Screening is a process that identifies people at risk for the "disease" or disorder (National Institute on Alcohol Abuse and Alcoholism, 1990). As such, screening refers to a brief procedure used to determine the probability of the presence of a problem, substantiate that there is a reason for concern, or identify the need for further evaluation. In a general population, screening for substance abuse and dependency would focus on determining the presence or absence of the disorder, whereas for a population already identified at risk, the screening process would be concerned with measuring the severity of the problem and determining need for a comprehensive assessment.

2. Referral to Treatment – a process for facilitating client/consumer access to specialized treatments and services through linkage with, or directing clients/consumers to, agencies that can meet their needs.

3. Assessment – to examine systematically in order to determine suitability for treatment.

4. Treatment/Recovery Planning – a program or method worked out beforehand to administer or apply remedies to a patient for illness, disease or injury.

5. Individual Counseling – professional guidance of an individual by utilizing psychological methods.

6. Group Counseling – professional guidance of a group of people gathered together utilizing psychological methods.

7. Family/Marriage Counseling – a type of psychotherapy for a married couple or family for the purpose of resolving problems in the relationship.

8. Co-Occurring Treatment/Recovery Services – assistance and resources provided to clients who suffer from both mental illness disorder(s) and substance use disorder(s).

9. Pharmacological Interventions – the use of any pharmacological agent to affect the treatment outcomes of substance-abusing clients. For example, the use of phenytoin in alcohol withdrawal and the use of buprenorphine in opioid treatment.

10. HIV/AIDS Counseling – a type of psychotherapy for individuals infected with and living with HIV/AIDS.

11. Other Clinical Services (Specify) – other client services the client received that are not listed above.

Case Management Services

1. Family Services (Including marriage education, parenting, and child development services) – resources provided by the state to assist in the well-being and safety of children, families and the community.

2. Child Care – care provided to children for duration of time.

3. Employment Services – resources provided to clients to assist in finding employment.

   A. Pre-employment Services – services provided to clients prior to employment, which can include background checks, drug tests and assessments. These services allow employers to “check out” prospective employees before hiring them.

B. Employment Coaching – provides tools and strategies to clients to assist in gaining employment. These strategies include implementing new skills, changes and actions to ensure clients' achieve their targeted results.

4. Individual Services Coordination – services families may choose to use when they need help obtaining support for their mentally disabled sons or daughters to live as independently as possible in the community.

5. Transportation – providing a means of transport for clients to travel from one location to another.

6. HIV/AIDS Service – resources provided to clients to improve the quality and availability of care for people with HIV/AIDS and their families.

7. Supportive Transitional Drug-Free Housing Services – provides rental assistance for families and individuals who are seeking to be drug-free who can be housed for up to two years while receiving intensive support services from the agency staff.

8. Other Care Management Services (Specify) – other care management services the client received that are not listed above.

Medical Services

1. Medical Care – professional treatment for illness or injury.

2. Alcohol/Drug Testing – any process used to identify the degree to which a person has used or is using alcohol or other drugs.

3. HIV/AIDS Medical Support & Testing – medical services provided to clients who have HIV/AIDS and their families.

4. Other Medical Services (Specify) – other medical services the client received that are not listed above.

After Care Services

1. Continuing Care – providing health care for extended periods of time.

2. Relapse Prevention – identifying each client's current stage of recovery and establishing a recovery plan to identify and manage the relapse warning signs.

3. Recovery Coaching – guidance involving a combination of counseling, support and various forms of mediation treatments to find solutions to deal with breaking the habit of substance abuse.

4. Self-Help and Support Groups – helping or improving oneself without assistance from others; and/or an assemblage of persons who have similar experiences and assist in encouraging and keeping individuals from failing.

5. Spiritual Support – spiritual/religion-based support for the clients' recovery process.

6. Other After Care Services (Specify) – other after care services the client received that are not listed above.

Education Services

1. Substance Abuse Education – a program of instruction designed to assist individuals in drug prevention, relapse, and/or treatment.

2. HIV/AIDS Education – a program of instruction designed to assist individuals with HIV/AIDS and their families with HIV/AIDS prevention and/or treatment.

3. Other Education Services (Specify) – other education services the client received that are not listed above.

Peer-To-Peer Recovery Support Services

1. Peer Coaching or Mentoring – services involving a trusted counselor or teacher to another person of equal standing or others in support of a client's recovery.

2. Housing Support – providing assistance for living arrangements to clients.

3. Alcohol-and Drug-Free Social Activities – action, event or gathering taken by a group of people that promotes abstinence from alcohol and other drugs.

4. Information and Referral – services involving the provision of resources to a client promoting health behavior and/or direction of a client to other sources for help or information.

5. Other Peer-to-Peer Recovery Support Services (Specify) – other peer-to-peer recovery services the client received that are not listed above.

ACCESSING HELP

For technical support or questions about TRAC, please contact the TRAC Help Desk, located at Westat.

Telephone: 1-888-219-0238
Email: TRACHELP@westat.com
Hours: M-F 8:30 AM – 7:00 PM (EST/EDT)

APPENDIX A: CLIENT LEVEL DATA PROGRAM SPECIFIC GUIDANCE

1. MAI-TCE grantees should think "mental health, and/or substance abuse treatment client or consumer, or SA/HIV Prevention Intervention participant" wherever the guide mentions "consumer" depending upon the program/project context.

