QUARTERLY REPORT DATA SUMMARY**

OPERATIONAL DEFINITIONS/DATA SUBMISSION FORM

	REFERRAL DATA		
Item Number	**Variable**	**Definition**	**Data**
1	# of Referrals	This is the total number of written/typed, call, fax, email, etc. referrals (i.e. requests for service) received regardless of whether or not they resulted in service delivery. These are counted at the time of the first contact with REACH. Because some may not result in service delivery, a full intake process is not needed to count as a referral.	Total Referrals=
2	Type of Referral *Crisis + Non-Crisis= total referrals*	This designates a referral as Crisis or Non-crisis. Referrals designated as crisis must adhere to the definition of crisis stabilization as defined in the program standards as "direct intervention (and may include one-to-one supervision) to persons with ID/DD who are experiencing serious psychiatric or behavioral problems which jeopardize their current community living situation... The goal is to provide temporary intensive services and supports to avert emergency psychiatric hospitalization or institutional admission or to prevent other out-of-home placement." Crisis referrals require a face to face response according to the Urban/Rural average response rate. Non-crisis referrals are those that do not require an immediate crisis response.	Crisis Referrals= Non Crisis Referrals=

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3	Referral Source *Total Referral source = # of referrals*	This is the breakdown of the total referral pool by source of referral: **Adult/Children:** Emergency Services, Case Manager (CSB or DD), Family/Individual, Hospital, Other MH/DD Provider (therapist, day treatment, CSU), Law Enforcement (Police/Corrections/Court—includes probation and parole), Other REACH Program, Physician (PCP/Pediatrician, etc.), School, DSS	Emergency services = School = Family/Individual = Hospital = Case Manager (CSB or DD) = Other Mental Health Provider = DD Provider = Police/Corrections/Court = Physician = Other REACH Program = Other (please explain) = DSS =
4	Internal Referrals	This is the total number of referrals received from other REACH programs that were accepted and **resulted in service provision**. If this is an active client in another region, it does not count as part of the total in item 1 above. This should be broken down for data reporting between individuals who were **transferred** because they moved or **temporary** (utilizing a CTH bed out of Region) *Count children moving to adults as transfers	Transferred= Temporary=
5	Presenting Problem *Total presenting problems = # of referrals*	This is the initial and primary reason the referral is being made for REACH services. Please select the primary presenting problem only for this report. Primary presenting problem is determined by the REACH clinician completing the intake. Primary presenting problem should total number of referrals. Primary Reasons in column to the right: ***if other- please include explanation in data submission for each other presenting problem	Aggression = Self-Injury = Family Needs Assistance = Suicidal Ideation/behavior = Increased MH symptoms = Loss of functioning = Property destruction = Risk of housing loss = Elopement = Hospital stepdown = Other (please explain) =
6	Referral Timeframe	This is the day of the week and the time of the day the referral was received. Time of day should be expressed	M-F= Weekends/Holidays=

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			7am-2:59pm= 3pm-10:59pm= 11pm=6:59am=
	Referral Timeframe= # of referrals	as the "clock" time that the referral is received. Referrals received by mail or fax should be counted at the time they come into the office. Data should be reported as follows: M-F and Weekends/Holiday (if a Holiday falls on M-F report under Weekends/Holiday not under M-F) and then also by Time Frames: 7am -2:59pm, 3pm-10:59pm, 11pm-6:59am Timeframes should total to M-F + Weekends/Holidays	***you can fill this in, submit your call logs or tell me the data store is correct and I can get the data from there [either way verify that the numbers add up (M-F + Weekends/Holidays= 7:00am=6:59am= #of referrals)]

DEMOGRAPHIC DATA			
Item Number	**Variable**	**Definition**	**Data**
7	Gender *= #of referrals*	Self-explanatory	Male: Female: Transgender:
8	ID, DD, Both, None *= #of referrals*	Number of individuals with just an ID Diagnosis Number of individuals with just a DD Diagnosis Number of individuals with both an ID and DD Diagnosis Number of individuals with none	ID= DD= Both= None=

