Department of Social & Health Services
Division of Behavioral Health and Recovery

Treatment and Assessment
Report Generation Tool

Data Dictionary

January 2014

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PART III: DATA ELEMENTS:

1. Are sequentially numbered within alphabetical section.
2. Default fields are in the "D" section.
3. There are currently no "J", “K” or "X" data elements.

APPENDICES

- Appendix A: Inactive Data Elements

Part I

Dictionary Description

DICTIONARY DESCRIPTION

1. OVERVIEW

The Treatment and Report Generation Tool (TARGET) is a web-based management and reporting system of the Division of Behavioral Health and Recovery (DBHR) and is provided to approximately 525 reporting agencies throughout the state. Users include county governments, tribes, and organizations that provide DBHR client services.

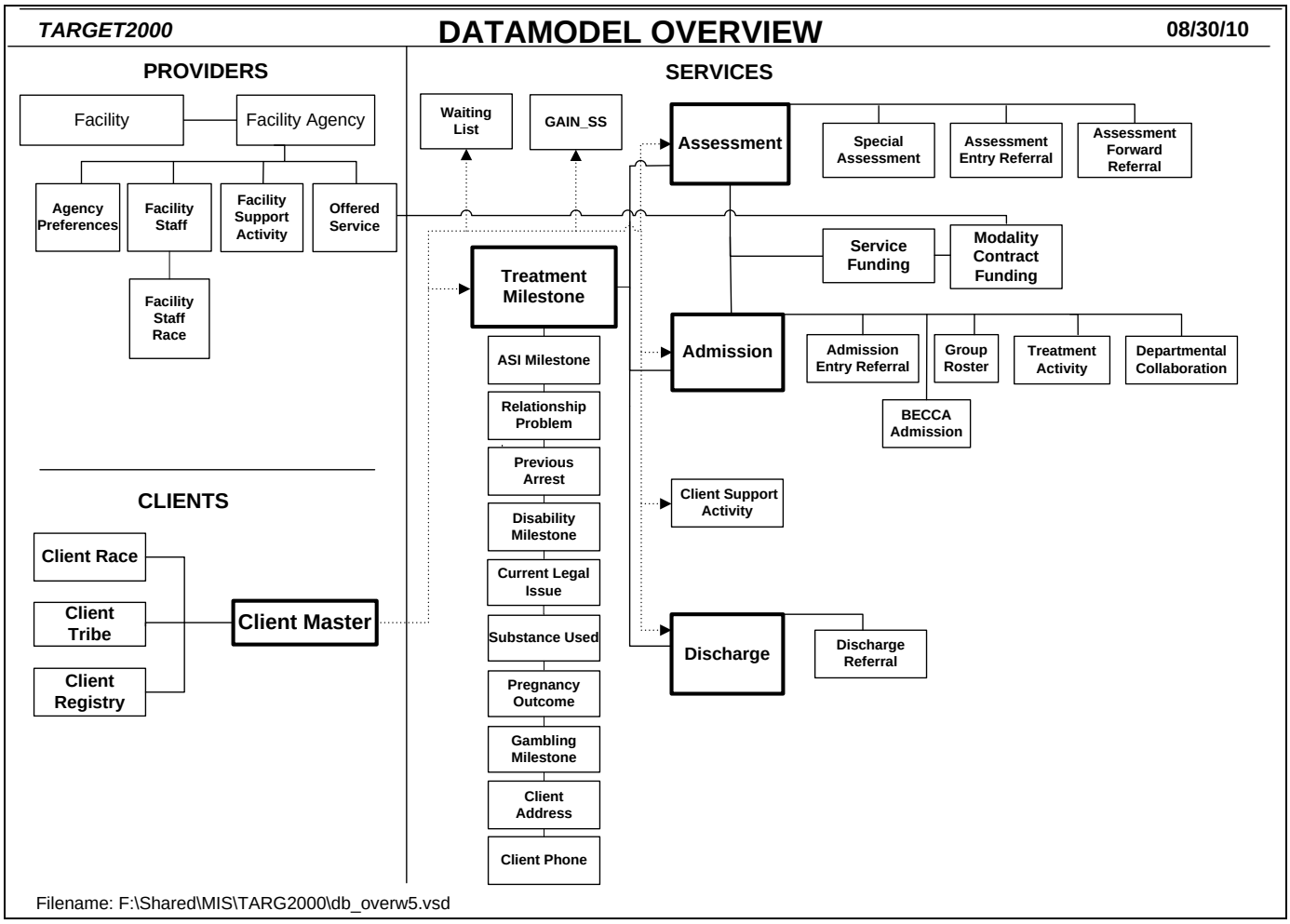
The purpose of this Data Dictionary is to enumerate and explain each of the fields in each of the tables within the TARGET database. This information will be helpful to treatment agency and county staff in understanding the forms and the TARGET data system. It will also be of use to developers or those seeking to understand the data structure within TARGET.

