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| **Record Management** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| Client\_ID | Unique identifier assigned to client upon enrollment into the grant | Client\_ID | Numeric | 6 digits. IDs that start with 1 are clients from RVRC; IDs that start with 2 are clients from Clay |
| GrantID | SAMHSA Grant ID | GrantID | String | N/A |
| SiteID | Site ID | SiteID | String | N/A |
| InterviewType\_07*\** | Interview type | InterviewType\_07 | Numeric | 1 = Baseline  2 = 3 Month Reassessment  3 = 6 Month Reassessment  4 = Clinical Discharge |
| ReassessmentNumber\_07 | Reassessment number | ReassessmentNumber\_07 | Numeric | 0301 = 1st 3 Month Reassessment  0302 = 2nd 3 Month Reassessment  0303 = 3rd 3 Month Reassessment  0304 = 4th 3 Month Reassessment  0305 = 5th 3 Month Reassessment  0306 = 6th 3 Month Reassessment  0307 = 7th 3 Month Reassessment  0308 = 8th 3 Month Reassessment  0309 = 9th 3 Month Reassessment  0310 = 10th 3 Month Reassessment  0311 = 11th 3 Month Reassessment  0312 = 12th 3 Month Reassessment  0313 = 13th 3 Month Reassessment  0314 = 14th 3 Month Reassessment  0315 = 15th 3 Month Reassessment  0316 = 16th 3 Month Reassessment  0317 = 17th 3 Month Reassessment  0318 = 18th 3 Month Reassessment  0319 = 19th 3 Month Reassessment  0320 = 20th 3 Month Reassessment  0321 = 21st 3 Month Reassessment  0322 = 22nd 3 Month Reassessment  0323 = 23rd 3 Month Reassessment |
| Assessment\* | Assessment type | Assessment | Numeric | 600 = Baseline Assessment  301 = 3 Month Reassessment  302 = 6 Month Reassessment  303 = 9 Month Reassessment  304 = 12 Month Reassessment |
| ConductedInterview | Was the interview conducted? | ConductedInterview | Numeric | 0 = No  1 = Yes |
| WhyNotConducted | Why not? | WhyNotConducted | Numeric | 1 = Not able to obtain consent from proxy  2 = Consumer was impaired or unable to provide consent  3 = Consumer refused this interview only  4 = Consumer was not reached for interview  5 = Consumer refused all interviews |
| FirstReceivedServiceDate | Month & year that client first received services under the grant | FirstReceivedServiceDate | Date | MM/YYYY |
| FFY*\** | Federal Fiscal Year | FFY | Numeric | 2002 - Current Year + 1 |
| Quarter*\** | Quarter | Quarter | Numeric | 1 = October – December  2 = January – March  3 = April – June  4 = July – September |
| Year*\** | Year | Year | Numeric | N/A |
| ObservationDate\* | Date GPRA interview was conducted | ObservationDate | Date | MM/DD/YYYY |
| RecordStatus | Record status | RecordStatus | Numeric | 0 = Active  1 = Inactive |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Behavioral Health Diagnosis** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| DiagnosisOne*\** | Substance use disorder diagnosis one | DiagnosisOne | Numeric | See Appendix |
| DiagnosisOneCategory | Substance use disorder diagnosis one category | DiagnosisOneCategory | Numeric | 1 = Primary  2 = Secondary  3 = Tertiary |
| DiagnosisTwo*\** | Substance use disorder diagnosis two | DiagnosisTwo | Numeric | See Appendix |
| DiagnosisTwoCategory | Substance use disorder diagnosis two category | DiagnosisTwoCategory | Numeric | 1 = Primary  2 = Secondary  3 = Tertiary |
| DiagnosisThree*\** | Substance use disorder diagnosis three | DiagnosisThree | Numeric | See Appendix |
| DiagnosisThreeCategory | Substance use disorder diagnosis three category | DiagnosisThreeCategory | Numeric | 1 = Primary  2 = Secondary  3 = Tertiary |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Demographic Data** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| Gender | Client’s gender | Gender | Numeric | 1 = Male  2 = Female  3 = Transgender  4 = Other |
| GenderSpec | Other specific gender | GenderSpec | Text | N/A |
| gender\_binary | Client’s gender (M/F only) | Gender | Numeric | 1 = Male  2 = Female |
| HispanicLatino | Is the client Hispanic/Latino? | HispanicLatino | Numeric | 0 = No  1 = Yes |
| RaceEth | Race/ethnicity according to federal guidelines | RaceWhite  RaceBlack  RaceAsian  RaceNativeHawaiian  RaceAlaskaNative  RaceAmericanIndian  HispanicLatino | Numeric | 1 = White, non-Hispanic  2 = Black, non-Hispanic  3 = Hispanic  4 = Asian/PI, non-Hispanic  5 = Other, non-Hispanic, including Multiracial |
| Ethnic | Hispanic ethnic origin | EthnicCentralAmerican  EthnicCuban  EthnicDominican  EthnicMexican  EthnicPuertoRican  EthnicSouthAmerican  EthnicOther | Numeric | 1 = Central American  2 = Cuban  3 = Dominican  4 = Mexican  5 = Puerto Rican  6 = South American  7 = Other |
| Age\* | Age in years at time of observation | ObservationDate - DOB | Numeric | Years, 18-99 |
| DOB\_New | Client’s month and year of birth | DOB | Numeric | Month and year of birth |
| Agegroup | Categorized age of client population | Agegroup | Numeric | 2 = Age 10 to 12 years old  3 = Age 13 to 15 years old  4 = Age 16 to 25 years old  5 = Age 26 to 34 years old  6 = Age 35 to 44 years old  7 = Age 45 to 54 years old  8 = Age 55 to 64 years old  9 = Age 65 to 74 years old  10 = Age 75 to 84 years old  11 = Age 85 to 94 years old  12 = Age 95 years or older |
| Age\_cat | Age of client population sorted into categories | Agegroup | Numeric | 0 = Less than 35  1 = 35 to 44  2 = 45 to 54  3 = 55 and Up |
| SexualIdentity | Client’s sexual identity | SexualIdentity | Numeric | 1 = Heterosexual  2 = Lesbian or gay  3 = Bisexual  4 = Other |
| SexualIdentityOther | Other sexual identity (specified) | SexualIdentityOther | Text | N/A |