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		CRISIS RESPONSE	
Item Number	**Variable**	**Definition**	**Data**
9	Total # of Calls = *10 + 11 + 12*	Total Calls= All calls received on the crisis line and non-crisis line(s).	Total Calls=
10	# of **Crisis** Calls =*# crisis assessment locations*	This is the total number of calls received related to a current crisis as well as unplanned re-assessment of a current crisis, that require an in person response. There may be rare exceptions when a face to face response is not indicated. In such cases, an explanation should be provided along with the data submitted. Crisis: "direct intervention (and may include one-to-one supervision) to persons with ID/DD who are experiencing serious psychiatric or behavioral problems which jeopardize their current community living situation... The goal is to provide temporary intensive services and supports to avert emergency psychiatric hospitalization or institutional admission or to prevent other out-of-home placement."	Crisis Calls= Total face to face crisis calls = ** if the number of crisis calls and face to face crisis calls do not match, provide explanation for discrepancy below: ***Note number of crisis assessments completed not directly as a result of crisis call

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10-a	# of **Crisis** calls involving law enforcement	This is the total number of crisis calls requiring an in person response that also involved law enforcement.	Total crisis calls involving law enforcement=
			***if in data store, tell us it is in the data store**
11	# of non-crisis calls	This is the total number of calls received to assist an individual or support system in addressing a particular situation. It includes calls for check in and support, direction to coping skills and coaching implementation, basic conflict resolution. These calls allow for early intervention to the crisis to reinforce coping skills, coach the support system and reduce the potential for the situation to rise to a crisis level. These calls can also be an element of an individual's treatment plan.	Non- Crisis Calls=
12	# of Calls for Information/Brief Consultation	This is the total number of calls received to respond to basic questions about the REACH program, provide information about accessing the larger service system, clarifying diagnostic expectations, etc. Please note that these calls may not be tied to a specific person, but are still counted.	Information/Brief Consult=
13	Crisis Assessment Location	This refers to the location where the face to face assessment took place. It is the total number of face to face assessments	Individual Home/Family Home= Hospital/Emergency Room= Emergency Services/CSB=

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		completed broken down by location where the assessment took place. Please note that this refers to the place where the assessment *began.*	School= Residential Provider= Other (please provide explanation)= Police Station = Day Program = ***If there was one where a response was contraindicated please explain.
	Crisis Assessment Location= # of crisis calls		

14	Response Times
	
	= total number of calls for each intervals must equal # of crisis calls
		Per individual crisis call, this is the amount of time, expressed in minutes, which elapsed between the time a crisis call is received (when a message is left when the call recorded) by the REACH staff and their arrival to the location where the crisis assessment will take place. Each face to face response must have a corresponding response time.
		
		Include the total number of calls for each time interval (number of calls 0-30 min, number of calls 31-60 min, etc.) as well as the average response time in minutes of all calls for the quarter **OR INDICATE INFORMATION IN DATA STORE IS CORRECT**.
			****Attach call logs/Attach call response time for each call/or Tell me the data store is correct
			
			Number of calls for each time interval:
			  Response Interval: 0-30 =
			  Response Interval: 31-60 =
			  Response Interval: 61-90 =
			  Response Interval: 91-120 =
			  Response Interval: 120+ =
			
			Please explain reason for any calls which are outside acceptable response time (60 min urban, 120 min rural):
			
			Average response time in minutes =

15	Crisis Assessment Outcome *=# of crisis calls*	This is a subset of the total number of mobile crisis responses broken out by type of outcome. These include: retained placement; retained placement with mobile supports; psychiatric hospitalization in a state facility; psychiatric hospitalization in a private hospital; admitted to CTH; referred for medical treatment; alternative community crisis supports; jail and other. Please note that this should be tabulated per crisis event. Please provide an explanation for each use of the "other" category. "CTH/CSU no beds/Hospitalized" refers to	State Psych hospital = Private Psych hospital = Retain setting = Retain Setting w/ REACH = CTH: Alternate CSU: CTH/CSU no beds/Hospitalized = Medical Admission: Jail: Alternate community setting: Other (please explain) =

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		the number of people psychiatrically hospitalized who could have been diverted to a CTH or CSU if a bed was available in the system.	

