

**Protocol and Decision Rules for Required  
Oregon ACT Team Quarterly Reporting**

# Table of Contents

<b>Introduction</b> .....	page 5
Contacts.....	page 5
Quarterly Reporting Guidelines.....	page 5
Quarterly Reports.....	page 6
Annual ACT Fidelity Review Data.....	page 6
<b>Data Entry Procedures</b> .....	page 7
Register an account.....	page 7
OAD user home page.....	page 7
Referral Reporting.....	page 8
Multiple referrals for one person.....	page 8
Deleting a referral.....	page 8
Pending referrals.....	page 9
ACT Enrollment – Client Information Reporting.....	page 10
Initial Entry and Quarterly Updates.....	page 10
Deleting Client Records.....	page 10
Client Re-enrollment.....	page 10
Outcome Reporting.....	page 11
Color Coding of Outcome Variables.....	page 11
Saving Outcome Data.....	page 12
Auto-fill Outcomes Set to ‘no’.....	page 12
Hospital/Inpatient Rollover.....	page 12
Outcomes Rolling Over from Previous Quarters.....	page 13
Submitting and Exporting Data.....	page 13
<b>Data Definitions and Reporting Tips</b> .....	page 14

Updated 10/15/2019

Referral Variable Definitions & Decision Rules.....page 14

- Client Medicaid ID.....page 14
- Referral From Category.....page 14
- Referral From Agency.....page 14-15
- Referral Date.....page 15
- Enrolled in ACT.....page 15
- Reason for ACT Denial.....page 15-16
- Date of Determination.....page 16
- Referral to ACT Team.....page 16

Client Information Variable Definitions & Decision Rules.....page 16

- ACT Team.....page 16
- Agency Medicaid ID #.....page 16
- Name.....page 16
- Date of Birth.....page 16
- Gender.....page 16
- Race.....page 16-17
- Marital Status.....page 17
- Education Level .....page 17
- Employment Status.....page 17
- Current Legal Status.....page 17
- Veteran.....page 17
- Zip Code.....page 17
- County.....page 17
- Payer.....page 17
- Client Medicaid ID #.....page 17
- ACT Enrollment Date.....page 17
- Discharge Date.....page 17

Updated 10/15/2019

Primary Diagnosis.....	page 17
Secondary Diagnosis.....	page 17
<b>Client Outcome Variable Definitions &amp; Decision Rules.....</b>	<b>page 18</b>
Medication Adherence.....	page 18
Living Arrangement.....	page 18
Homeless.....	page 18
Supported Employment.....	page 18
Competitive Employment.....	page 18-19
School.....	page 19
Psych ER .....	page 19
Medical ER.....	page 19
Psychiatric Hospitalization.....	page 19
Substance Use Inpatient Treatment.....	page 19
Substance Use Diagnosis.....	page 20
Substance Use Frequency.....	page 20
Mental Health Court.....	page 20
Parole/Probation.....	page 20
New Arrest.....	page 20
Nights in Jail.....	page 20
New Felony Conviction/Charges.....	page 20
Natural Supports.....	page 21

\*please note:

**Red** lettering means to pay extra attention to that information.

**Green** lettering means that it is new information that has been recently added.

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## Introduction

Certified and provisionally certified Assertive Community Treatment (ACT) providers are required by OAR 309-019-0255 to report on ACT outcomes to the Oregon Health Authority every 3 months. The Oregon Center of Excellence for Assertive Community Treatment (OCEACT), in coordination with the Oregon Health Authority's Health Systems Division, created the Oregon ACT Database (OAD) as an online tool for reporting referrals to the ACT programs, individual enrollment/demographic information, and participant outcomes. These data will be a valuable asset to support ACT programs in achieving the best outcomes for delivering this evidence based practice such as reduced hospitalization, homelessness, and criminal justice involvement and increased housing stability, community tenure and employment. OCEACT will analyze these data on a quarterly basis and provide an outcome report back to the ACT programs, the Health Systems Division and other stakeholders to inform ongoing ACT technical assistance and quality improvement efforts.

This manual was created to provide instructions and tips on how to report quarterly ACT referral, enrollment and ACT outcomes data and submit it through the OAD.

## Contacts

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## Quarterly Reporting Guidelines

Quarters	Dates	Data Submission Deadline
Quarter 1	January 1 – March 31	May 15 <sup>th</sup>
Quarter 2	April 1 – June 30	August 14 <sup>th</sup>
Quarter 3	July 1 – September 30	November 14 <sup>th</sup>
Quarter 4	October 1 – December 31	February 14 <sup>th</sup>

Oregon ACT teams have 45 days after the end of the quarter to submit their quarterly data (referral, enrollment, demographic and outcome). ACT teams will submit their data through the OAD. When all the data has been completely entered and is ready for submission, sign off on the data using the attestation buttons labeled 'save and certify' that are on each page of the outcome data. After you have attested to all your data, send a confirmation email to OCEACT: Alyssa Kerlinger – [akerlinger@optionsonline.org](mailto:akerlinger@optionsonline.org). OCEACT will export the quarterly report directly from OAD.