| **Functioning\*** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| OverallHealth*\** | Client’s self-reported health | OverallHealth | Numeric | 1 = Excellent  2 = Very Good  3 = Good  4 = Fair  5 = Poor |
| CapableManagingHealthCareNeeds*\** | How well the client feels they are able to manage their health care needs | CapableManagingHealthCareNeeds | Numeric | 1 = On my own most of the time  2 = On my own some of the time and with support from others some of the time  3 = With support from others most of the time  4 = Rarely or never |
| Healthy*\** | The client is considered to be healthy; health is excellent, very good, or good | OverallHealth | Numeric | 0 = No  1 = Yes |
| FunctioningPercep*\** | How would the client rate their level of functioning? | HandlingDailyLife  ControlLife  DealWithCrisis  GetsAlongWithFamily  SocialSituations  SchoolOrWork  FunctioningHousing  Symptoms | Numeric | Mean = the sum of the valid responses, divided by the count of items with valid responses.  1-5 |
| PosFunctioning*\** | Client has an acceptable level of functioning (positive) | FunctioningPercep | Numeric | 0 = No  1 = Yes |
| K6*\** | Level of psychological distress experienced by the client | Nervous  Hopeless  Restless  Depressed  EverythingEffort  Worthless | Numeric | 0-24 |
| NoSeriousPsychDistress*\** | Client has not experienced any serious psychological distress (positive) | K6 | Numeric | 0 = No  1 = Yes |
| PsychologicalEmotionalProblems*\** | How much the client has been bothered by psychological or emotional problems in the past 30 days | PsychologicalEmotionalProblems | Numeric | 1 = Not at all  2 = Slightly  3 = Moderately  4 = Considerably  5 = Extremely |
| PsychEmoProb*\** | How much the client has been bothered by psychological or emotional problems in the past 30 days | PsychologicalEmotionalProblems | Numeric | 0 = Not at all, Slightly  1 = Moderately, considerably, extremely |
| LifeQuality*\** | How the client would rate their quality of life during the past 4 weeks | LifeQuality | Numeric | 1 = Very Poor  2 = Poor  3 = Neither Good nor Poor  4 = Good  5 = Very Good |
| EnoughEnergyForEverydayLife*\** | How often in the last 4 weeks the client has had enough energy for everyday life | EnoughEnergyForEverydayLife | Numeric | 1 = Not at All  2 = A Little  3 = Moderately  4 = Mostly  5 = Completely |
| PerformDailyActivitiesSatisfaction*\** | How satisfied is the client with their ability to perform daily activities over the past 4 weeks? | PerformDailyActivitiesSatisfaction | Numeric | 1 = Very Dissatisfied  2 = Dissatisfied  3 = Neither Satisfied nor Dissatisfied  4 = Satisfied  5 = Very Satisfied |
| HealthSatisfaction*\** | How satisfied is the client with their health over the past 4 weeks? | HealthSatisfaction | Numeric | 1 = Very Dissatisfied  2 = Dissatisfied  3 = Neither Satisfied nor Dissatisfied  4 = Satisfied  5 = Very Satisfied |
| SelfSatisfaction*\** | How satisfied has the client been with themselves over the past 4 weeks? | SelfSatisfaction | Numeric | 1 = Very Dissatisfied  2 = Dissatisfied  3 = Neither Satisfied nor Dissatisfied  4 = Satisfied  5 = Very Satisfied |
| RelationshipSatisfaction\* | How satisfied has the client been with their personal relationships over the past 4 weeks? | RelationshipSatisfaction | Numeric | 1 = Very Dissatisfied  2 = Dissatisfied  3 = Neither Satisfied nor Dissatisfied  4 = Satisfied  5 = Very Satisfied |
| Tobacco\_Use\* | Client’s tobacco use in the past 30 days | Tobacco\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Alcohol\_Use\* | Client’s alcohol use in the past 30 days | Alcohol\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Al\_Use\_5orMore\_Male\* | Number of times male clients had 5 or more drinks in a day | Al\_Use\_5orMore\_Male | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Al\_Use\_4orMore\_Female\* | Number of times female clients had 4 or more drinks in a day | Al\_Use\_4orMore\_Female | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Cannabis\_Use\* | Client’s cannabis use in the past 30 days | Cannabis\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Cocaine\_Use\* | Client’s cocaine use in the past 30 days | Cocaine\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Stimulants\_Use\* | Client’s stimulant use in the past 30 days | Stimulants\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Meth\_Use\* | Client’s meth use in the past 30 days | Meth\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Inhalants\_Use\* | Client’s inhalant use in the past 30 days | Inhalants\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Sedatives\_Use\* | Client’s sedative use in the past 30 days | Sedatives\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Hallucinogens\_Use\* | Client’s hallucinogen use in the past 30 days | Hallucinogens\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| StreetOpioids\_Use\* | Client’s street opioid (heroin) use in the past 30 days | StreetOpioids\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| RxOpioid\_Use\* | Client’s prescription opioid use in the past 30 days | RxOpioid\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| Other\_Use\* | Client’s use of any other substance in the past 30 days | Other\_Use | Numeric | 1 = Never  2 = Once or Twice  3 = Weekly  4 = Daily or Almost Daily |
| IllegalSubstanceUse\* | Sum of frequency of use of all substances in the past 30 days | Cannabis\_Use  Cocaine\_Use  Stimulants\_Use  Meth\_Use  Inhalants\_Use  Sedatives\_Use  Hallucinogens\_Use  StreetOpioids\_Use  RxOpioids\_Use  Other\_Use | Numeric | 0-30 |
| NeverUseSub30Days\* | Client never used any substance in the past 30 days | IllegalSubstanceUse | Numeric | 0 = No  1 = Yes |
| NeverUseTobacco30Days\* | Client never used any tobacco products in the past 30 days | Tobacco\_Use | Numeric | 0 = No  1 = Yes |
| NotBingeDrinking30Days\* | Did not binge drink in the past 30 days | Alcohol\_Use  Al\_Use\_5orMore\_Male  Al\_Use\_4orMore\_NotMale | Numeric | 0 = No  1 = Yes |
| GAFScore*\** | What was the client’s GAF score? | GAFScore | Numeric | 0-100 |
| GAFDate\_New*\** | What was the date of the client’s GAF? | GAFDate\_New | Date | MM/DD/YYYY |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Military and Family Deployment** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| EverServed | Has the client served in the military? | EverServed | Numeric | 0 = No  1 = Yes |
| ActiveDuty\_Self | Is the client actively serving in the military? | ActiveDuty\_Self | Numeric | 0 = No  1 = Yes |
| ActiveDuty\_Else | Is anyone in the client’s family actively serving in the military? | ActiveDuty\_Else | Numeric | 0 = No  1 = Yes |