<table>
<tr><td colspan="4" align="center">*Crisis Therapeutic Home*</td></tr>
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Item Number	Variable	Definition	Data
16	CTH Waitlist: Number of people and Number Bed Days	Waitlist rules: -If the person is hospitalized and seeking admission, they are added to the waitlist when REACH determines they are clinically appropriate to admit to the CTH -If the person is in crisis and needs the CTH but accesses REACH community crisis supports, the person goes on the waitlist until either a bed is available at the CTH or the person is no longer in need of the bed -Do not include individuals that are seeking prevention stays on the waitlist -The waitlist does not constitute situations in which the program is holding a bed for someone For each person who not admitted to the CTH when an admission was deemed to be appropriate indicate the number of days they waited for a bed to be available ad what services were offered until a bed became available. Example: JN- 3days- 10/10-10/13-mobile supports TA- 2 days-11/21-11/23-Hospitalized/Stepped Down	****Attach list utilizing outlined format in example
16-a	Capacity/Bed Utilization	Capacity as it relates to the Crisis Therapeutic House means that every bed in the home is occupied by a guest. Capacity does not take into consideration the clinical	Only complete for this quarter: July= Aug= Sept=

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		population of the CTH at the time the admission is requested. For each month report of the number of days in the month how many days all six beds in the home were full. Example: 25 of 31 Oct, 15 of 30 Nov, and 10 of 30 Dec. Bed utilization is computed by noting the total number of beds that were used for the quarter based on the total number of beds that were available. If there was a bed that was closed (e.g. issue with the bedroom that needed repair), do not count that bed in "total beds available" for the days that it was offline.	Oct= Nov= Dec= Jan= Feb= March= April= May= June= Denote bed utilization for the quarter (total beds used/ total beds available):
17	# CTH Admissions: Crisis Stabilization	This is the total number of **NEW** admissions for this quarter to the CTH that were designated crisis stabilization (emergency admissions) during this quarter.	Stab Admits= Any no disposition=
18	# CTH Admissions: Planned Prevention	This is the total number of **NEW** admissions for this quarter to the CTH that were designated crisis prevention or planned admissions.	Prevention Admits= Any no disposition=
19	#CTH Admission: Stepdown	This is the total number of **NEW** admissions for this quarter to the CTH that were designated stepdown. Stepdowns are those individuals stepping down to CTH from institutional care including MH Hospital, Training Center or Jail.	Stepdown Admits= Any no disposition=
20	LOS-Crisis Stabilization	This is the average number of days of length of stay for individuals admitted (or readmitted) and discharged during this quarter under a crisis stabilization designation into the CTH. These individuals	LOS Stab=

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		must have admitted and discharged in this quarter.	
21	LOS- Crisis Prevention	This is the average number of days of length of stay for individuals admitted (or readmitted) and discharged during this quarter under a crisis prevention designation into the CTH. These individuals must have admitted and discharged in this quarter.	LOS Prevention=
22	LOS-Stepdown	This is the average number of days of length of stay for individuals admitted (or readmitted) and discharged during this quarter under a stepdown from jail, hospital, or training center designation into the CTH. These individuals must have admitted and discharged in this quarter.	LOS Stepdown=
23	TOTAL LOS-Carryover	This is the total number of days from admission to discharge for carryovers from a previous quarter (of any type of admission). ONLY INCLUDE TOTAL LOS FOR PEOPLE THAT CARRIED OVER FROM A PREVIOUS QUARTER AND DISCHARGED THIS QUARTER AND BREAK IT DOWN BY PERSON. Please include the original type of admission as well. For example: Person 1: 146 days (crisis stabilization) Person 2: 344 days (stepdown)	Person 1: Person 2: Person 3: Person 4: Person 5: Person 6:
24	Service Provision	This is the total number of <u>new and readmits to the CTH this quarter</u> individuals who received various REACH services broken down by service type. These include: Comprehensive Evaluation (was the individual assessed to come into the program or during their time in the program); Consultation (did you provider post stay follow up with the system of care); Crisis Education and Prevention Plan (was	Note: Anyone who was admitted during a crisis should have received a comprehensive evaluation/assessment(billing requirement), All people should have follow up regardless of service, CEPP may or may not be created/updated depending on circumstances, and training must occur anytime a CEPP was updated or developed