If you have any questions concerning TARGET or the Data Dictionary, please call the Help Desk at (888) 461-8898.

DICTIONARY DESCRIPTION

2. *TARGET* DATA MODEL

The "high-level" Data Model below shows the data that ***TARGET*** collects. Developers who want to see detailed flow diagrams of the data files can refer to the full Data Model. In Part III, Data Elements, you will find descriptions of the fields in these files.



DICTIONARY DESCRIPTION

3. DATA ELEMENTS

This Data Dictionary describes each data element in a standard format. The top section provides information useful to those who use the Target system and forms; Field Description, Valid Entries and Business Rules. The lower section provides File References and Field Information for developers. The Data Element History section tracks changes to the system.

The sample data element below illustrates this format.

TARGET
Data Dictionary

LAST NAME

Field Description	Indicates the last name of client or staff member. Please do not include punctuation or titles (i.e., hyphens, apostrophes, Jr. etc.) when entering the data into the database.		
Valid Entries	Up to 60 characters.		
Business Rules	Required Field		
File References	CLIENT_MASTER FACILITY_STAFF		
Field Information	DASA Database (SQL)	Name: Length: Type:	Client_Last_Name Staff_Last_Name 60 Varchar, null
Data Element History	---		

L-2

4. DICTIONARY USE

To find a data element in this Dictionary, you can use two approaches. If you know the field title, look it up in the alphabetized section of the Data Elements; or you can turn to the Data Entry Form for the type of element you want (ex. Assessment/Admission form) to find the exact page number.

Part II

Forms Index

Forms Listing

Form Name	DSHS Form Number	Pages
Target Data Elements	04-416	11
Discharge or ADATSA Closure	04-416A	1
Detox Short Form	04-417	2
Treatment Activities	04-418	1
Client Support Activities	04-419	1
Agency Staff	04-420	1
Target Change of Circumstances	04-423	1
Group Treatment Activities	04-436	1
Agency Support Activities	04-437	1
Group Support Activities	04-438	1
Client Registry Lookup	22-382 (X)	2
Criminal Justice Multi-Party Release of Information	DOC 14-029	1
GAIN Short Screening	14-479	1

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Data Elements
Assessment/Admission Setup

STAFF IDENTIFICATION: S24
AGENCY NUMBER: A22

SECTION I: CLIENT IDENTIFICATION

1. LAST NAME	2. FIRST NAME	3. MIDDLE NAME	4. OTHER LAST NAME
L1	F5	M5	04

5. GENDER	6. DATE OF BIRTH	7. SOCIAL SECURITY NUMBER *	8. WASHINGTON DRIVER'S LICENSE OR ID NUMBER:
G13 ☐ Male ☐ Female	B1	S11	W1