| **Violence and Trauma** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| ViolenceTrauma | Has the client experienced any violence or trauma in any setting? | ViolenceTrauma | Numeric | 0 = No  1 = Yes |
| PTSDSymp | Number of PTSD symptoms experienced by the client | VT\_NightmaresThoughts  VT\_NotThinkAboutIt  VT\_OnGuard  VT\_NumbDetached | Numeric | 0-4 |
| PTSD | Has the client experienced symptoms of PTSD? | PTSDSymp | Numeric | 0 = No  1 = Yes |
| PhysicallyHurt | In the past 30 days, how often have you been hit, kicked, slapped, or otherwise physically hurt? | PhysicallyHurt | Numeric | 1 = Never  4 = Once  2 = A few times  3 = More than a few times  \*Note that values are not coded in the rank order. |
| PhysViolence\* | Client experienced physical violence in the past 30 days | PhysicallyHurt | Numeric | 0 = No  1 = Yes |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Stability in Housing** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| NightsAwayFromHome\* | Number of nights client spent away from home in past 30 days | NightsHomeless  NightsHospitalHMC  NightsDetox  NightsJail | Numeric | 0-30 |
| RetainedComm\* | Retained in the community (positive) | NightsAwayFromHome | Numeric | 0 = No  1 = Yes |
| StableHousing\* | Stable place to live in the community (positive) | Housing | Numeric | 0 = No  1 = Yes |
| Homeless\* | Has the client been homeless in the past 30 days? | NightsHomeless | Numeric | 0 = No  1 = Yes |
| TimesER\* | How many times in the past 30 days did the client go to the ER? | TimesER | Numeric | 0-30 |
| Housing\* | In the past 30 days, where did the client live most of the time? | Housing | Numeric | 1 = Owned or Rented House, Apartment, Trailer, Room  2 = Someone Else’s House, Apartment, Trailer, Room  3 = Homeless  4 = Group Home  5 = Adult Foster Care  6 = Transitional Living Facility  9 = Hospital (Medical)  10 = Hospital (Psychiatric)  11 = Correctional Facility  12 = Nursing Home  13 = VA Hospital  14 = Veterans Home  15 = Military Base  18 = Other Housed (Specify)  19 = Detox/Inpatient or Residential Substance Abuse Treatment Facility |
| OtherHousingSpec\* | Other housing specify | OtherHousingSpec | Text | N/A |
| hous\_cat\* | Housing categories condensed | Housing | Numeric | 1 = Own or rent  2 = Live with someone else  3 = Homeless  4 = Detox facility  5 = Institutional setting |
| LivingConditionsSatisfaction\* | How satisfied is the client with their living situation in the last 4 weeks? | LivingConditionsSatisfaction | Numeric | 1 = Very Dissatisfied  2 = Dissatisfied  3 = Neither Satisfied nor Dissatisfied  4 = Satisfied  5 = Very Satisfied |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Education and Employment** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| Enrolled\* | Is the client currently enrolled full-time or part-time in school or job training program? | Enrolled | Numeric | 0 = Not Enrolled  1 = Enrolled, Full Time  2 = Enrolled, Part Time  3 = Other (Specify) |
| OtherEnrolledSpec\* | Other enrollment specify | OtherEnrolledSpec | Text | N/A |
| Education\* | What is the highest level of education attained by the client? | Education | Numeric | 11 = Less than 12th Grade  12 = 12th Grade/High School Diploma/GED  13 = Voc/Tech Diploma  14 = Some College or University  15 = Bachelor’s Degree  16 = Graduate Work/Graduate Degree |
| educ\_cat\* | Highest educational attainment of the client recoded to condense categories | Education | Numeric | 1 = Less than 12th Grade  2 = 12th Grade/High School Diploma/Equivalent (GED)  3 = Voc/Tech Diploma, Some College or University  4 = Bachelor’s Degree or higher |
| Employment\* | Is the client currently employed? | Employment | Numeric | 1 = Employed Full Time  2 = Employed Part Time  3 = Unemployed, Looking for Work  4 = Unemployed, Disabled  5 = Unemployed, Volunteer Work  6 = Unemployed, Retired  7 = Unemployed, Not Looking for Work  8 = Other (Specify) |
| OtherEmploymentSpec | Specify other type of employment | OtherEmploymentSpec | Text | N/A |
| employ\* | Dichotomization of employment | Employment | Numeric | 1 = Employed full or part time  2 = Unemployed |
| EmploymentType\_07 | [If employed], Is your employment competitive or sheltered? | EmploymentType\_07 | Numeric | 0 = No  1 = Yes |
| Employed\_MinWageOrAbove\* | Is the client being paid at or above the minimum wage? | Employed\_MinWageOrAbove | Numeric | 0 = No  1 = Yes |
| Employed\_PaidDirectly\* | Is the client paid directly by their employer? | Employed\_PaidDirectly | Numeric | 0 = No  1 = Yes |
| Employed\_AnyoneApplied\* | Could anyone have applied for the client’s job? | Employed\_AnyoneApplied | Numeric | 0 = No  1 = Yes |
| EnoughMoneyForNeeds\* | Has the client had enough money for their needs over the past 4 weeks? | EnoughMoneyForNeeds | Numeric | 1 = Not at All  2 = A Little  3 = Moderately  4 = Mostly  5 = Completely |
| CurrentWorkorSchool\* | Attending school regularly and/or currently employed/retired | Enrolled | Numeric | 0 = No  1 = Yes |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Crime and Criminal Justice Status** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| NumTimesArrested\* | In the past 30 days, how many times has the client been arrested? | NumTimesArrested | Numeric | 0-30 |