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### **Quarterly Reports**

Each quarter, OCEACT will publish statewide ACT outcome reports and provide individual quarterly outcome reports to each team. These reports will not contain Protected Health Information (PHI). These reports will also be shared at the ACT advisory board meetings. OCEACT will be able to provide individualized reports based on the needs of your ACT team (i.e. for outcome based supervision, goal setting, agency reporting, community partner reporting, tracking regional trends, etc.). Please coordinate with Alyssa Kerlinger and/or Heidi Herinckx if you would like to build specialized reports from your outcome data.

### **Annual ACT Fidelity Review Data**

OCEACT will no longer require ACT programs to report outcome data as part of the annual ACT fidelity review. Starting in April 2018, ACT teams will receive an email about a month prior to the fidelity review date that will contain most of the data elements required for the fidelity review. This data will be based on the quarterly outcome data that was submitted in the previous year. Since the fidelity review is a snapshot in time, ACT teams can decide if they would like to do the review based off the datasheet OCEACT sends, or add any new information that has occurred since their last quarterly submission. Programs will need to update the datasheets with 'service levels' (If each individual is currently receiving less services because they are in the engagement phase or they are transitioning to less intensive services).

## DATA ENTRY INSTRUCTIONS

- **Register an account on the Oregon ACT Database - [www.orACTdb.org](http://www.orACTdb.org)**
  - To register an account, email Alyssa Kerlinger (akerlinger@optionsonline.org ) to request an authorized OAD new user account form.
    - To register a new account on OAD, there is a user account request form that must be submitted to the OAD programmers. Alyssa will provide each new user with the form. A username and temporary password will then be provided. Sign on and create a personal password that can be updated and managed via your email.
  - **Important Notice:** Each agency can have multiple user accounts. Multiple users can be entering data into the same database *at the same time*. It is recommended that each ACT team limit authorized OAD users to around 3 agency staff members to help protect these data.
  - **Important Notice:** Please inform OCEACT when a user is no longer a member of the ACT team or leaves the agency. OCEACT will outreach to agencies at least semi-annually to verify the user accounts we have on file are still valid users. However, it is important to remove users as soon as they no longer should have access to the OAD.
  
- **OAD User Home Page:**
  - Once logged in, the home button will always take you back to the user home page.
  - **Important Notice: Select the Quarter/Year you want to report data to.**
    - Once you select the quarter/year from the home page, all the data you enter for referrals/client information/client outcomes will be reported for the *selected* quarter/year. **Double check on each data entry page that it still shows the correct reporting period.**

[Figure 1]

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Reporting Period: 2019\_01 ACT Agency: Options for Southern Oregon  
Agency Medicaid ID #: 000209973

**3 reporting requirements**

**1** Referrals to ACT

**2** ACT Client Information

**3** ACT Client Outcomes

Select correct reporting period!

- **Each quarter, you will be required to report (see Figure 1) :**
  - 1. Referrals to ACT: enter all referrals made to the ACT program this quarter.**
  - 2. Update with new ACT enrollments and any discharges.**
  - 3. Enter all outcomes for current ACT clients.**

#### 1. Referral Reporting

- ❖ Report on all referrals made during the reporting quarter.
- ❖ If your agency has more than one ACT team, it is not required to report which ACT team the referrals were made to. *There is optional space to clarify which team the client was referred to if that is applicable or needed to report for your agency.*
- ❖ Multiple referrals can be made for the same person in a quarter, if they were referred more than once in a quarter. Please report each referral separately.
- ❖ There is a delete button at the bottom of the referral client entry page (See Figure 2)
  - **Unlike the ACT enrollment records and the ACT outcome records (which do connect across quarters), the referral records are not connected across quarters.** So, if a client was referred in Q1 and they accidentally got entered into Q2 as well, the Q2 record can be deleted without affecting the Q1 referral record.



Updated 10/15/2019

(Figure 2)

Referral From Agency: Oregon State Hospital

Referral Date: 02/16/2018

Enrolled in ACT?: Yes

Deny Reason: -- Select One --

Date Of Determination: 03/01/2018

Buttons: Save, Delete

Back to List

Use 'delete' button to remove a mistake referral record from the database.