9. WHICH RACE/ETHNICITY GROUP WOULD YOU IDENTIFY YOURSELF WITH (CHECK A MAXIMUM OF FOUR THAT APPLY)

- ☐ Asian Indian
- ☐ Black/African American
- ☐ Cambodian
- ☐ Chinese
- ☐ Filipino
- ☐ Guamanian
- ☐ Hawaiian (Native)
- ☐ Japanese
- ☐ Korean
- ☐ Laotian
- ☐ Middle Eastern
- ☐ Native American
- ☐ Other Asian R1
- ☐ Other Pacific Islander
- ☐ Other Race
- ☐ Refused to Answer
- ☐ Samoan
- ☐ Thai
- ☐ Vietnamese
- ☐ White/European American
- ☐ Non-federal tribe

Tribal Code (No. 1) T11

Tribal Code (No. 2) _____

10. SPANISH/HISPANIC/LATINO (CHECK ONE) S14

- ☐ Cuban
- ☐ Mexican, Mexican American, Chicano
- ☐ Not Spanish/Hispanic/Latino
- ☐ Other Spanish/Hispanic/Latino
- ☐ Puerto Rican
- ☐ Refused to Answer

NOTES

* The Social Security Act provides for the collection of Social Security Number to assist in the administration of public funded programs.

DBHR TARGET DATA ELEMENTS

Assessment / Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER A22	STAFF IDENTIFICATION S24
CLIENT NAME C18	

Section II: Assessment Setup

1. ASSESSMENT DATE A32

2. ASSESSMENT TIME : ☐ A.M. ☐ P.M. A32

3. DATE OF FIRST CONTACT D2

4. ASSESSMENT TYPE (CHECK ONE)
- ☐ ADATSA Assessment
- ☐ CD and Gambling
- ☐ Deferred Prosecution
- ☐ DUI/Dept. of Licensing
- ☐ Expanded Assessment
- ☐ Gambling
- ☐ Involuntary Commitment A33
- ☐ Other than the Above (CD)

5. ENTRY REFERRAL (CHECK ALL THAT APPLY)
- ☐ ADATSA Assessment Center
- ☐ At Risk Youth (ARY / CHINS)
- ☐ Attorney
- ☐ BECCA Involved E8
- ☐ Court / Probation
- ☐ DCFS / CPS
- ☐ Department of Corrections (DOC)
- ☐ Department of Licensing (DOL)
- ☐ Detoxification Facility
- ☐ Diversion
- ☐ DSHS Community Services Office
- ☐ Employer / EAP
- ☐ First Steps or PPP Case
- ☐ Gambling Facility
- ☐ Group Care
- ☐ 24 Hour Help line
- ☐ Involuntary Commitment
- ☐ JRA
- ☐ Mass media
- ☐ MD / Primary Care Provider
- ☐ Mental Health Provider
- ☐ Other Alcohol / Drug Facility
- ☐ Other Health Care Provider
- ☐ Pharmacist
- ☐ Phone book
- ☐ Police
- ☐ School/Education
- ☐ Self Help
- ☐ Self / Family
- ☐ Social Security Administration
- ☐ Website
- ☐ Other:

6. CLIENT REGISTRY PARTICIPATION C20 ☐ Permitted ☐ Refused ☐ Revoked	7. REGISTRY STATUS DATE C19	8. REFERRING CSO/HCS R7	9. CSO REFERRAL DATE C34