| NoCriminalJust\* | The client has not been involved with the criminal justice system in the past 30 days | NumTimesArrested | Numeric | 0 = No  1 = Yes |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Perception of Care** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| CarePercep\* | Client’s perception of care | Recover  Complain  Rights  Responsibility  SideEffects  SharingTreatmentInformation  SensitiveToCulture  InformationNeeded ConsumerRunPrograms  ComfortableAskingQuestions  TreatmentGoals  LikeServices  Choices  RecommendAgency | Numeric | Mean = the sum of the valid responses, divided by the count of items with valid responses.  1-5 |
| WhoAdministered\* | Indicate who administered Section F | WhoAdministered | Numeric | 1 = Administrative Staff  2 = Care Coordinator  3 = Case Manager  4 = Clinician Providing Direct Services  5 = Clinician Not Providing Services  6 = Consumer Peer  7 = Data Collector  8 = Evaluator  9 = Family Advocate  10 = Research Assistant Staff  11 = Self-Administered  12 = Other (Specify) |
| WhoAdministered\_OtherSpec | Specify who administered the GPRA | WhoAdministered\_OtherSpec | Text | N/A |
| PosCare\* | Acceptable level of perception of care | PosCare | Numeric | 0 = No  1 = Yes |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Social Connectedness** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| Friendships\* | I am happy with the friendships I have | Friendships | Numeric | 1 = Strongly Disagree  2 = Disagree  3 = Undecided  4 = Agree  5 = Strongly Agree |
| EnjoyPeople\* | I have people with whom I can do enjoyable things | EnjoyPeople | Numeric | 1 = Strongly Disagree  2 = Disagree  3 = Undecided  4 = Agree  5 = Strongly Agree |
| BelongInCommunity\* | I feel I belong in my community | BelongInCommunity | Numeric | 1 = Strongly Disagree  2 = Disagree  3 = Undecided  4 = Agree  5 = Strongly Agree |
| SupportFromFamily\* | In a crisis, I would have the support from my family and friends | SupportFromFamily | Numeric | 1 = Strongly Disagree  2 = Disagree  3 = Undecided  4 = Agree  5 = Strongly Agree |
| SupportiveFamilyFriends\* | I have family and friends that are supportive of my recovery | SupportiveFamilyFriends | Numeric | 1 = Strongly Disagree  2 = Disagree  3 = Undecided  4 = Agree  5 = Strongly Agree |
| GenerallyAccomplishedGoal\* | I generally accomplish what I set out to do | GenerallyAccomplishedGoal | Numeric | 1 = Strongly Disagree  2 = Disagree  3 = Undecided  4 = Agree  5 = Strongly Agree |
| SocialConnect\* | Client’s level of social connectedness | Friendships  EnjoyPeople  BelongInCommunity  SupportFromFamily | Numeric | Mean = the sum of the valid responses, divided by the count of items with valid responses.  1-5 |
| PosSocialConnect\* | Acceptable level of social connectedness (positive) | SocialConnect | Numeric | 0 = No  1 = Yes |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Section H: Program Specific Questions** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions /Expected Range |
| BPressure\_s\* | Systolic blood pressure | BPressure\_s | Numeric | 11-320 |
| BPressure\_d\* | Diastolic blood pressure | BPressure\_d | Numeric | 11-200 |
| BP\_ABR\* | At risk for high blood pressure | BP\_ABR | Numeric | 0 = Not at risk  1 = At risk |
| BP\* | Blood pressure categorized | BP | Numeric | 0 = Normal  1 = Elevated  2 = High Blood Pressure Stage 1  3 = High Blood Pressure Stage 2 |
| Weight\* | Weight in kilograms | Weight | Numeric | 0-455 |
| Height\* | Height in cm | Height | Numeric | 0-250 |
| BMI\* | Body Mass Index | BMI | Numeric | 0-100 |
| BMI\_ABR\* | At risk based on BMI | BMI\_ABR | Numeric | 0 = Not at risk  1 = At risk |
| BMI\_cat\* | BMI categorized | BMI\_cat | Numeric | 0 = Underweight  1 = Normal  2 = Overweight  3 = Obese |
| WaistCircumference\* | Waist circumference in cm | WaistCircumference | Numeric | 0-200 |
| WC\* | At risk based on waist circumference | WC | Numeric | 0 = Not at risk  1 = At risk |
| BreathCO\* | Breath Carbon Monoxide (ppm) | BreathCO | Numeric | 0-300 |
| BCO\_ABR\* | At risk based on breath carbon monoxide | BCO\_ABR | Numeric | 0 = Not at risk  1 = At risk |
| BCO\* | Breath carbon monoxide | BCO | Numeric | 0 = <7  1 = 7-10  2 = >10 |
| EightHour\_Fast\* | Did the client fast for 8 hours before providing a blood sample? | EightHour\_Fast | Numeric | 0 = No  1 = Yes |
| DateBloodDrawn\* | Date of blood draw | DateBloodDrawn | String | MM/DD/YYYY |
| Plasma\_Gluc\* | Plasma glucose | Plasma\_Gluc | Numeric | 1-1500 |
| Glucose\* | At risk based on blood glucose | Glucose | Numeric | 0 = Not at risk  1 = At risk |
| A1c\* | A1c levels | HgbA1c | Numeric | 0.1-25.0 |
| A1c\_ABR\* | At risk based on A1c levels | HgbA1c | Numeric | 0 = Not at risk  1 = At risk |
| Lipid\_TotChol\* | Total cholesterol | Lipid\_TotChol | Numeric | 1-500 |
| Lipid\_HDL\* | HDL cholesterol | Lipid\_HDL | Numeric | 1-150 |
| HDL\* | At risk based on HDL levels | HDL | Numeric | 0 = Not at risk  1 = At risk |
| Lipid\_LDL\* | LDL cholesterol | Lipid\_LDL | Numeric | 1-300 |
| LDL\* | At risk based on LDL levels | LDL | Numeric | 0 = Not at risk  1 = At risk |
| Lipid\_Tri\* | Triglycerides | Lipid\_Tri | Numeric | 1-999 |
| Tri\* | At risk based on triglyceride levels | Tri | Numeric | 0 = Not at risk  1 = At risk |
| DateBloodDrawn\_New\* | Date of blood draw | DateBloodDrawn | Date | N/A |
| BeenToEmergencyRoomIntegerCount\* | How many times in the past 30 days have you been to the emergency room? | BeenToEmergencyRoomIntegerCount | Numeric | 0-30 |