- ❖ **Pending Referrals:** Report a referral even if a determination has not been made as to their enrollment. You have the ability to **not** answer whether they are enrolled in ACT or the date of determination. In the drop down menu for Denial Reason, select 'referral pending'. [See Figure 3]
  - If a referral's denial reason says 'referral pending' after the quarter ends, then the client referral record will roll over to the next quarter (Ex: In 2018\_Q1, the quarter ends on March 31, a referred client's records says 'referral pending', so on April 1<sup>st</sup> that client's referral record will roll over to 2018\_Q2). When a enrollment determination is made, please go into the record for the current reporting quarter the decision was made and update the 'Enrolled in ACT' and 'Date of Determination' variables (Ex: If the client was referred in 2018\_Q1 but their referral record rolled over to 2018\_Q2 on April 1<sup>st</sup> and a determination was made on April 3<sup>rd</sup>, please go to 2018\_Q2 and update the 'enrolled in ACT', 'Denial Reason' (return to '- select one-' if you selected YES for 'enrolled in ACT'), and 'date of determination' variables. Do not go back to 2018\_Q1 and update the referral record).

[Figure 3]

Referral Date: 02/05/2018

Enrolled in ACT?: Not Set

Deny Reason: referral pending

Date Of Determination: mm / dd / yyyy

Buttons: Save

Select referral pending if an enrollment determination has not been made by the end of the quarter. Leave 'Enrolled in ACT' and 'Date of Determination' blank.

If this says 'referral pending' at the end of the quarter, the client record will roll over to the next quarter until a determination has been made.

## 2. ACT Enrollment

- ❖ Once clients are enrolled and entered into the ACT enrollment, changes will not need to be made to their client information unless a discharge date needs to be added or there is a change in their zip code/county/insurance (Payer\_CCO). Any new clients enrolled in the reporting quarter will need to be entered.
  - If clients were open at least one day of the quarter, report on that client.
  - Unlike the client outcome section, clients are not listed in alphabetical order here. Clients are listed in the order that you have entered them. You can use the 'First Name' 'Last Name' search to quick search for a specific client.
  - **Important Notice** When entering a new client, make sure to enter all data on the first page, select 'NEXT', enter client diagnosis information, and then hit 'SAVE' on the final page (Client Diagnosis Information) or the record will not save in OAD.
- ❖ **Important Notice:** ACT participants will not show up in the Outcome Reporting Tab if their personal information is not first entered in the Client Information tab. [See Figure 4]
- ❖ New clients can be entered into the client information tab at any point in the quarter.
- ❖ **ACT Team:** Your *agency* name and *agency* Medicaid ID # will auto-fill in the client information page, however, if your agency has more than one ACT team, you will still have to choose which ACT team you assign that client to. [See Figure 4]
- ❖ **Important Notice:** Client information data will **only be entered once** when enrolled into the program. The only client information that will need to be updated each quarter is the Zip Code/County/Payer\_CCO. These only need to be updated with what their zip code/county/Payer\_CCO is at the end of each quarter. Client information will carry forward each quarter until an ACT discharge date is entered. **Once a discharge date has been entered, individuals who have been discharged will not appear in future outcome quarters.**
- ❖ **Deleting Clients:** While there is a 'delete' button at the bottom of the 'Client Diagnosis Page', **do not delete clients unless their record is a mistake**. All past data client information and outcome data will be deleted. We will not delete client records, even if clients are discharged or deceased.
- ❖ **Client Re-enrollment:** If a past client is re-enrolled in ACT, go into 'Existing ACT clients', find the client, and update their client information and enrollment dates, and remove the discharge date. Make sure to update diagnosis information as well if necessary.

[Figure 4]

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Reporting Period: 2018\_01 ACT Agency: Options for Southern Oregon  
Agency Medicaid ID #: 000209973

ACT Referrals  
To enter or update the list of referrals to your ACT program click on the Referrals to ACT button

ACT Enrollment  
To enter or update information on individuals served by your ACT program click on ACT Client Information button

ACT Outcomes  
To enter or update ACT client outcomes click on the ACT Client Outcomes button

Referrals to ACT ACT Client Information ACT Client Outcomes Export Client Data

Auto-filled Agency Medicaid ID #

Enter Client Information first then enter Client Outcomes.

### 3. Outcome Reporting

- ❖ MAKE SURE TO DOUBLE CHECK YOU ARE ENTERING DATA FOR THE CORRECT QUARTER!
  - When you click on “Client Outcomes” and then select an outcome variable to report on, it will say the reporting period that you are reporting on at the top of the page. To change the reporting period, select ‘HOME’ tab in the upper left side of the screen and change the reporting period to the correct Quarter/Year on the home page.
- ❖ Report on client outcomes for the current reporting quarter only.
- ❖ **Clients Listed in Alphabetical Order:** OAD will allow you to list your clients by first name *or* last name. It will be important to make sure that your source data (such as a spreadsheet) matches the order in which your clients appear in your client database.
- ❖ **Color Coding:** The outcome variable links will color code as you begin entering outcome data for each client. When an outcome variable has no data entered, it will not be highlighted. As soon as some or all data is entered for each participant, the variable link will highlight yellow. When all participants’ data has been filled out for an outcome variable, and the ‘save and certify’ button is selected, verifying that all the data is complete and correct [See Figure 6], the variable link will turn green. However, if a new client is added to the quarter, the link will return to yellow, signaling unfinished reporting. As soon an answer has been selected for the new client, the variable link will return to green again. [See Figure 5]

Updated 10/15/2019

[Figure 5]

Green highlight = All data has been completed and verified and the 'save and certify' button has been selected.

