


DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS

1700 K STREET
SACRAMENTO, CA 95811-4037
TDD (916) 445-1942
(916) 323-8333



ADP BULLETIN

Title GUIDELINES TO CLARIFY PROCEDURES FOR COLLECTION OF ADMISSION AND DISCHARGE DATA FOR THE CALIFORNIA OUTCOME MEASUREMENT SYSTEM - TREATMENT (CALOMS-TX)		Issue Date: 9-16-08 Expiration Date: N/A	Issue No. #08-08
Deputy Director Approval  Gigi Smith Chief Information Officer Information Management Services Division	Function: <input checked="" type="checkbox"/> Information Management <input type="checkbox"/> Quality Assurance <input type="checkbox"/> Service Delivery <input type="checkbox"/> Fiscal <input type="checkbox"/> Administration <input type="checkbox"/> Other	Supersedes Bulletin/ADP Letter No. N/A	

PURPOSE

This bulletin provides protocols and guidelines for collecting CalOMS-Tx data from clients when they are admitted and discharged from alcohol and other drug (AOD) treatment services and reporting this data to the Department of Alcohol and Drug Programs (ADP). The guidelines in this bulletin were developed by a collaborative workgroup named the Data/Outcomes Committee that consists of several county administrators representing the County Alcohol and Drug Program Administrators Association of California (CADPAAC), representatives of the University of California, Los Angeles' Integrated Substance Abuse Program (UCLA ISAP), and ADP staff.

DISCUSSION

Recent analyses of CalOMS-Tx data conducted by ADP and UCLA ISAP indicate a high percentage of administrative discharges are being reported to ADP. Interviews with AOD treatment providers and county staff show an inconsistent understanding of the proper use of the CalOMS-Tx discharge statuses which determine whether a discharge is an administrative discharge (no treatment outcomes collected) or a standard discharge (treatment outcomes are collected). This indicates that, for a portion of our client population, valuable client outcome data is not being collected or is being collected incorrectly.

CalOMS-Tx client outcome information collected at admission and discharge is critical to demonstrate the benefits of treatment services to decision-makers and to compete for scarce funding resources. For continuous quality improvement, our programs must be able to demonstrate that public funds are put to good use and are achieving desired client outcomes. Therefore, to be able to demonstrate AOD treatment program efficacy, it is critical that ADP, counties, and treatment providers collect complete and



DO YOUR PART TO HELP CALIFORNIA SAVE ENERGY
For energy saving tips, visit the Flex Your Power website at
<http://www.flexyourpower.ca.gov>

accurate client outcome data at admission and discharge in a consistent manner so that treatment outcomes can be measured and reported to public funding agencies.

Every treatment provider who receives funding for AOD treatment from ADP, either via a contract with a county or a direct contract with ADP, and every licensed narcotic treatment provider is required to collect CalOMS-Tx data from every client served. Treatment providers must collect CalOMS-Tx data when a client is admitted to treatment (within seven days of their first service), on the one year anniversary date of their admission (for clients in the same treatment service for one year or more), and when the client is discharged from the treatment service in which they have been participating. The one exception to this rule is when the only ADP-distributed funding a provider receives are Substance Abuse Treatment Trust Funds (SATTF) for the Substance Abuse and Crime Prevention Act (SACPA) and the services that provider offers are not narcotic treatment services. If a provider fits this description, then that provider collects and reports CalOMS-Tx data from their SACPA clients only.

Protocols for Discharging Clients

The following protocols clarify business rules for discharging clients from treatment in CalOMS-Tx.

1. A CalOMS-Tx discharge record must be submitted for every client for whom a CalOMS-Tx admission record has been submitted.
2. AOD treatment providers must schedule and conduct a discharge interview with every client. A discharge interview is either in person (face-to-face) or via telephone. This interview includes, but is not limited to, asking each of the required CalOMS-Tx standard discharge questions. Treatment providers are advised to include in each client's treatment plan a date to conduct a discharge interview. This date may be scheduled for some time prior to or on the client's planned last date of service, but may not be more than two weeks prior to the client's planned date of last service.
3. Providers should make every effort to ensure the discharge interview is a face-to-face interview. However, some clients may be unable to appear for the scheduled discharge interview, despite having made satisfactory progress in treatment. In these situations, providers are strongly encouraged to contact the client by phone to collect the CalOMS-Tx standard discharge data.
4. Administrative discharges should only be reported in the event the client cannot be located, either in person or by telephone, to answer the CalOMS-Tx questions. Such attempts to contact a client for a CalOMS-Tx discharge interview must be documented in the client's file. Providers should never guess or complete responses on behalf of an absent client for the required CalOMS-Tx discharge questions.

