



# **DDAP PRE-TRIAL INTERVENTION PROGRAM ASSESSMENT GUIDE**

DMHAS Information Systems Division



May 2013

# PRE-TRIAL INTERVENTION PROGRAM

## Overview

The Pre-Trial Intervention Program (PTIP) is available to first time offenders arrested for operating a motor vehicle under the influence of alcohol or drugs (OUI) or possession of a controlled substance. When a defendant is admitted to the PTIP program, they are given a clinical evaluation at a treatment facility by a substance abuse professional. This evaluation results in a report submitted to the referring court with recommendations of treatment. The court then decides what action to take regarding the defendant, either treatment or intervention.

Defendants can be admitted to both alcohol and drug-related treatment programs simultaneously. In these cases, the defendant receives evaluations for each program. Defendants may be discharged from a PTIP program after they receive their evaluation.

PTIP data can only be entered into DDaP through the front end.

Refer to the **DDaP Training Guide** for instructions on admitting a new client, updating an existing client, entering and updating Services and Assessments and Discharging clients.

The **DDaP Training Guide** can be found at the following location:  
In the DDaP Application on the Sidebar in the 'Tools' link under 'Documentation'

## Forms

The following forms are used when admitting a client to a **Pre-Trial Intervention Program**:

- **DDaP Admission Form** – Abbreviated (The Periodic Assessment and Co-Occurring are not required for this program.)
- **DDaP Pre-Trial Intervention Program Assessment Form**

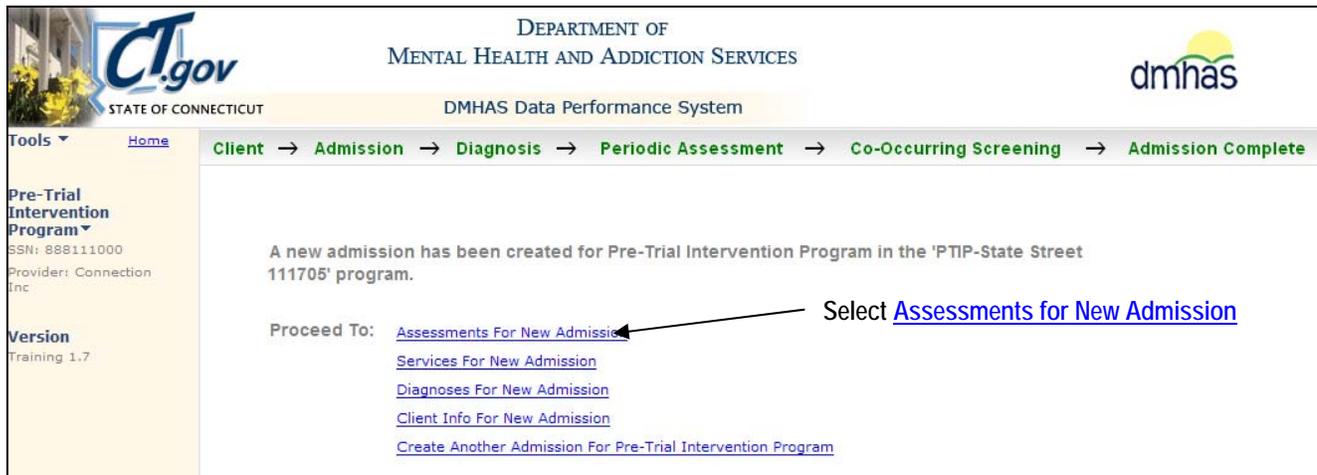
These forms are located on the **DMHAS EQMI website** under [DDaP User Documentation and Forms](#) found at the following link: <http://www.ct.gov/dmhas/cwp/view.asp?a=2900&q=334736>