Medication Adherence	Substance Use Frequency
Living Arrangement	Substance Abuse or Co-Occurring Inpatient Treatment
Homelessness	Probation/Parole
Supported Employment	Arrests
Competitive Employment	
School	

Yellow highlight = Some data has been entered for this variable.

No highlight = No data has been entered for this variable.

- ❖ **Saving Outcome Data:** When updating outcome variable information throughout the quarter, make sure to hit 'save' before moving on to another variable or switching screens. Only select 'Save and Certify Complete' once all the participants have been reported on for that variable and the data has been verified and is ready to submit. [See Figure 6]

[Figure 6]

Has this participant been arrested for a new crime this quarter?

Participant (First Last)	Arrests on New Crime
Alice Apple	1-2 ARRESTS
Bee Barney	3-4 ARRESTS

Save      Save and Certify Complete

Use the save button to update and save information throughout the quarter.

Select 'Save and Certify Complete' only when you know the data is verified and complete for the quarter.

- ❖ **Auto-filled Outcomes:** Psych Hospitalizations, Substance Use Inpatient Treatment are set at 'No'.
- ❖ **Hospital/Inpatient Roll-over:** If an individual has experienced a hospitalization or substance use inpatient stay, select 'yes' and provide the date of admit and discharge and the location. If the participant has not yet discharged in the reporting quarter, then leave the discharge box blank and that event will roll over to the next quarter, unless you enter the hospitalization in the 45 day period after the quarter ends then it won't roll forward to the next quarter. If you enter the hospitalization in the 45 days after the end of the quarter and it doesn't have a discharge date, you will need to re-enter it again into the following quarter.

Updated 10/15/2019

- Nights in Jail is set at '0'. If a person has spent one or more nights in jail, report how many nights and the reasons for incarceration.
  - **Outcomes Rolling Over:** These outcome variables tend to be more consistent across quarters so we allowed answers selected for these variables to roll over each quarter.
    - Living arrangement
    - Homeless
    - Supported employment
    - Competitively employed
    - Education
    - Substance Use Diagnosis
    - Mental Health Court
    - Parole and Probation
    - Medication Adherence
    - Psych Hospitalizations (*only for those events that did not have a discharge date entered*)
    - Substance Abuse Inpatient Treatment (*only for those events that did not have a discharge date entered*)
  - It is still expected that the information reported is up to date for the current reporting quarter. When previous quarter's data rolls over for these fairly consistent variables, please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.
- **Submitting and Exporting Data**
    - Attestation: After all the data is entered for referral/client information/client outcomes, please sign off on your client data by using the attestation 'save and certify complete' buttons on each outcome variable page. To verify your data is complete, it is recommended that you export your data and review the datasheet for missing or incorrect data, and then go back into OAD and make any corrections that you find need to be made. Only email Alyssa Kerlinger at [akerlinger@optionsonline.org](mailto:akerlinger@optionsonline.org) confirming that all the data is complete in OAD and ready to be exported. YOU DO NOT NEED TO SEND A DATASHEET TO OCEACT OR OHA. OCEACT CAN PULL THE DATA DIRECTLY FROM OAD.
    - **Important Notice:** After you email OCEACT that your data are ready to be exported, **please do not change any data in that quarter without notifying OCEACT of those changes.**
      - ❖ To change any data elements submitted in previous quarters, please contact Alyssa Kerlinger ([akerlinger@optionsonline.org](mailto:akerlinger@optionsonline.org)).
    - ACT teams can export their own copies of quarterly outcomes and referral data in a format compatible with Excel.
      - ❖ Past quarterly referral and outcome reports will be available for export at any time.