Key Terms Related to CalOMS-Tx Data Collection

Treatment Episode

Typically, a treatment episode is a planned series of treatment service types occurring consecutively, e.g., admission to and discharge from detoxification followed by admission to and discharge from outpatient services. However, a treatment episode may also be a single treatment service, e.g., admission to and discharge from outpatient treatment with no further AOD treatment services planned for the client. In CalOMS-Tx, episodes should be identified as follows:

- At the time of **admission** to the first treatment service (e.g. detoxification) in an episode, the provider should indicate that the admission is an "initial admission" in the "admission transaction type" field of the CalOMS-Tx admission record. "Initial admission" should also be reported for clients who will only be receiving one treatment service and will not be referred to another AOD treatment program or treatment service.
- At the time of **discharge** from the client's first treatment service, the client's discharge status should be recorded as "completed and referred" (discharge status 1). This indicates in the CalOMS system that the client successfully completed the first phase of multiple planned phases and has been referred to the next level of care. If the client has not completed the first phase and is being referred to continue the same treatment service elsewhere or to change to a different treatment service, choose either "left before completion with satisfactory progress and referred" (discharge status 3) or "left before completion with unsatisfactory progress and referred" (discharge status 5), whichever is applicable to the client's progress in treatment.
- At the time of **admission** to the next treatment service, i.e., the AOD treatment service to which the client was referred by their previous provider, the "admission transaction type" field in the CalOMS admission record should indicate "transfer/change in service."

To summarize, "transfers" are identified in the CalOMS-Tx admission record using the "admission transaction type" field and "referrals" are identified in the CalOMS-Tx discharge record using the "discharge status" field. Please note that a client must be admitted to the treatment programs within 30 days of the prior discharge in order for the service to which the client was referred to be included in the episode. If there is a break of more than 30 days between discharge from one service and admission to the next treatment service, a new episode begins.

Initial Admission

An initial admission is the first admission in a treatment episode. This type of admission may also be used for a client who will be admitted to a single treatment service; i.e. clients for whom an episode is not planned.

Transfer or Change in Service Admission

A transfer or change in service admission is reported for each subsequent treatment service in a treatment episode that follows the initial admission. Transfers follow a referral from the provider that recently discharged the client. A transfer can occur when a client moves from one level of care or service (e.g. detoxification to outpatient) to another within the same provider or between different providers (e.g. ABC Agency to Agency 123).

Referral

Referrals occur when a client is discharged from AOD treatment programs. A referral is when a client in an AOD treatment program is referred to another AOD treatment program for services or referred to a different AOD treatment service within the same provider. For CalOMS-Tx, a referral occurs when the staff at the treatment program in which the client has been participating refers the client to receive additional treatment services at the same service provider or another AOD treatment provider. A client does not have to accept the treatment provider's referral in order for it to be reported as a referral on the discharge record. In CalOMS-Tx, referrals do not include referrals to non-treatment services such as medical appointments or twelve-step programs, or other recovery support services.

Administrative Discharge

An administrative discharge occurs under one of these circumstances:

1. The client has stopped appearing for treatment services without leave from or notification to the AOD treatment program and the client cannot be located to be discharged and complete the CalOMS-Tx discharge interview. Depending on the client's progress (as determined from the client's file or the counselor's interactions with the client while they were in the program) prior to leaving the program, the provider should report either "did not complete, made satisfactory progress, not referred" (status 4), or "did not complete, made unsatisfactory progress, not referred" (status 6).
2. The client has died (status 7) prior to completing all of his/her planned AOD treatment services and thus cannot be interviewed for CalOMS-Tx discharge data collection.