## What Data to Enter and When

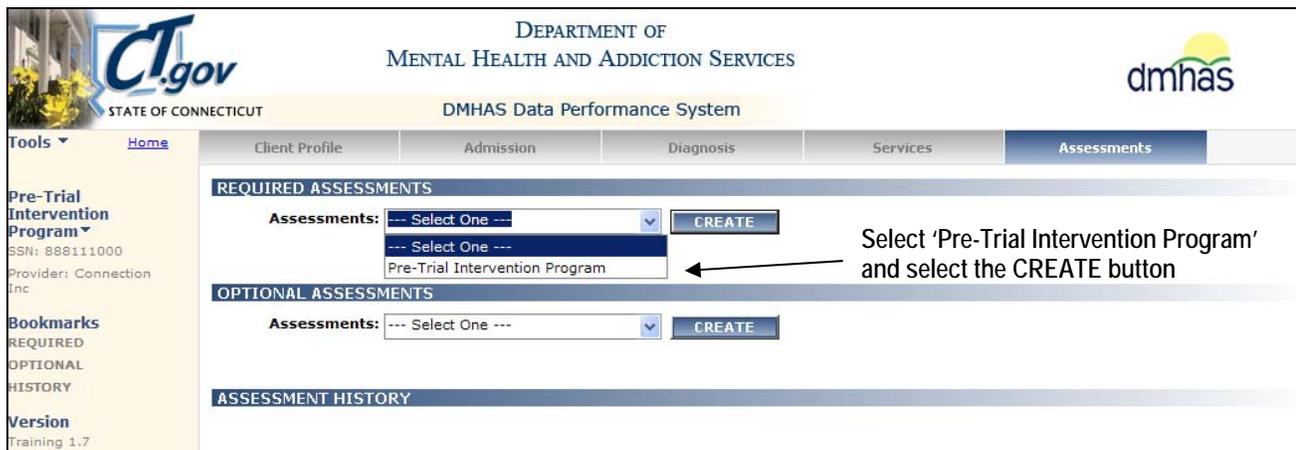
1. **General DDaP Admission screens** – these are the screens that every provider uses for all programs; follow standard instructions
2. **General DDaP Discharge screens** – these are the screens that every provider uses for all programs; follow standard instructions
3. **PTIP Screens** – see instructions on the following pages.

# ADDING A PRE-TRIAL INTERVENTION PROGRAM ASSESSMENT

1. If adding the **Pre-Trial Intervention Program Assessment** immediately following a new admission, select the [Assessments for New Admission](#) link on the **Admission Complete** screen.



2. Select **Pre-Trial Intervention Program** from the **REQUIRED ASSESSMENTS** drop list.
3. Select the **CREATE** button.



4. The **PRE-TRIAL INTERVENTION PROGRAM ASSESSMENT** screen will display.



OR

If adding a **Pre-Trial Intervention Program Assessment** by **CLIENT SEARCH**:

1. Search on the client's **Last Name** or **SSN** and select [Find Admissions](#) in the **CLIENT(S) FOUND FOR...** grid.

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES  
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Tools Home Client Management Roster Management File Management

Version Training 1.7

**CLIENT SEARCH**  
Provider: ALL  
Search By:  Last Name  SSN  Advanced Last Name: inter

Search on the client

**CLIENT(S) FOUND**  
Select [Find Admissions](#)

| Last Name            | First Name | SSN       | DOB        |  |
|----------------------|------------|-----------|------------|--|
| Intervention Program | Pre-Trial  | 888111000 | 06/13/1985 | <a href="#">Find Admissions</a> <a href="#">Create New Admission</a> |

2. The admissions for the client will display. Select [Details](#) of the admission.

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**CLIENT SEARCH**  
Provider: ALL  
Search By:  Last Name  SSN  Advanced Last Name: inter

**CLIENT(S) FOUND**

| Last Name            | First Name | SSN       | DOB        |  |
|----------------------|------------|-----------|------------|--|
| Intervention Program | Pre-Trial  | 888111000 | 06/13/1985 | ✓ <a href="#">Create New Admission</a> |

**ADMISSION(S) FOUND FOR: PRE-TRIAL INTERVENTION PROGRAM - SORTED BY ADMIT DT**  
Program(s): ALL

Select [Details](#)

| Provider       | Program                  | Status | Admit Dt   | Discharge Dt |   |
|----------------|--------------------------|--------|------------|--------------|---|
| Connection Inc | PTIP-State Street 111705 | Open   | 03/01/2011 |              | <a href="#">Details</a> <a href="#">Discharge</a> |

- The **Client Profile** screen will display.
- Select the **Assessments** tab in the Navigator Bar.

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DMHAS Data Performance System

Select the Assessments tab

Tools Home

Client Profile Admission Diagnosis Services Assessments

**DEMOGRAPHICS**

First Name: Pre-Trial Mid Initial: Last Name: Intervention Program Suffix:   
 SSN: 888111000 SSN Unavailable Reason: Religion: Catholic   
 DOB: 06/13/1985 DOB Unavailable Reason: Marital Status: Never married   
 Ethnicity: Non-Hispanic Primary Language: English Second Lang:   
 Veteran Status: No Military Start Date: Military End Date:   
 Gender: Male Provider Client ID:   
 Race: White/Caucasian

**ADDRESS**

Address 1: Street   
 Address 2:   
 City: manchester State: Connecticut Zip: 06040

**INSURANCE**

| Insurance:          | Type | Policy Number | Start Date | End Date |
|---------------------|------|---------------|------------|----------|
| No health insurance |      |               |            |          |

CLIENT MGT ROSTER MGT EDIT Client Profile

- The Assessments screen will display with **Pre-Trial Intervention Program** listed in **REQUIRED ASSESSMENTS**.
- Select **Pre-Trial Intervention Program** in the **REQUIRED ASSESSMENTS** drop list.
- Select the **CREATE** button.