## Data Definitions & Reporting Tips

### Referral Definitions & Decision Rules

- Client Medicaid ID #:
  - Only if applicable to client.
- Referral From Category
  - Select the type of agency/person who reported the individual client. We are prioritizing the external referral source. If the referral comes to the agency before it comes to the ACT team, please indicate the original referral source from which it came before it came to the agency.
    - Example: If you agency's crisis team assesses someone in the community and makes the referral to the ACT team, please report who made the call to the crisis team. Was it police, the client (i.e self-referral), homeless shelter, etc?
    - Example: If your agency receives a new client referral from a community provider and your agency does the assessment and decides they would be a good referral to ACT, then please report the external community provider who made the original referral as the 'Referral from Category' and the 'Referral from Agency'. DO NOT report it as an internal referral.
    - Example: If a client's family member refers the new client to the agency, the agency does the assessment and decides they may be a good referral to the ACT team, please report that the 'referral from category' as 'family' and NOT an internal referral.
  - **Decision Rule:** If a client is enrolled into the agency as a new client and within 3 months, that client is referred to the ACT team, please report the 'referral from category' and the 'referral from agency' as the original external referral source.
    - Example: If a hospital makes a referral to your mental health agency and your agency places that client into outpatient treatment, but within 3 months that client gets referred to the ACT team because they need a higher level of care, please report that referral to the ACT team as coming from the hospital who originally made the referral to the agency in the first place.
  - **Decision Rule:** If a client was an ACT team participant in the past and was discharged from the ACT team previously, but they are now being re-enrolled, please still report this as a referral, even if it is a self-referral or family referral.
  - If the correct category is not represented on the drop down list, please select 'other' and specify the correct category the referring agency can be categorized as.
    - i.e. If a client's sister referred them, select 'other' and type in 'family'.
- Referral From Agency
  - Please report the specific name of the agency that made the referral. We are prioritizing the external referral source. If the referral comes to the agency before it comes to the ACT team, please indicate the original referral source from which it came before it came to the agency.
    - Specify the **full name** of the referring agency (**Please don't use acronyms**).
    - Example: If you agency's crisis team assesses someone in the community and makes the referral to the ACT team, please report who made the call to the crisis team. Examples could be: Jackson County Sheriff Department, Unity Behavioral Health, the client's name (if a self-referral), The Mission, etc.
    - Example: If your agency receives a new client referral from a community provider and your agency does the assessment and decides they would be a good referral to ACT, then please report the external community provider who made the original referral as the 'Referral from Category' and the 'Referral from Agency'. DO NOT report it as an internal referral.

Updated 10/15/2019

- While the referral may be coordinated through a single point of contact or CHOICE, don't list CHOICE as the referring agency, list the original source of referral (i.e Oregon State Hospital, Unity Center for Behavioral
- **Decision Rule:** if a client was an ACT team participant in the past and was discharged from the ACT team previously, but they are now being re-enrolled, please still report this as a referral, even if it is the client name or name of the family member.
- Referral Date
  - **Important Note:** If you do not enter a date, the current date of entry will auto-fill. If you are entering the referral on the same day it was received, then you can leave the auto-filled date. However, if you are entering the referral into OAD at a later date than when the referral was received, you will need to update the date with the correct date the referral was made.
- Enrolled in ACT
  - All referrals must be reported.
  - If a determination has not been made by the time the quarterly report is due and the client referral is still pending, leave the 'enrolled in ACT' variable blank, leave the 'Date of Determination' variable blank and under 'Denial Reason' select the 'referral pending' option.
    - If you don't select an answer for 'enrolled in ACT' or the 'date of determination' variable, the individual referral will roll over to the next quarter. In the following quarter, answer 'enrolled in ACT' and 'Date of Determination' variable.
  - Must meet national program standards for enrollment into ACT as specified in OAR.
    - **National program standards**
      - 1) SPMI that seriously impairs their functioning in community living. Priority is given to people with schizophrenia, other psychotic disorders
      - 2) a. Significant difficulty consistently performing the range of practical daily living tasks required for basic adult functioning in the community (e.g., caring for personal business affairs; obtaining medical, legal, and housing services; recognizing and avoiding common dangers or hazards to self and possessions; meeting nutritional needs; maintaining personal hygiene) or persistent or recurrent difficulty performing daily living tasks except with significant support or assistance from others such as friends, family, or relatives.
        - b. Significant difficulty maintaining consistent employment at a self-sustaining level or significant difficulty consistently carrying out the homemaker role (e.g., household meal preparation, washing clothes, budgeting, or child-care tasks and responsibilities).
        - c. Significant difficulty maintaining a safe living situation (e.g., repeated evictions or loss of housing).
      - 3) Clients with one or more of the following problems, which are indicators of continuous high service needs (i.e., greater than eight hours per month):
        - a. High use of acute psychiatric hospitals (e.g., two or more admissions per year) or psychiatric emergency services.
        - b. Intractable (i.e., persistent or very recurrent) severe major symptoms (e.g., affective, psychotic, suicidal).
        - c. Coexisting substance abuse disorder of significant duration (e.g., greater than 6 months).
        - d. High risk or recent history of criminal justice involvement (e.g., arrest, incarceration).
        - e. Significant difficulty meeting basic survival needs, residing in substandard housing, homelessness, or imminent risk of becoming homeless.
        - f. Residing in an inpatient or supervised community residence, but clinically assessed to be able to live in a more independent living situation if intensive services are provided, or requiring a residential or institutional placement if more intensive services are not available.
        - g. Difficulty effectively utilizing traditional office-based outpatient services.
- Reason for ACT denial
  - Choose which option best describes the referral denial reason. Only one option can be chosen. If there are multiple factors that influenced the denial reason and they are not reflected in the available options, choose 'other' and in the 'other specify' box, write in the reason.