2. Everyone participates in TRAC.
   Every client, consumer and SA/HIV Prevention Intervention participant receiving treatment services or a SA/HIV intervention will be enrolled into TRAC with the NOMs Client Level Measures performance data instrument, which is referred to as the Services tool.

3. MAI-TCE grantees must indicate a programmatic focus for each TRAC enrollee in Section H at Baseline.
   The identified program focus will serve to link each consumer/client to the three MAI- TCE service areas (mental health (illness) treatment, substance abuse treatment and substance abuse prevention). *There is a concurrent option to identify additional programmatic focus / foci*.

   Indicate a predominant programmatic focus as follows:

   - For SA/HIV Prevention Intervention programs, grantees will select *Substance Abuse Prevention* as the predominant focus for SA/HIV Prevention Intervention participant.

   - For mental health (illness) and substance abuse treatment(s) activity, grantees will select *one predominant programmatic focus*, either mental-health (illness) treatment or substance abuse treatment

   Whether or not the MAI-TCE program/project has an integrated co-occurring (mental illness/substance abuse disorder) treatment approach or whether it has a distinct mental health or substance abuse treatment focus, grantees must indicate a predominant programmatic focus for each consumer/client at baseline.

4. Timing of Reassessment and Clinical Discharge Status:
   Mental health (illness) and/or substance abuse treatment consumers/clients will receive reassessments at 6-month intervals and discharge unless discharge is within 30 calendar days of reassessment. If a reassessment interview was conducted within 30 calendar days of a discharge, a separate clinical discharge interview is not required; however, an administrative clinical discharge must be completed. (Please refer to the Question-by-Question Instruction Guide for MAI-TCE, under the following section: Timeframe for Interview Completion and Submission > Clinical Discharge > Requirements for Collecting Administrative Clinical Discharge Data.) For SA/HIV Prevention projects see item #5 below.

5. Timing of Evidence Based SA/HIV Prevention Interventions (In Section H, Substance Abuse Prevention marked as Predominant) – Discharge/Exit (J) and Services Received (K):
Selected populations for SA/HIV Prevention interventions tend to participate in programs of shorter duration than mental health (illness) and/or substance abuse treatment programs. A program of 6 months duration would be uncommon. For this reason, the following guidance is provided to report on the SA/HIV Prevention program activities, to reflect each participant's experience accurately.

SECTION J – Clinical Discharge Status

Read Clinical Discharge Status as "SA/HIV Prevention Intervention 'Exit'".

The second interview point, or 'reassessment", will occur at 'exit' following the completion of the intervention. Mark the discharge status as appropriate and also check off/mark and fill in the field by 'OTHER (specify):_____ with the following - either the words "Completed Intervention" or "Did Not Complete."

SECTION K - Services Received

Continue from "J" to "K - Services Received", and from the agency record complete, "EDUCATION SERVICES SESSIONS" as appropriate for

1.) Substance Abuse Education and

2.) HIV/AIDS Education

Continue and read "3.) Other Education Services (Specify)" as *Substance Abuse / HIV Prevention Evidence Based Interventions (EBI) or DEBI (as adapted) from NREPP or the CDC Database on Evidence Based Interventions, or other*. In the 'fill-space' enter: title of the EBI /or DEBI /or other, the number, duration, frequency of sessions; then enter the # of sessions completed by the participant in "Number of Sessions"_____.

SECTIONS OF SERVICES TOOL TO ADMINSTER AT DISCHARGE PERTAINING TO PREVENTION PROGRAMS for Selected Populations- (These are marked at baseline in Section H, Question 1 with only "prevention focus" for both Programmatic Focus and Predominant Focus.

On discharge from Prevention Programs upon completion of the intervention, the number of questions an individual respondent is required to complete depends on the duration and focus of the intervention received. The questions should be determined by the grantee program and person in charge of data collection at the organization **prior to implementation.**

In addition to Record Management, Section J (Clinical Discharge) and Section K (Services Received), the following table shows which other sections of the Services tool to administer based on the intervention duration:

INTERVENTION DURATION	**QUESTIONS TO ADMINISTER FROM MAI-TCE SERVICES TOOL**
Single Session Intervention	From Section H • Administer 2 to 5 items from Questions H4-H14 on Attitudes & Knowledge which relate to the intervention
Multiple Session Brief Intervention (29 days or less duration)	From Section H • Administer all Attitudes & Knowledge Questions H4-H14
Multiple Session Long Intervention (30 days or longer duration)	• Administer all sections of the Services Tool, (as required for discharge)

6. Mental health (illness) and/or substance abuse treatment may also report on SA/HIV Prevention "Services Received" in Section K EDUCATION SERVICES SESSIONS: Mental health (illness) and/or substance abuse treatment providers delivering SA/HIV Prevention interventions to consumers/clients enrolled in treatment services may also complete, "Education Services Sessions" in Section K (at 6 month reassessment/or discharge as appropriate) per #5 above.

7. "Services Received" in Section K - Peer Support Services-All Project Areas: In "other" describe relevant peer oriented activities such as serving as a member of a project advisory group, or working as a peer in the project, related area, or recovery initiatives.

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