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DMHAS Data Performance System

Tools Home

Client Profile Admission Diagnosis Services Assessments

**REQUIRED ASSESSMENTS**

Assessments: --- Select One --- CREATE   
 --- Select One ---   
 Pre-Trial Intervention Program

Select 'Pre -Trial Intervention Program' and select the CREATE

**OPTIONAL ASSESSMENTS**

Assessments: --- Select One --- CREATE

**ASSESSMENT HISTORY**

- The **PRE-TRIAL INTERVENTION PROGRAM ASSESSMENT** screen will display.

## Data Entry Status Terms

**REQUIRED** – must enter data in order to save the record in DDaP

**Mandatory** – must enter data but can save the record if data is not entered

**Not needed** – data not needed by DMHAS but can be entered if desired

The screenshot shows the DMHAS Data Performance System interface. At the top, it displays the Department of Mental Health and Addiction Services logo and the state of Connecticut logo. The main navigation bar includes 'Client Profile', 'Admission', 'Diagnosis', 'Services', and 'Assessments'. The 'Assessments' tab is active. On the left, there is a sidebar with 'Pre-Trial Intervention Program' and 'Bookmarks'. The main content area is titled 'DEMOGRAPHICS' and contains several fields: 'Client Transferred from Other Agency' (checked), 'Drivers License Number' (text input), 'Drivers License State' (dropdown menu), 'Date Arrested' (calendar input), and 'State of Arrest' (dropdown menu).



If 'Client Transferred from Other Agency' is selected, the following fields are required:

1. Complete the following fields **at the time of evaluation**:

|   |   |
|---|---|
| <b>Client Transferred from Other Agency</b> | Click on the checkbox if the client was transferred from another agency.  |
| <b>STATE OF ARREST</b>                      | <b>REQUIRED.</b> Select the state where the client was arrested. <i>(Each client will have only <b>one</b> State of Arrest for each PTIP evaluation.)</i>   |
| <b>CT COURT REFERRAL</b>                    | <b>REQUIRED.</b> Select the name of the court that referred the client to the PTIP program from the drop list.  |
| <b>EVALUATOR LAST NAME</b>                  | <b>REQUIRED.</b>  Enter the <b><u>name of the agency</u></b> where the evaluation was done in this field. There can be only one agency value per evaluation. |

2. Refer to the following pages if there are other fields to complete for the PTIP assessment.

**OR**

Select the **SAVE & EXIT** button to save the **Pre-Trial Intervention Program** data if there are no other fields to complete at the time of evaluation.

The **Pre-Trial Intervention Program** assessment will display in the **ASSESSMENT HISTORY** grid:

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DMHAS Data Performance System

STATE OF CONNECTICUT

Tools Home

Client Profile Admission Diagnosis Services **Assessments**

**Pre-Trial Intervention Program**  
SSN: 888111000  
Provider: Connection Inc

Bookmarks  
REQUIRED  
OPTIONAL  
HISTORY

Version  
Test 2.5

**REQUIRED ASSESSMENTS**  
Assessments: --- Select One --- CREATE

**OPTIONAL ASSESSMENTS**  
Assessments: --- Select One --- CREATE

**ASSESSMENT HISTORY**

| Assessment Date | Assessment                     |                 |
|-----------------|--------------------------------|-----------------|
| 05/29/2013      | Pre-Trial Intervention Program | X [Folder Icon] |

CLIENT MGT ROSTER MGT Assessments

1. Select the open icon in the **ASSESSMENT HISTORY** grid to view or edit the assessment.
2. Select the delete icon in the grid to delete the assessment.
3. Select the **CLIENT MGT** button to return to the **Client Search**.
4. Select the **ROSTER MGT** button to return to the **Roster Search**.
5. Select any of the tabs in the Navigator Bar to go to another screen to view or update client data.
6. The **Pre-Trial Intervention Program** Assessment now displays in the **OPTIONAL ASSESSMENTS** drop list. Additional **Pre-Trial Intervention Program** Assessments can be added in the future.



Refer to the following pages if 'Client Transferred from Other Agency' is **NOT** selected.

## Data Entry Status Terms

**REQUIRED** – must enter data in order to save the record in DDaP

**Mandatory** – must enter data but can save the record if data is not entered

**Not needed** – data not needed by DMHAS but can be entered if desired

The screenshot shows the 'DEMOGRAPHICS' section of the DMHAS Data Performance System. The 'Client Transferred from Other Agency' checkbox is unchecked. The 'Drivers License Number' field is empty. The 'Drivers License State' dropdown menu is set to '-- Select One --'. The 'Date Arrested' field is empty. The 'State of Arrest' dropdown menu is set to '-- Select One --'. The 'Blood Alcohol Level 1' and 'Blood Alcohol Level 2' fields are empty.