3. The client has become incarcerated (status 8) prior to completing all of their planned AOD treatment services and thus cannot be interviewed for CalOMS-Tx discharge data collection.

An administrative discharge shall only be reported to CalOMS-Tx when one of the above circumstances takes place. Because the client has left the program and cannot be interviewed, the administrative discharge requires the provider to determine the last date they saw the client which is called the administrative discharge date. For example, if a client is enrolled in outpatient treatment services and has not appeared for his/her planned services within the last 30 days, then the discharge date should be the date the treatment counselor last saw the client. The provider can then use the data from the client's admission record to complete the CalOMS-Tx administrative discharge record. Detailed guidelines for determining the administrative discharge date for the different types of treatment services are provided in the *CalOMS Treatment Data Collection Guide*, available on ADP's website.

An administrative discharge is structured this way to ensure data quality; providers administratively determine the discharge date and complete a limited set of information to prevent providers from having to guess the answers to the required CalOMS-Tx discharge questions. An administrative discharge shall only be submitted when a client cannot be located to complete a CalOMS-Tx discharge interview. In these situations, accurate data on the client's condition at the time of discharge cannot be collected to enable measurement of treatment outcomes, e.g., whether a client reduced or abstained from AOD use, became employed, etc. Discharges inappropriately recorded as administrative discharges hinder ADP, county, and treatment provider's ability to report the benefits of AOD treatment services to stakeholders and decision-makers.

Standard Discharge

A standard discharge shall be reported when the client is available to be interviewed and one of these circumstances takes place:

1. The client has completed the treatment episode and is interviewed for the CalOMS-Tx discharge either via telephone or in person.
2. The client has completed a single treatment service and is interviewed for the CalOMS-Tx discharge either via telephone or in person.
3. The client has made either satisfactory or unsatisfactory progress in treatment, will be referred to another AOD treatment service or program, and is interviewed for the CalOMS-Tx discharge either via telephone or in person.

For standard discharges, providers are required to complete a full CalOMS-Tx discharge record by interviewing the client and asking all of the required CalOMS-Tx discharge questions. The date for a standard discharge is the date on which the client completes the CalOMS-Tx discharge interview or the date of last treatment service, whichever is later.

A standard discharge is used to measure treatment outcomes for reporting purposes at the county, state, and federal levels. It is very important to ask the client every CalOMS-Tx standard discharge question and report the client's response in the discharge record. This is because the outcome measures collected for a client's admission and standard discharge for CalOMS-Tx are used to measure whether the client reduced or abstained from drug use, obtained employment, remained out of the criminal justice system, etc. It is critical that counties and treatment providers collect accurate and complete client outcome data at discharge so client outcomes can be measured and reported to public funding agencies to demonstrate the benefits and efficacy of treatment services.

REFERENCES

CalOMS-Tx Data Collection Guide
CalOMS-Tx Data Compliance Standards

Refer to the *CalOMS Treatment Data Collection Guide* for detailed descriptions of data collection requirements. The *CalOMS Treatment Data Collection Guide* is on the ADP Web site (http://www.adp.ca.gov/CalOMS/pdf/CalOMS_Data_Collection_Guide.pdf).

QUESTIONS/MAINTENANCE

Counties are encouraged to conduct provider trainings on how to implement discharge codes properly and on discharge interviewing methods, e.g., strategies to successfully complete the exit interview. UCLA's Addiction Technology Transfer Center (ATTC) can be utilized by counties as a resource to train providers on discharge interview protocols. In addition, a variety of CalOMS-Tx training materials are available online via ADP's website.

For further information related to CalOMS-Tx data collection refer to the CalOMS website through ADP's website:

1. Navigate to ADP's website: <http://www.adp.ca.gov>
2. Click the green tab labeled "Data Systems" toward the top of ADP's homepage.
3. Click the "CalOMS Treatment" link, just below "Active Data Systems."

You may also contact ADP's CalOMS-Tx Help Desk by phone (toll free) at 1-877-517-3329 or at (916) 327-3010, or by e-mail at CalOMShelp@adp.ca.gov.