Section III: Admission Setup

1. ADMISSION DATE A18

2. ADMISSION TIME : A18 ☐ A.M. ☐ P.M.

3. DATE OF FIRST CONTACT D2

4. BECCA admission? ☐ Yes ☐ No

5. Is this an ADATSA admission? ☐ Yes ☐ No A13

6. Admission type: A19 ☐ CD ☐ Gambling ☐ Both

7. ENTRY REFERRAL (CHECK ALL THAT APPLY)
- ☐ ADATSA Assessment Center
- ☐ At Risk Youth (ARY / CHINS)
- ☐ Attorney
- ☐ BECCA Involved E8
- ☐ Court / Probation
- ☐ DCFS / CPS
- ☐ Department of Corrections (DOC)
- ☐ Department of Licensing (DOL)
- ☐ Detoxification Facility
- ☐ Diversion
- ☐ DSHS Community Services Office
- ☐ Employer / EAP
- ☐ First Steps or PPP Case
- ☐ Gambling Facility
- ☐ Group Care
- ☐ 24 Hour Help line
- ☐ Involuntary Commitment
- ☐ JRA
- ☐ Mass media
- ☐ MD / Primary Care Provider
- ☐ Mental Health Provider
- ☐ Other Alcohol / Drug Facility
- ☐ Other Health Care Provider
- ☐ Pharmacist
- ☐ Phone book
- ☐ Police
- ☐ School/Education
- ☐ Self Help
- ☐ Self / Family
- ☐ Social Security Administration
- ☐ Website
- ☐ Other:

8. REFERRING AGENCY R5	9.REFERRING ASSESSMENT DATE R6

10. REFERRING CSO R7	11. CLIENT REGISTRY PARTICIPATION C20 ☐ Permitted ☐ Refused ☐ Revoked	12.REGISTRY DATE C19

NOTES

DBHR TARGET DATA ELEMENTS

Assessment/Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	S24

CLIENT NAME C18

SECTION IV: CLIENT MILESTONES

A: LANGUAGE SKILLS

1. PRIMARY LANGUAGE USED IN YOUR HOME IF OTHER THAN ENGLISH (CHECK ONE BOX ONLY)

☐ American Sign Language	☐ Farsi	☐ Ilocano	☐ Marathi	☐ Samoan
☐ Amharic	☐ Finnish	☐ Indian (General)	☐ Mien	☐ Spanish
☐ Arabic P17	☐ French	☐ Italian	☐ Norwegian	☐ Tagalog
☐ Cambodian	☐ German	☐ Japanese	☐ Other Language	☐ Thai
☐ Cantonese	☐ Greek	☐ Korean	☐ Polish	☐ Tigrigna
☐ Chinese	☐ Gujarati	☐ Lakota Sioux	☐ Puyallup	☐ Ukrainian
☐ Czech	☐ Hindi	☐ Laotian	☐ Romanian	☐ Unknown Language
☐ Dutch	☐ Hmong	☐ Malay	☐ Russian	☐ Vietnamese
	☐ Hungarian	☐ Mandarin	☐ Salish	☐ Yakama

B. FAMILY AND SOCIAL ARRANGEMENTS

1. In the last 30 days: How many times have you attended a self-help session related to recovery from substance abuse or dependence? (199 means not collected) ____ S5

2. RESIDENCY (CHECK ONE BOX ONLY)

☐ Controlled Environment	☐ Jail/Prison	☐ Student Residence
☐ Drug-Free Shared/Transitional Housing	☐ No Stable Arrangement	☐ Transient Quarters
☐ Foster/Group Home R13	☐ On the Street	☐ Work/Training Release Center
☐ Homeless Shelter/Mission	☐ Personal Residence	
☐ Hospital/Other Institution	☐ Single Room Occupancy	

3. STREET ADDRESS	4. CITY	5. STATE	6. ZIP CODE
S27	C16	S25	Z1

7. COUNTY	8. TELEPHONE NUMBER
C32	T2

9. Do you have a valid driver's license (ASI)? D27 ☐ Yes ☐ No

10. Do you have an automobile available (ASI) A39 ☐ Yes ☐ No

11. MARITAL STATUS (CHECK ONE BOX ONLY) M2
☐ Divorced ☐ Married or Committed Relationship ☐ Never Married ☐ Separated ☐ Widowed