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- Choose 'referral pending' if a determination has not yet been made about a referral.
- **For this reason:**
  - 'ACT team does not have capacity'
    - Only select this option if they meet all eligibility requirements for enrollment into ACT and would otherwise be enrolled if the program had capacity to serve them.
- **Date of Determination**
  - The date the referring entity was notified of acceptance or denial of referral.
  - If a determination has not been made by the time the quarterly report is due and the client referral is still pending, leave the 'enrolled in ACT' variable blank, leave the 'Date of Determination' variable blank and under 'Denial Reason' select the 'referral pending' option.
  - If the referral record is set at referral pending at the end of the quarter, OAD will roll over that record to the next quarter. Please update the referral with the date of determination in the quarter that it occurs. So, if the referral accidentally rolls over to the next quarter, but the date of determination was made in the previous quarter, then please update the previous quarter and delete the referral record from the next quarter.
    - **EXAMPLE:** client was referred in Q1 – March 12<sup>th</sup>, but date of determination was not set and 'referral pending' was selected for the denial reason. Then the record will roll over to Q2 on March 30<sup>th</sup>. IF the determination was made before the end of the quarter, like March 25<sup>th</sup>, then go into Q1 and update the referral record with March 25<sup>th</sup> as the date of determination and update the 'Enrolled in ACT variable and remove the 'referral pending' status from the denial reason. IF the record rolled over to Q2, then AFTER you have updated the record in Q1, delete the accidental roll over in Q2. HOWEVER, if the determination wasn't made until April, then go into the record in Q2 that rolled over and update the record there.
- **Referral to ACT Team**
  - If your agency has more than one ACT team, and you would like to identify which team the individual was referred to, the Referral to ACT Team is an **optional** variable to choose which team the client was referred to. **If this is not necessary or applicable to your agency, you do not have to answer this variable.**

### Client Information Variable Definitions & Decision Rules

- **ACT team:**
  - The ACT team the individual is enrolled in. If your agency only has one ACT team, then this will be the same as your agency name.
- **Agency Medicaid ID #:**
  - This variable should auto-fill. Please verify that this number is correct and email Alyssa Kerlinger if changes need to be made.
- **Participant Last Name**
- **Participant First Name**
- **Date of Birth**
- **Gender**
- **Race**
  - **American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
  - **Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
  - **Black or African American:** A person having origins in any of the black racial groups of Africa.
  - **Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
  - **White:** A person having origins in any of the original peoples of Europe.
  - **Arab:** A person having origins in any of the Arab world such as the Middle East or Northern Africa (Egypt, Saudi Arabia, Palestine, Libya, United Arab Emirates)



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- **Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin", can be used in addition to "Hispanic or Latino".
- Marital Status:
  - Current marital status **at time of enrollment**
- Education Level
  - Highest grade completed **at time of enrollment.**
- Employment Status
  - Current Employment Status **at time of enrollment.**
- Current Legal Status
  - This refers to the individual's current status with the criminal justice system **at time of enrollment.**
- Veteran
  - Has the participant served in any capacity in the U.S. military?
  - Check the box if the answer is 'yes'. Leave blank for 'no'
- Zip Code
  - Provide the zip code where the participant resided at the **end of the quarter.**
  - Please update each quarter.
- County
  - Provide the name of the county where the participant resided at the **end of the quarter.**
  - Please update each quarter.
- Insurance/CCO
  - What insurance does the participant have at the end of the quarter? You don't need to update with each change throughout the quarter. **Only update in OAD what the insurance was at the end of the quarter.**
  - Most ACT participants will be funded through a Coordinated Care Organization (CCO); however, an additional option includes General Fund (i.e. Indigent funding, CHOICE, State General Fund). Choose the "other" option for answers like 'Medicare' or 'private insurance' and type in the answer.
  - This variable is asking how is the participant being paid for. So, how is ACT billing or paying for this participant to get served?
    - Example of Decision Rule: If the participant has Medicare, but ACT isn't getting paid by Medicare and the agency is using general funds/CHOICE, etc., then don't report Medicare, report 'General Fund'.
  - **Please update each quarter.**
- Client Medicaid ID #
  - Only answer if applicable to participant.
- ACT Enrollment Date
  - What was the date the participant enrolled in ACT?
  - **Please do not report the date the participant was enrolled in the agency. This variable is looking for the date the participant was enrolled in ACT.**
- Discharge Date:
  - What is the date the participant was discharged from ACT? (only if applicable)
  - If an individual is moving to a higher level of care i.e. being discharged because they are having extended hospital stays or long term residential treatment, record the reason here.
  - **If discharged, the 'Next' button will take you to a page where it is required to give a 'reason for discharge'. Select the reason that is most appropriate for the client.**
    - To clarify what is meant by behavioral issues for the option: 'Agency closure because client behavioral issues'. Behavioral issues refer to violence or assaultive behavior.
- Primary Diagnosis ICD 10 Code & Other Diagnosis ICD 10 Code
  - Provide **up to three** major psychiatric diagnoses (if applicable), including mental illnesses, such as psychotic disorders and mood disorders, that are the focus of treatment **at time of enrollment.**
  - Then, in 'other diagnosis', please provide other diagnoses that are relevant, such as substance abuse diagnoses or personality disorders **at time of enrollment.**
  - **Please use the ICD-10 Code.**