EXHIBITS

Exhibit A: CalOMS-TX Discharge Status Definitions and Sample Scenarios

The Data/Outcomes Committee developed sample scenarios for each CalOMS-Tx discharge status to provide further assistance in determining the appropriate discharge status for a given situation. Refer to Exhibit A: *CalOMS-TX Discharge Status Definitions and Sample Scenarios* for additional information related to use of each discharge status.

DISTRIBUTION

County Alcohol and Drug Program Administrators
Strategic Local Government Services, LLC
Director's Advisory Council

CALOMS-TX DISCHARGE STATUS DEFINITIONS AND SAMPLE SCENARIOS

The definitions of the CalOMS-Tx discharge status codes and sample scenarios for their use are provided below.

- **Completed Treatment/Recovery Plan Goals – Referred (status 1)**: This is a standard discharge status and is considered a treatment completion status. This status should be used for a client who completed an AOD treatment service and is being referred to another AOD treatment service (this includes clients referred to further AOD treatment that do not accept the referral). The client is available to complete the discharge interview either in person as planned, or by contacting the client by telephone.

Example: Jane was in a residential treatment service and has accomplished the recovery plan goals for residential treatment. Jane will be referred to an outpatient drug-free treatment program to continue treatment. When Jane was admitted to residential treatment, her treatment counselor scheduled a date for her discharge interview to take place three days before Jane's last treatment service. Jane's treatment counselor uses the last service date for the discharge date because it is the last date Jane will be seen by the counselor. The counselor then asks Jane all the required CalOMS-Tx discharge questions. The treatment counselor records Jane's responses and completes a CalOMS-Tx discharge record for submission to the county which the program has a contract with to provide AOD treatment.

Two days later, Jane is admitted to the outpatient drug-free program her residential provider referred her to. The outpatient treatment counselor indicates Jane's admission is a "transfer or change in service" and asks Jane the remaining CalOMS-Tx admission questions.

- **Completed Treatment/Recovery Plan Goals – Not Referred (status 2)**: This is a standard discharge status and is considered a treatment completion status. This status should be used for a client who completed an AOD treatment service, who is not being referred to another AOD treatment service and for a client who is finishing the last treatment service program in a treatment episode (a series of planned consecutive admissions and discharges from various treatment programs). The client is available to complete the discharge interview either in person as planned, or by contacting the client by telephone.

Example: John started a treatment episode in a detoxification program, which he completed as planned by his treatment counselor. At discharge, John was referred to a residential program by the detoxification provider (the detoxification counselor indicated his discharge status as "completed treatment recovery plan goals, referred"). Two days later, John entered the residential program (the treatment counselor entered "transfer/change in service" in the admission transaction type field for John's residential

CalOMS-Tx admission record). John completed the residential program and was referred to an outpatient program (the residential counselor indicated his discharge status was “completed treatment recovery plan goals, referred”).

John was admitted to the outpatient program one week after being discharged from the residential program (the treatment counselor entered “transfer/change in service” in the admission transaction type field for John’s outpatient CalOMS-Tx admission record). John did very well in his outpatient treatment and he decided he is ready to be discharged from his treatment episode, which began several months prior in a nearby detoxification program. John’s treatment counselor schedules a date to discharge John from his final service, the outpatient treatment, and to collect the standard CalOMS-Tx discharge information from John.

However, John did not show up for the discharge interview scheduled by his outpatient treatment provider. The following day, John’s treatment counselor called John to reschedule the discharge appointment. John indicates he does not wish to come in for the appointment but agrees to answer the CalOMS-Tx discharge questions over the phone. John’s treatment counselor asks John all of the CalOMS-Tx standard discharge questions, records John’s responses, and reports the data to the county he contracts with to provide treatment.

- **Left Before Completion with Satisfactory Progress – Referred (status 3):**

This is a standard discharge status. This status should be used for a client who is referred to another treatment program to complete either the service they have been receiving or to begin a different level of treatment. The client is available to complete the discharge interview either in person as planned, or by contacting the client by phone.

Example: Joe is enrolled in a 30-day residential treatment program. He is actively participating in the program for two weeks. However, Joe really wants to get back to work and tells his counselor he’d like to leave the residential program. Joe’s treatment counselor advises that Joe finish out the remainder of his 30 days in the residential program since he has been making good progress in his treatment.