| BeenHospitalizedIntegerCount\* | In the past 30 days, how many times have you been hospitalized overnight for a physical healthcare problem? | BeenHospitalizedIntegerCount | Numeric | 0-30 |
| CurrentSamhsaGrantFunding | Please indicate which type of funding source(s) was (were)/will be used to pay for the services provided to this consumer since their last interview:  Current SAMHSA grant funding | CurrentSamhsaGrantFunding | Numeric | 0 = No  1 = Yes |
| OtherFederalGrantFunding | Please indicate which type of funding source(s) was (were)/will be used to pay for the services provided to this consumer since their last interview:  Other federal grant funding | OtherFederalGrantFunding | Numeric | 0 = No  1 = Yes |
| StateFunding | Please indicate which type of funding source(s) was (were)/will be used to pay for the services provided to this consumer since their last interview:  State funding | StateFunding | Numeric | 0 = No  1 = Yes |
| ConsumerPrivateInsurance | Please indicate which type of funding source(s) was (were)/will be used to pay for the services provided to this consumer since their last interview:  Consumer’s private insurance | ConsumerPrivateInsurance | Numeric | 0 = No  1 = Yes |
| MedicaidMedicare | Please indicate which type of funding source(s) was (were)/will be used to pay for the services provided to this consumer since their last interview:  Medicaid/Medicare | MedicaidMedicare | Numeric | 0 = No  1 = Yes |
| OtherResponse | Please indicate which type of funding source(s) was (were)/will be used to pay for the services provided to this consumer since their last interview:  Other (specify) | OtherResponse | Numeric | 0 = No  1 = Yes |
| OtherResponseSpecify | Other (specify) | OtherResponseSpecify | Text | N/A |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Reassessment Status** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| TimeSinceEnrollment | Number of days since client was enrolled (for calculating 6-month follow-up) | TimeSinceEnrollment | Numeric | Number of days  0-999 |
| TimeSinceEnrollment2 | Number of days since client was enrolled (for calculating 12-month follow-up) | TimeSinceEnrollment2 | Numeric | Number of days  0-999 |
| Reassessment6 | Client 6-month reassessment status | Reassessment6 | Numeric | 0 = Not yet in reassessment window  1 = More than 30 days left  2 = Less than 30 days left  3 = Reassessment window closed |
| WindowOpen6 | Date 6-month reassessment window opens | WindowOpen6 | Date | MM/DD/YYYY |
| ReassessmentDue6 | 6-month reassessment due date | ReassessmentDue6 | Date | MM/DD/YYYY |
| LastDay6 | Last day for reassessment for 6-month reassessment | LastDay6 | Date | MM/DD/YYYY |
| DaysSince6WindowOpen | Days since 6-month window opened | DaysSince6WindowOpen | Numeric | 0-60 |
| DaysLeft6 | Number of days left in reassessment window | DaysLeft6 | Numeric | 0-60 |
| Reassessment12 | Client 12-month reassessment status | Reassessment12 | Numeric | 0 = Not yet in reassessment window  1 = More than 30 days left  2 = Less than 30 days left  3 = Reassessment window closed |
| WindowOpen12 | Date 12-month reassessment window opens | WindowOpen12 | Date | MM/DD/YYYY |
| ReassessmentDue12 | 12-month reassessment due date | ReassessmentDue12 | Date | MM/DD/YYYY |
| LastDay12 | Last day for reassessment for 12-month reassessment | LastDay12 | Date | MM/DD/YYYY |
| DaysSince12WindowOpen | Days since 6-month window opened | DaysSince12WindowOpen | Numeric | 0-60 |
| DaysLeft12 | Number of days left in reassessment window | DaysLeft12 | Numeric | 0-60 |
| ReassessmentStatus\_07 | What is the reassessment status of the consumer? | ReassessmentStatus\_07 | Numeric | 11 = Completed interview within specified window  12 = Completed interview outside specified window  21 = REFUSED interview  31 = No contact within 90 days of last encounter  32 = Other (Specify) |
| OtherReassessment\_07 | Other reassessment status specify response | OtherReassessment\_07 | Text | N/A |
| NoContact90Days | Has any of the grant staff had contact with the client in the past 90 days? | NoContact90Days | Numeric | 0 = No  1 = Yes |
| StillReceivingServices\* | Is the client still receiving grant services? | StillReceivingServices | Numeric | 0 = No  1 = Yes |
| PrimaryLast\* | Indicator of each last matching case as primary | PrimaryLast | Numeric | 0 = Duplicate case  1 = Primary case |
| SecondFollowUp\* | Indicates if client received one or two follow-ups | SecondFollowUp | Numeric | 0 = Only one follow-up  1 = First of two follow ups  2 = Second of two follow ups |
| source01\* | Case source is follow up | source01 | Numeric | N/A |
| today | Today’s date | Today | Date | MM/DD/YYYY |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Clinical Discharge Status** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions |
| DischargeDate | Date client was discharged | DischargeDate | Date | MM/DD/YYYY |
| DischargeStatus | What is the client’s discharge status? | DischargeStatus | Numeric | 1 = Mutually agreed cessation of treatment  2 = Death  3 = No contact within 90 days of last encounter  4 = Clinically referred out  5 = Other (Specify)  6 = Withdrew from/refused treatment |
| OtherDischargeStatus | Other discharge status specify response | OtherDischargeStatus | Text | N/A |
| Discharged | Number of times the client was discharged | Discharged | Numeric | 1 = Once  2 = Twice |
| Re\_admitted | Client was discharged and readmitted into the grant | Re\_admitted | Numeric | 0 = No  1 = Yes |