Updated 10/15/2019

### Client Outcome Variable Definitions & Decision Rules

- **Important Notice:** If your agency has more than one ACT team, please first select which ACT team you want to enter outcome data for.
  - Medication Adherence
    - Is the participant taking medications as prescribed and what is their attitude toward taking that medication?
    - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
    - Determine answer based on the majority of the quarter.
    - Answer using best clinical judgment/knowledge.
  - Living Arrangement
    - Where the participant lived the majority of the quarter.
    - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
    - Housing which meets the State of Oregon definition for Supported or Supportive Housing.
      - Supported Housing: Permanent housing with tenancy rights and optional supported services. Support services offered to people living in supported housing are flexible and are available as needed and desired, but not mandated as a condition of obtaining tenancy. Tenants have a private and secure place to make their home, just like other members of the community. Allows individuals with disabilities to interact with individuals without disabilities to the fullest extent possible.
      - Supportive Housing (Congregate Setting): A housing program specific to an identified population linked with social services tailored to the needs to the population being housed.
      - Supportive Housing (Scattered Site): Mainstream housing linked with social services tailored to the needs of the population being housed.
    - **Important Notice:** If you select the “Unsheltered/On the street” **OR** “Shelter, Couch Surfing, or Transitional” for ‘Living Arrangement’, this is considered ‘homeless’. The portal is set up so that if you answer that the client spent the majority of their time that quarter either on the street or in a shelter, motel, or transitional housing, that the next variable ‘Homeless’ will auto-fill to option #5 (homeless 45 days or more).
  - Homeless
    - About how many days was the individual homeless this quarter?
    - **DEFINITION:** Adult individual who lacks a fixed, regular, and adequate nighttime residence, including individuals who resided in an emergency shelter or a place not meant for human habitation (e.g. a hallway, a bus station, a lobby or similar places) and who are exiting an institution where he or she temporarily resided.
    - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
    - If you have selected the “Unsheltered/On the street” **OR** “Shelter, Couch Surfing, or Transitional” in the ‘Living Arrangement’ variable, this ‘Homeless’ variable will auto-fill with the fifth option – “45 days or more”.
  - Supported Employment:
    - Was the ACT client enrolled in Supported Employment (SE) and receive SE services during the quarter?
    - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
  - Competitive Employment:
    - Was the participant competitively employed for at least one day during the quarter?
    - **DEFINITION:** A job that pays at least minimum wage and is the wage that others receive performing the same work, is based in community settings alongside others without disabilities, and not reserved for people with disabilities. Competitive jobs are not “sheltered work”.

Updated 10/15/2019

- The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.
- School:
  - Was the participant enrolled in school for at least on day during the last quarter?
  - The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.
  - **For these School options:**
    - 'GED or high school completion'
    - 'Community college'
    - 'University'
    - 'Vocational or training program'
  - **For this option:**
    - 'Personal growth and leisure classes'

\*These options are specifically accredited or degree seeking classes

This means community classes or "just for fun" classes (i.e. taking a free computer class at the public library or participating in a community painting class for fun or as part of their recovery.)
- Psych ER: What was the total number of Psychiatric ER visits this last quarter?
  - Programs can track this by signing up for a Pre-manage account. Follow the link: <http://oceact.org/premanage/>.
  - Set up a Dashboard on your Pre-manage account to count ER visits. If you do not have a dashboard set up in your pre-manage account, reach out to Michael Oyster at Oregon Health Authority ([MICHAEL.W.OYSTER@dhsosha.state.or.us](mailto:MICHAEL.W.OYSTER@dhsosha.state.or.us)). He can help set up a dashboard that will track these data points.
    - **Decision Rule:** If the ER visit turns into a psychiatric hospitalization, do not record the ER visit. Record it as a psychiatric hospitalization only.
- Medical ER: What was the total number of Medical ER visits this last quarter?
  - Programs can track this by signing up for a Pre-manage account. Follow the link: <http://oceact.org/premanage/>.
  - Set up a Dashboard on your Pre-manage account to count ER visits. If you do not have a dashboard set up in your pre-manage account, reach out to Michael Oyster at Oregon Health Authority ([MICHAEL.W.OYSTER@dhsosha.state.or.us](mailto:MICHAEL.W.OYSTER@dhsosha.state.or.us)). He can help set up a dashboard that will track these data points.
    - **Decision Rule:** If the ER visit turns into a psychiatric hospitalization, do not record the ER visit. Record it as a psychiatric hospitalization only.
- Psychiatric Hospitalization
  - For each hospitalization in the quarter, report the admit date, discharge date, and the type of hospital the participant went to.
    - **Decision Rule:** If a participant is placed in the Hospital on Aid and Assist, please report this as a hospitalization but under Hospital Type, select other and write in for example: "Oregon State Hospital – Aid and Assist".
    - **Decision Rule:** If a participant is placed in respite – crisis stabilization facility, please report this as a hospitalization. Under ADD HOSPITALIZATION, select 'other' under Hospital Type and write in 'respite, crisis stabilization facility'.
    - **Decision Rule:** If the ER visit turns into a psychiatric hospitalization, do not record the ER visit. Record it as a psychiatric hospitalization only.
  - Discharge dates can be left blank if the participant has not been discharged.
    - If the hospitalization is entered in the 45 day period after the quarter ends, and there is no discharge, then the hospitalization will not roll over to the next quarter. The same hospitalization will need to be entered into the next quarter so a discharge date can be entered in the quarter that it occurs.
  - Programs can track this by signing up for a Pre-manage account. Follow the link: <http://oceact.org/premanage/>.
- Substance Abuse Inpatient Treatment Admit Date & Discharge Date
  - Enter up to 3 substance abuse inpatient treatment admits/discharges.
  - This can include Detox.