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		the plan updated or developed during this stay); Provider training (did you provide training to the system during the stay or at discharge). Individuals who have received more than one service should be counted in each relevant category.	
24-a	Service Provision: Crisis Stabilization	This is the total number of <u>new and readmits to this quarter individuals</u>, admitted to the CTH on an emergency basis broken down by service type as explained above	Comp Eval= Consult= CEPP= Training=
24-b	Service Provision: Crisis Prevention	This is the total number of <u>new and readmits to this quarter individuals</u>, admitted to the CTH on a prevention stay broken down by service type as explained above	Comp Eval= Consult= CEPP= Training=
24-c	Service Provision: Stepdown	This is the total number of <u>new and readmits to this quarter individuals</u>, admitted to the CTH on a stepdown broken down by service type as explained above	Comp Eval= Consult= CEPP= Training=
25	# CTH Re- Admissions: Crisis Stabilization	This is the total number of individuals **<u>re-admitted to the CTH for this quarter</u>** that received crisis stabilization services, were discharged, and were readmitted to the program during the quarter but more than 24 hours later. In other words, they remained in a community setting for at least a full day.	Readmits Stab=
26	# CTH Re-Admissions: Planned Prevention/Stepdown	This is the total number of individuals **<u>re-admitted to the CTH for this quarter</u>** that received planned prevention respite services, were discharged, and were readmitted to the program during the quarter but more than 24 hours later. In other words, they remained in a community setting for at least a full day.	Readmits Prevention= Readmits Stepdown=
27	Outcome of CTH Admissions	This is defined as the number of <u>new admits and readmits to this quarter individuals</u>, as	**New admits:** Psych Hospital =

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		well as carryover individuals from previous <u>quarters</u> who were discharged from the CTH who fell into various placement categories at the time of release. These include: retained previous placement; psychiatric hospitalization; alternative group home placement; new sponsored residential; jail; and other. Please provide an explanation for any designations of "other".	Medical hospital = Retained setting = New residential setting = Jail = Other = CTH = **Re-Admits:** Psych Hospital = Medical hospital = Retained setting = New residential setting = Jail = Other = CTH = **Carryover from previous quarter individuals:** Psych Hospital = Medical hospital = Retained setting = New residential setting = Jail = Other = CTH =
*Mobile Crisis Supports*
28	Mobile Support Crisis Cases	This is the total number of <u>*new to this quarter individuals*</u> who received community based, in-home crisis services as an immediate result of a crisis event and creation of a crisis services plan. Follow up visits to target preventing future crises should not be included in this number.	# of Mobile Support Crisis Cases=
29	Service Provision: Mobile Support Crisis	This is the total number of <u>*new to this quarter and readmits to this quarter*</u> individuals, admitted to <u>Mobile Support Crisis Services</u>, who received various REACH services broken down by service type.	Comp Eval= Consult= CEPP= Training=

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		These include: Comprehensive Evaluation (was the individual assessed to come into the program or during their time in the program); Consultation (did you provider post stay follow up with the system of care); Crisis Education and Prevention Plan (was the plan updated or developed during this stay); Provider training (did you provide training to the system of care during the service or at time of discharge from the service). Individuals who have received more than one service should be counted in each relevant category.	
30	Mobile Support Crisis: Readmission	This is the total number of _re-admit individuals to this quarter_ who **again** received another round of mobile crisis supports in the same quarter as the immediate result of a crisis event, after having been discharged from a previous round of mobile crisis supports for at least 24 hours.	# of Mobile Support Crisis Readmits=
31	Mobile Support Crisis: Hours Provided	This is the total number of community based/in home mobile support crisis service hours provided. This is expressed as the sum total of all hours provided and not as an average per individual.	Hours=
32	Days Provided	This is the total number of days in which not less than 1 hour of community based mobile support crisis was provided across all individuals served. These are not calendar days. It is the sum of days provided for each individual who received the service.	Days=
33	Range	This is the overall range in the number of days provided across all recipients of mobile crisis supports. The range is expressed as the lowest number of days provided (per	Range=

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		case) to the highest number of days provided (per case).	
34	Outcome of Mobile Crisis Support : New admissions	This is defined as the number of specific outcomes that result from a mobile crisis service being implemented for **<u>new to this quarter and readmits to this quarter admissions, as well as individuals who have carried over from previous quarters</u>**. These include: retained placement; psychiatric hospitalization; admitted to CTH; referred for medical treatment; alternative residential setting; and other. Please provide an explanation for any designations of "other".	**<u>New admits:</u>** Psychiatric hospital = Retained placement = Alternative residential = Medical treatment = Admitted to CTH Other (Please explain)= **<u>Re-admits:</u>** Psychiatric hospital = Retained placement = Alternative residential = Medical treatment = Admitted to CTH Other (Please explain)= **<u>Carryover from previous quarter individuals:</u>** Psychiatric hospital = Retained placement = Alternative residential = Medical treatment = Admitted to CTH Other (Please explain)=
35	Mobile Support Prevention Cases	This is the total number of <u>individuals</u> who received **face to face** community based, in-home REACH services, <u>that do not fit into the category of "Mobile Supports Crisis Cases", item 28.</u> These individuals may be those that were referred in a non-crisis situation, those that stepped down from mobile support crisis, or those that access face to face community based in home services not immediately following a crisis situation (e.g. person elects to engage with REACH two weeks after a crisis call and REACH response occurred). Individuals in this category may be those that are utilizing	# of Mobile Support Prevention Cases=