| **Services Received** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| Svc\_Screening\* | Screening since last NOMs interview? | Svc\_Screening | Numeric | 0 = No  1 = Yes |
| Svc\_Assessment\* | Assessment since last NOMs interview? | Svc\_Assessment | Numeric | 0 = No  1 = Yes |
| Svc\_Treatment\* | Treatment since last NOMs interview? | Svc\_Treatment | Numeric | 0 = No  1 = Yes |
| Svc\_Psychopharmacological\* | Psychopharmacological services since last NOMs interview? | Svc\_Psychopharmacological | Numeric | 0 = No  1 = Yes |
| Svc\_MentalHealth\* | Mental Health services since last NOMs interview? | Svc\_MentalHealth | Numeric | 0 = No  1 = Yes |
| Svc\_MentalHealthFreq\* | Number of times received mental health services | Svc\_MentalHealthFreq | Numeric | 0-99 |
| Svc\_MH\_FreqPeriod\* | Frequency period for number of times mental health services were received | Svc\_MH\_FreqPeriod | Numeric | 1 = Day  2 = Week  3 = Month  4 = Year |
| Svc\_CoOccuring\* | Co-Occurring services since last NOMs interview? | Svc\_CoOccuring | Numeric | 0 = No  1 = Yes |
| Svc\_CaseManagement\* | Case Management since last NOMs interview? | Svc\_CaseManagement | Numeric | 0 = No  1 = Yes |
| Svc\_TraumaSpecific\* | Trauma specific services since last NOMs interview? | Svc\_TraumaSpecific | Numeric | 0 = No  1 = Yes |
| Svc\_ReferredCore\* | Was the client referred to any outside provider for any of the above core services? | Svc\_ReferredCore | Numeric | 0 = No  1 = Yes |
| Svc\_MedicalCare\* | Medical care services since last NOMs interview? | Svc\_MedicalCare | Numeric | 0 = No  1 = Yes |
| Svc\_Employment\* | Employment services since last NOMs interview? | Svc\_Employment | Numeric | 0 = No  1 = Yes |
| Svc\_Family\* | Family services since last NOMs interview? | Svc\_Family | Numeric | 0 = No  1 = Yes |
| Svc\_ChildCare\* | Child care services since last NOMs interview? | Svc\_ChildCare | Numeric | 0 = No  1 = Yes |
| Svc\_Transportation\* | Transportation services since last NOMs interview? | Svc\_Transportation | Numeric | 0 = No  1 = Yes |
| Svc\_Education\* | Education services since last NOMs interview? | Svc\_Education | Numeric | 0 = No  1 = Yes |
| Svc\_Housing\* | Housing services since last NOMs interview? | Svc\_Housing | Numeric | 0 = No  1 = Yes |
| Svc\_SocialRecreational\* | Social recreational activities since last NOMs interview? | Svc\_SocialRecreational | Numeric | 0 = No  1 = Yes |
| Svc\_ConsumerOperated\* | Consumer operated services since last NOMs interview? | Svc\_ConsumerOperated | Numeric | 0 = No  1 = Yes |
| Svc\_HIVTesting\* | HIV testing since last NOMs interview? | Svc\_HIVTesting | Numeric | 0 = No  1 = Yes |
| Svc\_ReferredSupport\* | Was the client referred to any outside provider for any of the above support services? | Svc\_ReferredSupport | Numeric | 0 = No  1 = Yes |
| LastServiceDate\_New\* | Last date of services | LastServiceDate\_New | Date | N/A |