Though the counselor advised he continue in the residential program, Joe wishes to leave the program. So, Joe’s counselor refers him to an outpatient program and schedules a time to ask Joe all the required CalOMS-Tx standard discharge questions prior to discharging him. The counselor uses the date of Joe’s interview as the standard discharge date, enters their discharge code for “left before completion with satisfactory progress, referred,” and asks Joe all the CalOMS-Tx questions.

- **Left Before Completion with Satisfactory Progress – Not Referred (status 4):** This is an administrative discharge status. This should be used for a client who made satisfactory progress in the treatment service, who did not complete the treatment service as planned, and could not be located to receive a referral for further AOD treatment or to conduct a discharge interview.

Example: James is enrolled in a residential treatment program. He was actively participating in the program for a month but left the program without notice. He has not been seen by his treatment counselor or any of the treatment staff for seven consecutive days. James' treatment counselor makes several attempts to contact him by telephone but is unable to reach him. The counselor documents the attempts made to contact James. The counselor determines that James must be administratively discharged and completes an administrative discharge record to comply with their CalOMS-Tx data reporting requirements.

James' counselor works with other treatment staff to determine the date he left the program. The counselor enters this date for the administrative discharge date then refers to James' CalOMS-Tx admission record to obtain most of the required administrative discharge information. For the "primary drug" field, James' counselor indicates "unknown" since James is unavailable to provide this data. (Note: the counselor may also use the code of the primary drug reported by James at admission.) For the "pregnant during treatment" field, James' counselor enters "no" since he is male and cannot be pregnant. James' treatment counselor then submits the administrative discharge record to the county the provider has a contract with.

- **Left Before Completion with Unsatisfactory Progress – Referred (status 5):** This is a standard discharge status. This status should be used for a client who is referred to another treatment program to complete either the service they have been receiving or to begin a different level of treatment. The client is available to complete the discharge interview either in person as planned or by contacting the client by phone.

Example: Sue began her treatment episode in a detoxification program. She completed her detoxification treatment and was referred to an intensive outpatient program by her detoxification provider. Sue was admitted to the intensive outpatient program she was referred to three days after finishing her detoxification treatment.

Sue has been in the intensive outpatient program for three weeks, but she missed several scheduled appointments. Sue's treatment provider decides that she is not making good progress and might do better in a residential treatment program. Sue's treatment provider schedules an appointment with Sue to discuss her treatment and to ask her the CalOMS-Tx standard

discharge questions. Sue completes the discharge interview and answers all the CalOMS-Tx standard discharge questions prior to being referred to a residential treatment program.

- **Left Before Completion with Unsatisfactory Progress – Not Referred (status 6)**: This is an administrative discharge status. This should be used for a client who made unsatisfactory progress in the treatment service in which they were enrolled and who did not complete the treatment service as planned. The client is unavailable to be referred for other AOD treatment or to complete the discharge interview in person or by telephone.

Example: Sharon began her treatment episode in a detoxification program. She completed her detoxification treatment and was referred to an intensive outpatient program by her detoxification provider. Sharon was admitted to the intensive outpatient program three days after finishing her detoxification treatment.

Sharon has been in the intensive outpatient program for three weeks, but she has missed several scheduled appointments. Sharon's treatment provider decides that she is not making good progress and might do better in a residential treatment program. The treatment provider schedules an appointment with Sharon to discuss her treatment and to ask Sharon the CalOMS-Tx standard discharge questions. Sharon fails to appear for the scheduled discharge interview with her counselor. Sharon's treatment counselor makes several attempts to contact her, but is unable to make contact. The counselor documents the attempts to contact Sharon to complete the CalOMS-Tx discharge interview.

Sharon's treatment counselor determines Sharon must be administratively discharged and uses the date she last saw Sharon as the administrative discharge date. The counselor then refers to Sharon's CalOMS-Tx admission record to obtain most of the required administrative discharge information. For the "primary drug" field, Sharon's counselor enters the primary drug code reported by Sharon at admission. (Note: the counselor may also use the code for unknown for primary drug under this circumstance.) For the "pregnant during treatment" field, Sharon's counselor enters "unknown" or "do not know" since Sharon is unavailable to answer this question. Sharon's treatment counselor then submits the administrative discharge record to the county the provider has a contract with.