If 'Client Transferred from Other Agency' is **NOT** selected:

1. Complete the remaining data fields as noted below **at the time of Evaluation**:

|                               |   |
|-------------------------------|---|
| <b>DRIVERS LICENSE NUMBER</b> | <b>Not needed.</b> Enter the client's driver's license number.<br>(A client will have only <b>one</b> Drivers License Number.)  |
| <b>DRIVERS LICENSE STATE</b>  | <b>REQUIRED.</b> Select the state where the client holds a driver's license.<br>(A client will have only <b>one</b> Drivers License State.)   |
| <b>DATE ARRESTED</b>          | <b>REQUIRED.</b> Enter the date when the client was arrested, in the correct MM/DD/YYYY date format. (Only <b>one</b> Date Arrested for each)<br> <b>Date Arrested</b> must be greater than client's Date of Birth and less than or equal to current date. <b>Use best guesstimate if unknown.</b> |
| <b>STATE OF ARREST</b>        | <b>REQUIRED.</b> Select the state where the client was arrested. (Each client will have only <b>one</b> State of Arrest for each PTIP evaluation.)  |
| <b>BLOOD ALCOHOL LEVEL 1</b>  | <b>Mandatory for PAEP if provided.</b> Enter the Blood Alcohol Level (BAL) of the client when they were arrested.  The values for Blood Alcohol fall between zero and one, including zero and one, with three decimals.  |
| <b>BLOOD ALCOHOL LEVEL 2</b>  | Enter the client's Blood Alcohol Level (BAL) if a <u>second test</u> is performed.  |

## Pre-Trial Intervention Program data fields (cont.)

The screenshot displays the 'Assessments' tab in the DMHAS Data Performance System. The left sidebar shows the 'Pre-Trial Intervention Program' with a dropdown menu and various navigation options like 'Bookmarks', 'Version', and 'Home'. The main content area contains three dropdown menus: 'If no BAC for PAEP, Why?', 'CT Court Referral', and 'Service Referred'. Below these is an 'ASSESSMENT' section with three date input fields: 'Referral Date', 'Assessment Date', and 'Continuance Date', each with a calendar icon.

### 2. Complete the following data fields as noted below **at the time of Evaluation:**

|                                 |   |
|---------------------------------|---|
| <b>If No BAC for PAEP, Why?</b> | <b>Required if Blood Alcohol Level 1 or 2 is <u>not</u> entered.</b> Select 'Refused', 'Not Reported' or 'Drugs Alleged, Not Alcohol' from the drop list.   |
| <b>CT COURT REFERRAL</b>        | <b>REQUIRED.</b> Select the name of the court that referred the client to the PTIP program from the drop list.  |
| <b>SERVICE REFERRED</b>         | <b>REQUIRED.</b> Select the service for which the client was referred from the drop list.<br> A client can have only one service per evaluation.   |
| <b>REFERRAL DATE</b>            | <b>REQUIRED.</b> Enter the date of the court order for the evaluation or the date that the order was received by provider, whichever is later, in MM/DD/YYYY format.<br> This field must contain a valid date, must be greater than or equal to the Date Arrested and cannot be greater than the current date. |
| <b>ASSESSMENT DATE</b>          | <b>REQUIRED.</b> Enter the date when a client has their PTIP assessment at a treatment facility, in MM/DD/YYYY format.<br> This field must contain a valid date, must be greater than or equal to the Referral Date and cannot be greater than the current date.   |
| <b>CONTINUANCE DATE</b>         | <b>Mandatory.</b> Enter the date set for a continuance of the court case, in MM/DD/YYYY format.<br> This field must contain a valid date, must be greater than or equal to the Referral Date.  |

Pre-Trial Intervention Program data fields (cont.)