*\*There are three versions of this variable: 1.00 = baseline, 2.00 = 6-month follow-up, 3.00 = 12-month follow-up*

| **Mental Health Screening Scores & Additional Information from Enrollment & Tracking Forms** | | | | |
| --- | --- | --- | --- | --- |
| Recoded Variable | Description | Source Variable | Variable Type | Value Descriptions/Expected Range |
| T\_GAD7 | Client score from the Generalized Anxiety Disorder 7-item scale | T\_GAD7 | Numeric | 0-21 |
| T\_GAD7\_cat | GAD-7 scores categorized by severity | T\_GAD7 | Numeric | 0 = Minimal Anxiety  1 = Mild Anxiety  2 = Moderate Anxiety  3 = Severe Anxiety |
| T-PHQ9 | Client score from the Patient Health Questionnaire-9 | T-PHQ9 | Numeric | 0-27 |
| T\_PHQ9\_cat | PHQ-9 scores categorized by severity | T-PHQ9 | Numeric | 0 = Minimal Depression  1 = Mild Depression  2 = Moderate Depression  3 = Moderately Severe Depression  4 = Severe Depression |
| T\_ModifiedMini | Client score from the Modified Mini Screen | T\_ModifiedMini | Numeric | 0-22 |
| T\_MM | Modified mini screen scores dichotomized by severity | T\_ModifiedMini | Numeric | 0 = Unlikely presence of a psychiatric disorder  1 = Likely presence of a psychiatric disorder |
| T\_PCPTSD | Client score from the PC-PTSD screener | T\_PCPTSD | Numeric | 0-5 |
| T\_PTSD | PC-PTSD scores dichotomized by severity | T-PCPTSD | Numeric | 0 = No PTSD  1 = PTSD |
| T\_MI | Any mental illness diagnosis | T\_MI | Numeric | 0 = No  1 = Yes |
| T\_SMI | Any severe mental illness diagnosis | T\_SMI | Numeric | 0 = No  1 = Yes |
| T\_Schiz | Schizophrenia diagnosis | T\_Schiz | Numeric | 0 = No  1 = Yes |
| T\_Bipolar | Bipolar diagnosis | T\_Bipolar | Numeric | 0 = No  1 = Yes |
| T\_MajDep | Major Depression diagnosis | T\_MajDep | Numeric | 0 = No  1 = Yes |
| T\_Other | Other mental illness diagnosis | T\_Other | Numeric | 0 = No  1 = Yes |
| T\_OtherType | Other mental illness diagnosis specified | T\_OtherType | Text | N/A |
| T\_Multiple\_SMI | Multiple SMI diagnoses | T\_Schiz  T\_Bipolar  T\_MajDep  T\_Other | Numeric | Quantifies the number of severe mental illness diagnoses for each client.  0-4 |
| T\_CrimJustice | Involved in the criminal justice system | T\_CrimJustice | Numeric | 0 = No  1 = Yes |
| T\_CJType1 | Type of criminal justice involvement | T\_CJType1 | Numeric | 0 = Parolee  1 = Probation  2 = Drug Court |
| T\_SupportHousing | Is client living in a supportive housing program? | T\_SupportHousing | Numeric | 0 = No  1 = Yes |
| T\_SocialRehabProg | Is client involved in a social rehabilitation program? | T\_SocialRehabProg | Numeric | 0 = No  1 = Yes |
| AdditionalComments | Any additional comments regarding the clients situation | AdditionalComments | Numeric | N/A |
| EnrollmentForm | Has an enrollment form been completed for this client? | EnrollmentForm | Numeric | 0 = No  1 = Yes |

