

GUIDELINES FOR INITIAL REPORTING BY LOCAL GOVERNMENTAL UNITS (LGUs) ON ASSISTED OUTPATIENT TREATMENT (AOT)

General Requirements

LGUs will be asked to provide the OMH Program Coordinators with the information on AOT recipients specifically outlined in the statute (court orders, treatment plans, Service providers, petition activity, changes in status, compliance information, etc.), as well as with several additional categories of information, principally:

Identifying information and disposition on all individuals referred for investigation for AOT – This will require the LGUs to log all such referrals and document the results of the investigations, beginning on November 8, 1999.

Population descriptors (e.g., demographics, life circumstances, risk assessment, GAF) that parallel the outcome measures developed for SNPs, to be used in the evaluation of the AOT Program – This information will begin to be collected as soon as possible after an individual receives a court order for AOT. The protocols for this data collection effort are presently being designed and will be provided to LGUs at a later date.

Information related to the medication grant program – The medication grant program becomes effective April 1, 2000. This program and the protocols for the related data collection effort are presently being designed and will be provided to LGUs at a later date.

At least initially, the information flow will be largely a hard copy/manual process. Efforts will be made to accommodate the data exchange formats of LGUs that have or are developing their own automated data systems.

LGUs will initially be required to submit information at 4 key points in the AOT process:

Case Initiation – This weekly report is to include identifying information on everyone investigated for AOT, including the disposition of the investigation, and identifying information on everyone for whom the DCS is initiating the petition. (It will not be necessary to submit a case initiation report when the petition is filed by someone other than the DCS, without a preceding investigation by the DCS.)

Court Order – As required by the statute, specific information on AOT court orders must be provided to the OMH Program Coordinator within 3 days of the issuance of the order (this includes order renewals and modifications, and material changes to the treatment plan, as well as initial AOT orders).

Periodic Update – The statute requires quarterly reports to the Program Coordinator on the status of AOT recipients and the functioning of the AOT Program. On a periodic basis, LGUs will receive report summaries from the AOT data system, and will be asked to update the reports for status and service changes not covered by court order changes.

Significant Event – LGUs will be asked to report immediately to the Program Coordinator any actions taken to address serious non-compliance with court-ordered treatment or any serious violent incidents involving individuals subject to AOT court orders. This report is in addition to the existing procedures for incident reporting, and does not supplant that system.

Report Timeframes, Contents and Formats

Case Initiation

Frequency: Weekly

Format: Individual Case Report or Report Log (Forms provided) *Content:*

Identifying information, investigation information and petition information on all individuals referred to the DCS for investigation and/or for whom the DCS is initiating a petition *Transmittal*

Method: Mail, FAX

Instructions:

Counties may choose the format for reporting case initiation from the two approaches provided – the Individual Case Report or the Report Log. The Individual Case Report is to be submitted to the OMH Program Coordinator within one week of either the disposition of the investigation or the filing of the petition. The Report Log is to be submitted to the OMH Program Coordinator on a weekly basis, With additions and status changes for the week highlighted. LGUs are not required to file a case initiation report when someone other than the DCS is Serving as the petitioner, and there has not been a preceding investigation by the DCS. In these cases, the legal notifications from the petitioner and the court will function as the case initiation documents. However, the LGU may choose to log and report on these cases if they come to the attention of the DCS.

2. Court Order

Frequency: Within 3 days of issuance of a court order or dismissal of the AOT petition *Format* Court Order Cover Sheet (Form provided); Copies of relevant court documents attached

Content: Copy of court order; copy of court-ordered written treatment plan; copy of the original petition and physician's affidavit forms (if prepared by or available from the LGU); copy of any intake/investigation documentation prepared by the LGU; service provider and care coordinator information; dates for service initiation; housing status of individuals receiving AOT *Transmittal* *Method:* Mail, post-marked by the third day after the issuance of the court order

Instructions:

This report must be filed for all court orders, including AOT order renewals, modifications, and material changes to the treatment plan. The Court Order Cover Sheet must also be filed (without any attached court order documents) in cases where the court dismisses the AOT petition.

3. Periodic Update

Frequency: Negotiated between Program Coordinator and LGU; cannot be less often than quarterly *Format:* Program Coordinator may provide LGU with printout from data base and request update of all relevant data fields *Content:* Focus on status and service changes not covered by court order changes, e.g., changes in housing status, changes in service providers or provider information, changes in case manager assignments *Transmittal Method:* Mail, FAX

4. Significant Event

Frequency: Within 24 hours of a significant action in response to non-compliance or other significant incident involving violence or criminal justice system involvement *Format:* Arranged between Program Coordinator and LGU *Content:* **For reports of non-compliance** – Date, name of reporter, relationship of reporter to subject (e.g., case manager, Director of AOT

Program, treating physician), treatment/service with which non-compliant, resulting action (e.g., service plan change, transport for evaluation, hospitalization, etc.) **For other significant incidents** – Date, name of reporter, relationship of reporter to subject, description of the incident, resulting action *Transmittal Method:* Telephone, FAX

Recipient Identifying Information – Provide as much of this information as is available.

Last Name:_____ First
Name:_____ Middle Initial:_____
Date of Birth:_____ Gender:_____
SSN:_____ State I.D. #:_____ C#:_____
Medicaid #:_____

Investigation Information – Complete if the case was initiated by a referral for an investigation.