3. Complete the following data fields as noted below **at the time of Evaluation**:

|                                    |   |
|------------------------------------|---|
| <b>EVALUATION TOOL USED</b>        | <b>Not needed.</b> Select the evaluation tool used in the client’s PTIP assessment.   |
| <b>EVALUATION FULL SCORE</b>       | <b>Mandatory for RIASI.</b> Enter the full score on the PTIP evaluation test.<br> There can be only one Evaluation Full Score per evaluation. (Valid Values: 0 – 49)   |
| <b>EVALUATION SUB SCALE SCORE</b>  | <b>Mandatory for RIASI.</b> Enter the score from the subsection of the PTIP evaluation test.<br> There can be only one Evaluation Sub Scale Score per evaluation. (Valid Values: 0 – 15)<br><i>The Evaluation Sub Scale Score must be less than or equal to the Evaluation Full Score.</i> |
| <b>OVERALL ASSESSED SEVERITY</b>   | <b>REQUIRED.</b> Select the radio button for the value specifying the substance abuse difficulty.<br> There can be only one Overall Assessed Severity value per evaluation.  |
| <b>PAST TREATMENT</b>              | <b>REQUIRED.</b> Select ‘Yes’, ‘No’ or ‘Unspecified’ regarding whether or not a client has had prior treatment.<br> There can be only one Past Treatment value per evaluation.   |
| <b>INTERVENTION RECOMMENDATION</b> | <b>REQUIRED.</b> Select the type of intervention recommended for the client by the treatment facility evaluator.<br> There can be only one Intervention Recommendation value per evaluation.   |

**Pre-Trial Intervention Program data fields (cont.)**

**4. Complete the following data fields as noted below at the time of Evaluation:**

|                                    |  |
|------------------------------------|--|
| <p><b>LEVEL OF CARE</b></p>        | <p><b>Mandatory if treatment is recommended.</b> Select the value specifying the level of care for the client, if Treatment is recommended to the court by the program evaluator after the client evaluation.</p> <p> There can be only one If Recommendation=Treatment, Select A Level Of Care value per evaluation.</p> |
| <p><b>EVALUATOR LAST NAME</b></p>  | <p><b>REQUIRED.</b> Enter the last name of the evaluator at a treatment facility who gave the PTIP evaluation to the client.</p> <p> There can be only one Evaluator Last Name value per evaluation.</p>   |
| <p><b>EVALUATOR FIRST NAME</b></p> | <p><b>REQUIRED.</b> Enter the first name of the evaluator at a treatment facility who gave the PTIP evaluation to the client.</p> <p> There can be only one Evaluator First Name value per evaluation.</p>  |

**Pre-Trial Intervention Program data fields (cont.)**

5. Complete the following data fields as noted below **when first group meets**:

|                               |   |
|-------------------------------|---|
| <p><b>PROGRAM ORDERED</b></p> | <p><b>Mandatory.</b> Select the value specifying the program to which the client was ordered by the court.</p>  There can be only one Program Ordered value per evaluation.  |
| <p><b>REFERRED DATE</b></p>   | <p><b>Mandatory.</b> Enter the date of the court order for a PTIP intervention or the date that the order was received by the provider, whichever is later, in MM/DD/YYYY date format.</p>  This date must be greater than or equal to the Assessment Date, and cannot be greater than the current date. |
| <p><b>AVAILABLE DATE</b></p>  | <p><b>Mandatory.</b> Enter the date of the court order for a PTIP intervention or the date granted for a delayed entry, in MM/DD/YYYY date format.</p>  This field differs from Start Date. It only reflects <b>when the client was available to attend a program</b> , not when they actually started.  |
| <p><b>NEXT COURT DATE</b></p> | <p><b>Not needed.</b> Enter the date when a client is next due in court, in MM/DD/YYYY date format.</p>  This date must be greater than or equal to the Arrested Date, and cannot be greater than the Referred Date.   |

Pre-Trial Intervention Program data fields (cont.)

The screenshot shows the DMHAS Data Performance System interface. At the top, it displays the logos for CT.gov, the Department of Mental Health and Addiction Services, and dmhas. The main header is "DMHAS Data Performance System". Below this, there are navigation tabs: Client Profile, Admission, Diagnosis, Services, and Assessments. The "Assessments" tab is selected. On the left, there is a sidebar with "Tools" and "Home" links, and a "Pre-Trial Intervention Program" section with details like SSN: 888111000 and Provider: Connection Inc. Below that are "Bookmarks" for DEMOGRAPHICS, ASSESSMENT, INTERVENTION, and RECOMMENDATION, and a "Version" section showing "Test 2.5". The main content area is titled "Groups" and contains a table with five rows: "Initial Group" and "Reinstatement 1" through "Reinstatement 4". Each row has three columns: "Start Date:" with a date picker icon, "Group Number:" with a text input field, and "Completed:" with radio buttons for "Yes" and "No". Below the table is a "Comments" section with a text area and a submit button.