- **Death (status 7)**: This is an administrative discharge status. This should be used for a client who dies while enrolled in a treatment program. Because the client cannot be asked the CalOMS-Tx standard discharge questions, the treatment

counselor follows the same procedures used to complete an administrative discharge for clients who leave the program prior to finishing their treatment.

- **Incarceration (status 8):** This is an administrative discharge status. This should be used for a client who becomes incarcerated while enrolled in a treatment program. Because the client cannot be asked the CalOMS-Tx standard discharge questions, the treatment counselor follows the same procedures used to complete an administrative discharge for clients who leave the program prior to finishing their treatment.

ADDITIONAL SCENARIOS RELATED TO DISCHARGING TREATMENT CLIENTS

What discharge status should be used if the program closes?

1. The client is finished with the planned treatment but the program will be closing prior to the scheduled date for the client's discharge interview. (The provider may conduct the discharge interview earlier than originally scheduled to obtain the CalOMS-Tx discharge data from the clients affected by program closure.) If the client is finished with their services and will not be referred for further treatment, use discharge status 2. If the client is finished with the service and will be referred to begin another type of service, enter discharge status 1.
2. The client was making satisfactory progress in treatment and will be continuing their treatment service at a new provider. Use discharge status 3. The new provider will need to enter their code for "transfer or change in service" when they admit this client to their program.
3. The client was not making satisfactory progress in treatment and will be referred to another provider for a different level of care. Use discharge status 5. The new provider will need to enter their code for "transfer or change in service" when they admit this client to their program.
4. The client was making satisfactory progress in treatment, but stopped appearing for treatment prior to program closure and prior to their planned discharge date. The program cannot locate the client to collect the CalOMS-Tx discharge data. Use discharge status 4.
5. The client was making unsatisfactory progress in treatment and stopped appearing for treatment prior to program closure and prior to their planned discharge date. The program cannot locate the client to collect the CalOMS-Tx discharge data. Use discharge status 6.

What discharge status should be used if the funding source to pay for the client changes?

In general, a client should not be discharged from treatment due to a funding change. For example, it may happen that a client comes in and does not know if they are eligible for Drug Medi-Cal (DMC). The client is admitted to the program, and, in the field for the client's response to the question "Are you a Medi-Cal beneficiary," the response "don't know" is entered. The provider submits the client's admission record to their county. Sometime later the provider determines the client is eligible for treatment under DMC. When this happens, the provider must resubmit the client's original admission record with the "Are you a Medi-Cal beneficiary?" field updated to indicate "yes".

The one exception to this general rule is SACPA clients. For SACPA clients ADP must be able to determine the beginning of treatment and the end of treatment provided with SACPA funding. The following is an example of how to handle a client's CalOMS-Tx data in the event they become SACPA-eligible after their CalOMS-Tx admission has already been submitted.

Lee was admitted to outpatient treatment on March 10, 2008. At admission he was awaiting sentencing under SACPA. His provider submitted Lee's admission data to the county on March 15, 2008. On March 21, 2008, Lee became eligible for SACPA and the program began funding his treatment with SACPA funds. Lee's provider must submit a discharge for the admission that was submitted for Lee.

Lee's provider, using the same guidelines as described in the attached ADP Bulletin, determines the appropriate discharge status (should be either status 3 or status 5) for the admission submitted for Lee on March 15, 2008. The provider then collects the CalOMS-Tx discharge data from Lee. The provider submits the discharge to the county. Next, the provider creates a new admission for Lee, and enters March 21, 2008 for the admission date. In the "admission transaction type" field, the provider marks "transfer or change in service." The provider also enters the appropriate SACPA referral (SACPA probation or SACPA parole) for Lee in the "referral source" field of the admission record. Once the provider supplied data related to Lee's new admission is entered, the provider uses Lee's discharge record to complete the client outcome fields of the admission record, since the provider collected this information from Lee very recently (within five days).

For more detailed instructions, refer to the CalOMS Treatment Data Collection Guide available on ADP's website.