Date of
Referral:_____ Name
of Referring Party:_____
Relationship of Referring Party to Subject of Investigation:_____
Date of Investigation
Concluded:_____ Result of
Investigation: [] Individual ineligible for AOT and/or no further action taken [] Alternative to
AOT pursued (Attach additional sheets describing the alternative approach) [] AOT Petition
pursued (Also complete the "Petition Information" section below)

*******Petition Information** –

Complete if the case was initiated directly by a petition, or if the end result of the investigation
was the filing of a petition. Date Petition Initiated:_____ Petitioner
Category: []DCS []Hospital Director []Roommate []Family Member []Residential
Provider []Psychiatrist []Parole/Probation []Social Service Official

ASSISTED OUTPATIENT TREATMENT PROGRAM QUARTERLY REPORT DEFINITIONS

CHANGE IN STATUS: Change in status means any occurrence that would generate a Significant Event Report such as; noncompliance; missing; removal or other pick up order; violent; hospitalized; incarcerated...etc.

MATERIAL CHANGE: Material change means a category of service in the court ordered treatment plan that was subsequently added or deleted by the court.

CATEGORY OF SERVICE: Category of service means the types of services ordered by the court, such as; case management; medication; housing; partial/day treatment; individual or group therapy; alcohol or substance abuse services; testing for compliance with medications or for presence of drugs or alcohol; financial management; vocational; educational...etc.

LIVING ARRANGEMENT: Examples of living arrangements would include, but are not limited to, the following:

- 1) private residence alone
- 2) private residence w/spouse or domestic partner
- 3) private residence w/parent, child or other family
- 4) mental health supported housing (or SRO)
- 5) mental health housing support program (congregate support or service enriched SRO)
- 6) mental health apartment treatment program
- 7) mental health congregate treatment program
- 8) mental health crisis residence
- 9) mental health Family Care
- 10) state operated community residence
- 11) children and youth residential (FBT, RTF, CR, TFH, Crises)
- 12) inpatient, general hospital or private psychiatric hospital
- 13) inpatient of state psychiatric center
- 14) DOH adult home
- 15) drug or alcohol abuse residence or inpatient setting
- 16) correctional facility
- 17) homeless shelter or emergency housing
- 18) homeless – streets or parks
- 19) homeless – drop-in center or other undomiciled

**ASSISTED OUTPATIENT TREATMENT PROGRAM
QUARTERLY REPORT
Reporting Period:**

Instructions:

Answer all questions.

1. List by **name** all individuals in your AOT Program during the reporting period, then include the following information for each person named:
 - a) change in status
 - b) material changes
 - c) changes in case manager
 - d) living arrangements
2. Give the **percentage** of AOT petitions that have been granted by the court (*since the inception of Kendra's Law*):
3. Give a description of the **categories of services** which have been ordered by the court (*since the inception of Kendra's Law*):
4. Make **recommendations** to improve the program locally or statewide.

AOT QUARTERLY REPORT

County _____

Date
For Period Ending

Client Name	Change of Status During this Quarter	Description of Material Changes During this Quarter	Changes in Case Management During this Quarter	Living Arrangements During this Quarter
-------------	---	---	--	--

1) Since the inception of Kendra's Law, what percentage of AOT petitions have been granted by the court in your county (*since the inception of Kendra's Law*)? _____%

2) Give a description of the categories of services which have been ordered by the court (*since the inception of Kendra's Law*).

3) List recommendations to improve the program locally or statewide.

Instructions for AOT Monthly Statistical Summary Report

Investigation Section

1. Indicate the total number of individuals that have been referred for an AOT investigation. Do not count an individual more than once even if you have conducted subsequent investigations. This number is cumulative since 11/8/99.
2. Indicate number of NEW investigations for this reporting period. Again, do not count someone if they have been investigated by you in the past.
3. Indicate the TOTAL number of ALL investigations to date – this number should include ALL investigations regardless of duplication.

Ongoing

4. Indicate how many investigations you are currently working on.

Court Order Section

5. Indicate the total number of active AOT orders your county is currently monitoring for this reporting period.
6. Indicate the number of unduplicated AOT orders your county has been responsible for monitoring since 11/8/99. Again, do NOT count an individual more than once even if they had more than one court order.
7. Indicate the total number of ALL AOT orders your county has been responsible for monitoring since 11/8/99. Include ALL initial court orders, even if an individual had more than one initial court order (Do Not include Renewals).

Service Enhancement Section

8. Indicate how many investigations resulted in enhanced services to date.
9. Indicate how many new service enhancements for this reporting period.
10. Indicate how many service enhancements are currently being monitored during this reporting period.

Significant Event Section

11. Indicate how many significant event reports (actual forms) were submitted to the OMH field office for this reporting period. Do not count individual events, just forms.
12. Indicate how many pick-up orders were issued during this reporting period. Enter the totals next to the MHL used, either 9.45 or 9.60.
13. Indicate how many of these pick-up orders resulted in a hospitalization.

AOT: Monthly Statistical Summary Report

County:

Date Submitted:

Completed by:

Reporting Period:

INVESTIGATION SECTION

1. Total # of unduplicated investigations for AOT*
2. How many new investigations for this reporting period?
3. Total number of ALL INVESTIGATIONS?*

ONGOING

4. How many are ongoing (open) investigations?

COURT ORDER SECTION

5. Total # of active AOT orders in your county?
6. Total number of unduplicated AOT orders your county has been responsible for monitoring?*
7. Total number of ALL AOT orders your county has been responsible for monitoring?*

SERVICE ENHANCEMENT SECTION

8. How many referrals resulted in enhanced services to date?*
9. How many new service enhancements for this reporting period?
(Those counties providing descriptive information, please attach details of any new cases since the previous report)
10. How many are currently active service enhancements?

SIGNIFICANT EVENT SECTION

11. How many significant event reports were submitted to the OMH field office for this reporting period?
12. How many pick-up orders were issued during this reporting period? 9.45
13. How many pick-up orders resulted in a hospitalization? 9.60

* Please provide the cumulative totals since 11/8/99 for the following categories of AOT activity where indicated with an asterisk.