6. Complete the **PRE-TRIAL INTERVENTION PROGRAM** data fields for each **Group** and **Reinstatement**, if applicable, as noted below **when group is completed**:

|                            |   |
|----------------------------|---|
| <p><b>START DATE</b></p>   | <p><b>Required if 'Completed' field has an entry.</b> Enter the date when a client attended a program group, in MM/DD/YYYY date format.</p> <p> This date must be greater than or equal to the Referred Date.</p>                        |
| <p><b>GROUP NUMBER</b></p> | <p><b>Required if 'Completed' field has an entry, otherwise, Mandatory.</b> Enter the ID number of the intervention program group where a client has been admitted.</p> <p> There can only be one Group Number per Program Referral.</p> |
| <p><b>COMPLETED</b></p>    | <p><b>Mandatory.</b> Select 'Yes' or 'No' to specify whether or not a client has completed treatment.</p> <p> There can be only <u>one</u> Completed value per evaluation.</p>   |
| <p><b>COMMENTS</b></p>     | <p>Enter comments as needed.</p>  |



In order to populate the Start Date or Group Number for the next group, COMPLETED must be NO.

The following error will display if 'Yes' is selected for a previous group and entries are made for the next group:

- **Invalid Completed:** In order to populate the Start Date or Group Number for the next group, COMPLETED must be NO.

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES  
DMHAS Data Performance System

STATE OF CONNECTICUT

Tools Home

Client Profile Admission Diagnosis Services **Assessments**

Pre-Trial Intervention Program  
SSN: 888111000  
Provider: Connection Inc

Bookmarks  
DEMOGRAPHICS  
ASSESSMENT  
INTERVENTION  
RECOMMENDATION

Version  
Test 2.5

Date of the court order for a PTIP intervention or the date granted for delay

Next Court Date

| Initial Group   | Start Date: | Group Number: | Completed:  |
|-----------------|-------------|---------------|---|
|                 | 5/1/2013    | 1234          | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Reinstatement 1 | 5/10/2013   | 5678          | <input type="radio"/> Yes <input type="radio"/> No            |
| Reinstatement 2 |             |               | <input type="radio"/> Yes <input type="radio"/> No            |
| Reinstatement 3 |             |               | <input type="radio"/> Yes <input type="radio"/> No            |
| Reinstatement 4 |             |               | <input type="radio"/> Yes <input type="radio"/> No            |

Comments

NEXT ERROR SAVE SAVE & EXIT CANCEL

Pre-Trial Intervention Program Assessment

## 7. Refer to the following regarding Groups in order to resolve any error(s):

1. If a field is highlighted in red, an error will display at the top of the screen.
2. If the 'Completed' field has an entry ('Yes' or 'No'), the Start Date and Group Number must be entered.
3. If the Initial Group was not completed, select 'No' in the 'Completed' field.
4. Complete the Reinstatement 1 fields, if applicable.
5. If the Reinstatement 1 group was not completed, select 'No' in the 'Completed' field.
6. Complete the Reinstatement 2 fields, if applicable.
7. Continue on to Reinstatement 3 and / or Reinstatement 4 groups, if applicable (previous group must have 'No' for 'Completed'.)
8. If the Initial Group was completed, select 'Yes' in the 'Completed' field.
9. The next group(s) cannot be completed if the previous group has been completed.

Continue to complete any remaining **Pre-Trial Intervention Program** data fields based on the information on the following pages.

Pre-Trial Intervention Program data fields (cont.)

The screenshot shows the DMHAS Data Performance System interface. At the top, it displays the logo for CT.gov and the Department of Mental Health and Addiction Services. The main navigation bar includes 'Tools', 'Home', and tabs for 'Client Profile', 'Admission', 'Diagnosis', 'Services', and 'Assessments'. The left sidebar contains a 'Pre-Trial Intervention Program' dropdown menu, a 'Bookmarks' section with links to 'DEMOGRAPHICS', 'ASSESSMENT', 'INTERVENTION', and 'RECOMMENDATION', and a 'Version' section showing 'Test 2.5'. The main content area is the 'Assessments' form, which includes the following fields: 'Pre Test Score' (text input), 'Post Test Score' (text input), 'Completion Date' (calendar icon), 'Reason Initial Group Not Completed' (dropdown menu), 'Facilitator Assessment' (radio buttons for Minimal, Low, Medium, High), 'Facilitator Recommended Level of Care Following Completion' (dropdown menu), 'Facilitator Last Name' (text input), and 'Facilitator First Name' (text input).