# **Appendix – Diagnosis Categories**

1 = F10.10 – Alcohol use disorder, uncomplicated, mild

2 = F10.11 – Alcohol use disorder, mild, in remission

3 = F10.20 – Alcohol use disorder, uncomplicated, moderate/severe

4 = F10.21 – Alcohol use disorder, moderate/severe, in remission

5 = F10.9 – Alcohol use, unspecified

6 = F11.10 – Opioid use disorder, uncomplicated, mild

7 = F11.11 – Opioid use disorder, mild, in remission

8 = F11.20 – Opioid use disorder, uncomplicated, moderate/severe

9 = F11.21 – Opioid use disorder, moderate/severe, in remission

10 = F11.9 – Opioid use, unspecified

11 = F12.10 – Cannabis use disorder, uncomplicated, mild

12 = F12.11 – Cannabis use disorder, mild, in remission

13 = F12.20 – Cannabis use disorder, uncomplicated, moderate/severe

14 = F12.21 – Cannabis use disorder, moderate/severe, in remission

15 = F12.9 – Cannabis use, unspecified

16 = F13.10 – Sedative, hypnotic, or anxiolytic use disorder, uncomplicated, mild

17 = F13.11 – Sedative, hypnotic, or anxiolytic use disorder, mild, in remission

18 = F13.20 – Sedative, hypnotic, or anxiolytic use disorder, uncomplicated, moderate/severe

19 = F13.21 – Sedative, hypnotic, or anxiolytic use disorder, moderate/severe, in remission

20 = F13.9 – Sedative, hypnotic, or anxiolytic use, unspecified

21 = F14.10 – Cocaine use disorder, uncomplicated, mild

22 = F14.11 – Cocaine use disorder, mild, in remission

23 = F14.20 – Cocaine use disorder, uncomplicated, moderate/severe

24 = F14.21 – Cocaine use disorder, moderate/severe, in remission

25 = F14.9 – Cocaine use, unspecified

26 = F15.10 – Other stimulant use disorder, uncomplicated, mild

27 = F15.11 – Other stimulant use disorder, mild, in remission

28 = F15.20 – Other stimulant use disorder, uncomplicated, moderate/severe

29 = F15.21 – Other stimulant use disorder, moderate/severe, in remission

30 = F15.9 – Other stimulant use, unspecified

31 = F16.10 – Hallucinogen use disorder, uncomplicated, mild

32 = F16.11 – Hallucinogen use disorder, mild, in remission

33 = F16.20 – Hallucinogen use disorder, uncomplicated, moderate/severe

34 = F16.21 – Hallucinogen use disorder, moderate/severe, in remission

35 = F16.9 – Hallucinogen use, unspecified

36 = F18.10 – Inhalant use disorder, uncomplicated, mild

37 = F18.11 – Inhalant use disorder, mild, in remission

38 = F18.20 – Inhalant use disorder, uncomplicated, moderate/severe

39 = F18.21 – Inhalant use disorder, moderate/severe, in remission

40 = F18.9 – Inhalant use, unspecified

41 = F19.10 – Other psychoactive substance use disorder, uncomplicated, mild

42 = F19.11 – Other psychoactive substance use disorder, in remission

43 = F19.20 – Other psychoactive substance use disorder, uncomplicated, moderate/severe

44 = F19.21 – Other psychoactive substance use disorder, moderate/severe, in remission

45 = F19.9 – Other psychoactive substance use, unspecified

46 = F17.20 – Tobacco use disorder, mild/moderate/severe

47 = F17.21 – Tobacco use disorder, mild/moderate/severe, in remission

48 = F20 – Schizophrenia

49 = F21 – Schizotypal disorder

50 = F22 – Delusional disorder

51 = F23 – Brief psychotic disorder

52 = F24 – Shared psychotic disorder

53 = F25 – Schizoaffective disorders

54 = F28 – Other psychotic disorder not due to a substance or known physiological condition

55 = F29 – Unspecified psychosis not due to a substance or known physiological condition

56 = F30 – Manic episode

57 = F31 – Bipolar disorder

58 = F32 – Major depressive disorder, single episode

59 = F33 – Major depressive disorder, recurrent

60 = F34 – Persistent mood [affective] disorders

61 = F39 – Unspecified mood [affective] disorder

62 = F40-F48 – Anxiety, dissociative, stress-related, somatoform and other nonpsychotic mental disorders

63 = F50 – Eating disorders

64 = F51 – Sleep disorders not due to a substance or known physiological condition

65 = F60.2 – Antisocial personality disorder

66 = F60.3 – Borderline personality disorder

67 = F60.0, F60.1, F60.4-F69 – Other personality disorders

68 = F70-F79 – Intellectual disabilities

69 = F80-F89 – Pervasive and specific developmental disorders

70 = F90 – Attention-deficit hyperactivity disorders

71 = F91 – Conduct disorders

72 = F93 – Emotional disorders with onset specific to childhood

73 = F94 – Disorders of social functioning with onset specific to childhood or adolescence

74 = F95 – Tic disorder

75 = F98 – Other behavioral and emotional disorders with onset usually occurring in childhood and adolescence

76 = F99 – Unspecified mental disorder