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		REACH as a means to prevent future crisis and/or work towards long term stabilization once mobile support crisis services have ceased. This can be inclusive of individuals that were new to mobile support prevention, those that carried over from previous quarter(s), and re-admits.	
36	Prevention Cases: Non Face to Face	This is the total number of individuals who only received prevention services that were not delivered face to face (e.g. services consisted only of communication via email, telephone calls, telehealth, etc.). If an individual received mobile support prevention face to face AND mobile support non face to face, they are only counted in #35 above.	# of Prevention Cases Non Face to Face=
37	Prevention Services Hours	This is the total number of hours during the quarter that direct services were provided to an individual to maintain clinical and system stability. It includes phone interventions, in home follow up, additional family/provider training, attendance at team meetings, treatment planning, etc.	Prevention Hours=
38	Mobile Support Prevention Cases: Outcomes	This is defined as the final known outcome during the quarter for individuals that have received mobile support prevention services. Outcomes include: retained placement; psychiatric hospitalization; admitted to CTH; referred for medical treatment; alternative residential setting; mobile support crisis, mobile support prevention (this means they stayed in mobile support prevention at the end of the quarter), and other. Please provide an explanation for any designations of "other".	Psychiatric hospital = Retained placement = Alternative residential = Medical treatment = Admitted to CTH = Other (Please explain)=
ADMINISTRATIVE			

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39	Law Enforcement Trained	This is the total number of law enforcement personnel trained during the quarter.	LEO=
40	CM/Support Coordinator Trained	This is the total of ID/DD/MH Case Managers/Support Coordinators trained	CM/SC=
41	ID/DD Providers Trained	This is the number of ID/DD Providers trained.	Provider=
42	ES Personnel Trained	This is the total number of Emergency Services staff trained.	ES=
43	Other Trainings	This is the total number of additional persons trained by REACH. It includes family, hospital staff, etc. and can include any training topics offered.	Family= Hospital= Other (Provide Explanation)=
44	Number Referrals Hospitalized *N for elements 44 and 45 should be equal to each other*	For referrals received and accepted for services during the quarter under review, how many individuals were psychiatrically hospitalized?	Previously opened and closed= Referred and refused= Brand new/first referral=
45	Post hospital discharge placement (new referrals, referred and refused, and previously opened and closed) *N for elements 44 and 45 should be equal to each other*	For the group above who received inpatient psychiatric care, where did they reside after discharge? Consider: resume previous placement; continued hospitalization; alternative group home placement; intensive medical, alternative sponsored residential; and other. Please note that maintained placement takes into account any type of residential setting. ***This includes new referrals, referred and refused, and previously opened and closed.	Retained setting = Retain setting with REACH = Alternative residential setting = Continued hospitalization = Jail = Medical hospitalization= Other (Please explain) =
46	Number of Active Cases Hospitalized *N for elements 46 and 47 should be equal to each other*	For all, active on-going cases during the quarter under review, how many individuals were psychiatrically hospitalized? Please note that this number excludes those in Item 44 counted as "new referrals".	Active Cases Hospitalized
47	Post Discharge Placement (active Cases) *N for elements 46 and 47 should be equal to each other*	For the group who received inpatient psychiatric care (as above), where did they reside after discharge? Consider: resume previous placement; continued hospitalization; alternative group home	Retained setting= Retain setting with REACH = Alternative residential setting= Continued hospitalization= Jail=

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		placement; sponsored residential; intensive medical, family; and other. Please note that maintained placement takes into account any type of residential setting. Noting sponsored residential or family indicates that this is a new setting for the person.	Medical hospitalization= Other (Please explain)=

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