8. Complete the **PRE-TRIAL INTERVENTION PROGRAM** data fields as noted below **when group is completed**:

|  |  |
|--|--|
| <b>PRE TEST SCORE</b>                        | <b>Mandatory.</b> Enter the client's score on the alcohol knowledge pretest that is administered when the client begins a program. Valid values: 0 - 100<br>There can be only one Pre Test Score per evaluation.     |
| <b>POST TEST SCORE</b>                       | <b>Mandatory.</b> Enter the client's score on the alcohol knowledge pretest that is administered when the client completes a program. Valid values: 0 - 100<br>There can be only one Post Test Score per evaluation. |
| <b>COMPLETION DATE</b>                       | <b>Mandatory.</b> Enter the date when a client completed their program, in MM/DD/YYYY date format.<br>This date must be greater than or equal to the Referred Date, and cannot be greater than the current date.     |
| <b>REASON NOT COMPLETED</b>                  | <b>Mandatory.</b> Select the reason a client did not complete their program from the drop list.  There can be only one Reason Not Completed per evaluation.  |
| <b>FACILITATOR ASSESSMENT</b>                | <b>Mandatory.</b> Select Minimal, Low, Medium or High  |
| <b>FACILITATOR RECOMMENDED LEVEL OF CARE</b> | <b>Mandatory if treatment recommended after group.</b>   |
| <b>FACILITATOR LAST NAME</b>                 | <b>REQUIRED.</b> Enter the last name of the intervention program group facilitator.  There can be only one Facilitator Name per evaluation.  |
| <b>FACILITATOR FIRST NAME</b>                | <b>REQUIRED.</b> Enter the first name of the intervention program group facilitator.   |

**TX RECOMMENDATION fields – NOTE: Providers do not complete these fields.**

|  |  |
|--|--|
| <p><b>TREATMENT RECOMMENDATION GRANTED</b></p> | <p>Select 'Yes', 'No' or 'Unspecified' regarding whether or not a treatment recommendation for a client has been granted.</p> <p> There can be only one Treatment Recommendation Granted value per evaluation.</p>  |
| <p><b>DATE OF ORDER</b></p>                    | <p>Enter the date when the treatment order for the client was received by OPI, in MM/DD/YYYY date format.</p> <p> This date must be greater than or equal to the Date Of Order, and cannot be greater than the current date.</p>  |
| <p><b>DATE RECEIVED BY OPI</b></p>             | <p>Enter the date when the treatment order for the client was received by OPI, in MM/DD/YYYY date format.</p> <p> This date must be greater than or equal to the Date Of Order, and cannot be greater than the current date.</p>  |
| <p><b>CLIENT INDIGENT</b></p>                  | <p>Select 'Yes' or 'No' to specify whether or not a client is indigent.</p>  |
| <p><b>DATE ASO CONTACTED</b></p>               | <p>Enter the date the ASO contractor (i.e. DMHAS's current contractor is ABH) was contacted to inform them that a client is indigent, in MM/DD/YYYY date format.</p> <p> This date must be greater than or equal to the Referred Date, and cannot be greater than the current date.</p> |
| <p><b>LEVEL OF CARE ORDERED</b></p>            | <p>Select the value specifying the level of care for the client, as ordered by the court from the drop list.</p> <p> There can be only one Ordered Level of Care value per evaluation.</p>  |
| <p><b>ASSIGNED PROGRAM</b></p>                 | <p>Enter a description of the active DDaP program assigned to client by the court.</p>   |

- Once all appropriate fields have been completed, select the **SAVE** button to save the **Pre-Trial Intervention Program Assessment**.



**Errors will display in red if required fields are missing values. Complete any missing fields accordingly.**

- Select the **SAVE & EXIT** button to save the **Pre-Trial Intervention Program** data and return to the Assessments screen.
- Select the **CANCEL** button to Cancel out of the screen and not save. (**Note:** Once a Pre-Trial Intervention Program Assessment has been added and saved, the **CANCEL** button will take you off the screen with the original Pre-Trial Intervention Program data saved.)
- When the **SAVE & EXIT** button is selected, the assessment will be saved and the **Assessments** screen will display.
- The **Pre-Trial Intervention Program Assessment** will display in the **ASSESSMENT HISTORY** grid.
- The **Assessment Date** in the **ASSESSMENT HISTORY** grid is the date the **Pre-Trial Intervention Program Assessment** was entered into DDaP.

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES  
DMHAS Data Performance System

Tools Home

Client Profile Admission Diagnosis Services **Assessments**

**REQUIRED ASSESSMENTS**  
Assessments: --- Select One --- **CREATE**

**OPTIONAL ASSESSMENTS**  
Assessments: --- Select One --- **CREATE**

**ASSESSMENT HISTORY**

| Assessment Date | Assessment                     |                 |
|-----------------|--------------------------------|-----------------|
| 11/05/2010      | Pre-Trial Intervention Program | X [Folder Icon] |

Select [Folder Icon] to open and view and/or edit the assessment

Select [X] to delete the assessment

CLIENT MGT ROSTER MGT Assessments

- Select the open [Folder Icon] icon in the **ASSESSMENT HISTORY** grid to view or edit the assessment.
- Select the delete [X] icon in the grid to delete the assessment.
- Select the **CLIENT MGT** button to return to the **Client Search**.
- Select the **ROSTER MGT** button to return to the **Roster Search**.
- Select any of the tabs in the Navigator Bar to go to another screen to view or update client data.