Updated 10/15/2019

- Substance Abuse Diagnosis
  - Does the participant have a **current** alcohol or drug addiction diagnosis?
  - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
  - This includes individuals who have a current (not in full remission) substance abuse challenge or diagnosis, regardless of whether or not they are currently participating in substance abuse treatment services.
  - **Clarification:** We do ask programs to enter this information into the client information tab at enrollment, but since that client information page is not being updated quarterly, we would like teams to report here on Substance Abuse diagnoses in case there are changes.
- Substance Use
  - About how often does the individual use alcohol or drugs?
  - **Important Notice:** When collecting this variable, please **exclude** tobacco and caffeine use from your reporting.
- Mental Health Court
  - Was the participant enrolled in Mental Health Court at any time during the quarter?
  - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
- Parole/Probation
  - Was the participant on probation or parole at any point during the quarter?
  - **The answer selected in the previous quarter will roll over to the current quarter for this variable. Please verify the data is still correct and up to date at the end of the current quarter before selecting 'save and certify'.**
- New Arrest
  - Report on the number of any **new** arrests this quarter
  - The best quality data for this variable is found by accessing data directly from your local jail. This is OCEACT's first choice regarding data sources . However, if this is **not** possible, use your best estimate and tracking tools.
    - For example: ACT programs often know who has been arrested on a daily basis as discussed in daily team meetings. If tracked that way, use that information. This data may not be 100% accurate, but is still the best data available.
- Number of Nights in Jail
  - **DEFINITION:** The client was in jail if he or she was booked into a place of confinement for persons held in lawful custody in a place under the jurisdiction of a government (such as a municipality or county) which is intended to confine persons awaiting trial or those convicted of minor crimes. The client was in prison if he or she was in a place of confinement especially for lawbreakers; specifically: an institution (as one under state jurisdiction) for confinement of persons convicted of serious crimes.
    - Interaction with law enforcement without being booked is NOT considered incarcerated in jail or prison.
  - **DECISION RULE:** If someone's incarcerations spans two quarters, then you will need to split up the incarceration days and report them separately in each quarter. Example: If someone was incarcerated on March 15<sup>th</sup> and released on April 9<sup>th</sup>, report 16 nights incarcerated in Quarter 1 and then report 9 nights incarcerated in Quarter 2.
  - The best quality data for this variable is found by accessing data directly from your local jail. This is OCEACT's first data source choice. However, if this is not possible, use your best estimate and tracking tools.
    - For example: ACT programs often know who is in jail on a daily basis as discussed in daily team meetings. If tracked that way, use that information. This data may not be 100% accurate, but is still the best data available.
  - Provide up to 3 Legal Charges for Incarceration
    - Choose up to 3 charges that resulted in incarceration.
    - If there are more than 3 charges, **prioritize the 3 most serious ones.**
- Felony convictions/charges
  - Did the participant have any new felony convictions or charges this quarter?
  - Only report 'yes' on any **new** convictions or charges this quarter.
- Number of Natural Supports

Updated 10/15/2019

- Provide the total number of contacts (could be many contacts with one person), the ACT team had with the individual's natural supports for the quarter.
  - Example: if an individual only has 1 person that is their natural support, but the ACT team has 20 different contacts with them over the quarter, report 20.
- Contacts (face to face, telephone, text, e-mail) with members of the individual's informal support network. This includes family, friends, neighbors, landlords, employers, clergy, etc. This does not include formal or paid supports (PCA, doctor, parole and probation, residential treatment staff, etc.)