20. The **Pre-Trial Intervention Program** Assessment now displays in the **OPTIONAL ASSESSMENTS** drop list. Additional **Pre-Trial Intervention Program** Assessments can be added in the future.

The screenshot shows the DMHAS Data Performance System interface. The top navigation bar includes 'Client Profile', 'Admission', 'Diagnosis', 'Services', and 'Assessments'. The 'Assessments' tab is active. On the left, there is a sidebar with 'Tools', 'Home', 'Pre-Trial Intervention Program', 'Bookmarks', and 'Version'. The main content area is divided into 'REQUIRED ASSESSMENTS' and 'OPTIONAL ASSESSMENTS'. Both sections have a dropdown menu for 'Assessments' and a 'CREATE' button. The 'OPTIONAL ASSESSMENTS' dropdown is open, showing a list of assessment types: '--- Select One ---', 'Co-Occurring', 'Education', 'Employment Services', 'Hospital Emergency Room', 'Hospitalization', 'Periodic', and 'Pre-Trial Intervention Program'. The 'Pre-Trial Intervention Program' option is highlighted. An arrow points to this option with the text: 'Select 'Pre-Trial Intervention Program' and select the CREATE button to add another assessment'.

21. Select the 'Pre-Trial Intervention Program' assessment from the **OPTIONAL ASSESSMENTS** drop list to add another PTIP assessment.

# UPDATING A CLIENT / DISCHARGING FROM A PTIP PROGRAM



Defendants may be discharged from a PTIP program after they receive their evaluation.

1. Search on the client and select [Find Admissions](#).

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES  
DMHAS Data Performance System

Tools | Home | Client Management | Roster Management | File Management

CLIENT SEARCH  
Provider: ALL  
Search By:  Last Name  SSN  Advanced Last Name: inter

CLIENT(S) FOUND

| Last Name            | First Name | SSN       | DOB        |  |
|----------------------|------------|-----------|------------|--|
| Intervention Program | Pre-Trial  | 888111000 | 06/13/1985 | <a href="#">Find Admissions</a> <a href="#">Create New Admission</a> |

2. Find the admission and select [Details](#).

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES  
DMHAS Data Performance System

Tools | Home | Client Management | Roster Management | File Management

CLIENT SEARCH  
Provider: ALL  
Search By:  Last Name  SSN  Advanced Last Name: inter

CLIENT(S) FOUND

| Last Name            | First Name | SSN       | DOB        |  |
|----------------------|------------|-----------|------------|--|
| Intervention Program | Pre-Trial  | 888111000 | 06/13/1985 | ✓ <a href="#">Create New Admission</a> |

ADMISSION(S) FOUND FOR: PRE-TRIAL INTERVENTION PROGRAM - SORTED BY ADMIT DT

Program(s): ALL

| Provider       | Program                  | Status | Admit Dt   | Discharge Dt |   |
|----------------|--------------------------|--------|------------|--------------|---|
| Connection Inc | PTIP-State Street 111705 | Open   | 03/01/2011 |              | <a href="#">Details</a> <a href="#">Discharge</a> |

3. The **Client Profile** screen will display. Select the **Assessments** tab.

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES  
DMHAS Data Performance System

Tools | Home | Client Profile | Admission | Diagnosis | Services | **Assessments**

Pre-Trial Intervention Program  
SSN: 888111000  
Provider: Connection Inc

DEMOGRAPHICS

First Name: Pre-Trial Mid Initial: Last Name: Intervention Program Suffix:   
SSN: 888111000 SSN Unavailable Reason: Religion: Catholic   
DOB: 06/13/1985 DOB Unavailable Reason: Marital Status: Never married

4. The Assessments screen will display.

| Assessment Date | Assessment                     |
|-----------------|--------------------------------|
| 11/05/2010      | Pre-Trial Intervention Program |

5. Select the open  icon in the **ASSESSMENT HISTORY** grid to view the assessment.

**Client Transferred from Other Agency**  
Check if the client had Evaluation at another agency and transferred to this agency for Intervention.  
 Client Transferred from Other Agency

**Drivers License Number**  
128263177

**Drivers License State**  
Connecticut

6. Make any necessary updates to the assessment.

7. Once all updates have been completed, select the **SAVE & EXIT** button to save the **Pre-Trial Intervention Program** data and return to the Assessments screen.

8. To discharge the client from the PTIP program, select the **Admission** tab in the navigator bar, select the **'DISCHARGE'** button at the bottom of the screen and process the client discharge accordingly.