12. Are you satisfied with your current marriage or relationship status (ASI)? ☐ Yes ☐ No ☐ Indifferent M1

13. WHO ARE YOU LIVING WITH (CHECK ONE BOX)

☐ Alone	☐ Other Family Members with or without Child(ren)	☐ Spouse/Partner Alone
☐ Child(ren) Alone L2	☐ Parent(s)/Parent(s) with Child(ren)	☐ Spouse/Partner and Child(ren)
☐ Foster parents/Group Home	☐ Roommates	
☐ Friends		

14. HOW DO YOU IDENTIFY YOUR SEXUAL ORIENTATION?
☐ Bisexual ☐ Choosing Not to Disclose ☐ Gay/Lesbian ☐ Heterosexual ☐ Questioning ☐ Transgender S9

NOTES

DBHR TARGET DATA ELEMENTS

Assessment/Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER A22	STAFF IDENTIFICATION S24
CLIENT NAME C18	

SECTION IV: CLIENT MILESTONES (CONTINUED)

B. FAMILY AND SOCIAL ARRANGEMENTS (CONTINUED)

15. Persons in household (including you): ____ P2
16. Number of your children or siblings under 18 years living with you: ____ C15
17. Number of your children or siblings under 18 years not living with you: ____ C14
18. Number of other children under 18 years living with you: ____ C13

19. In the last thirty days, have you had significant periods in which you have experienced serious problems getting along with (ASI): R12

☐ Children ☐ Father ☐ Other Significant Family Member
☐ Close Friends ☐ Mother ☐ Sister/Brother
☐ Co-workers ☐ Neighbors ☐ Spouse/Sexual Partner

20. In the last 30 days (ASI):
How many times have you had serious conflicts with your family members: ____ C23
How troubled or bothered have you been by family problems (ASI Scale Number): ____ T33

21. How important to you now is treatment or counseling for these family problems (ASI Scale Number): ____ T9

22. Is your current living environment conducive to recovery? ☐ Yes ☐ No L4

23. IF UNDER 18 YEARS, HOW MANY TIMES HAVE YOU RUN AWAY IN THE PAST YEAR? R17

☐ 0 times ☐ 2 times ☐ 4 times ☐ 6 to 10 times ☐ More than 20 times
☐ 1 time ☐ 3 times ☐ 5 times ☐ 11 to 20 times

C. EDUCATION

1. ACADEMIC/TRAINING ACHIEVEMENT (CHECK ONE BOX ONLY) A1

☐ AA Degree (Academic) ☐ No Degree ☐ Vocational Training (Certificate)
☐ AA Degree (Vocational) ☐ Post-Graduate Degree ☐ Vocational Training (No Certificate)
☐ GED ☐ Undergraduate Degree
☐ High School Diploma ☐ Unknown

2. YEARS OF EDUCATION: ____ Y1

3. In the last twelve months:
How many times have you been suspended from school: ____ S2
How many schools have you been expelled from: ____ S1

4. CURRENT SCHOOL STATUS (CHECK ONE) S3

☐ Dropped Out ☐ Not Enrolled
☐ Expelled ☐ Part Time
☐ Full Time ☐ Suspended

D. EMPLOYMENT AND INCOME

1. EMPLOYMENT ACTIVITY (CHECK ONE BOX ONLY) E2

☐ Employed Full-Time ☐ Institutionalized ☐ Retired
☐ Employed Part-Time (less than 30 hours) ☐ Military ☐ Under Age Not in Workforce
☐ Employed Temporary/On Call/Intermittent ☐ Not in Work Force ☐ Unemployed Not Seeking Work
☐ Homemaker ☐ Not Working Due to Disability ☐ Unemployed Seeking Work

NOTES

DBHR TARGET DATA ELEMENTS

Assessment / Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	S24

CLIENT NAME C18

Section IV: Client Milestones (Continued)

D. EMPLOYMENT AND INCOME (CONTINUED)

2. PRIMARY SOURCE OF INCOME OR SUPPORT (CHECK ONE BOX ONLY)

☐ Disability ☐ Other S13 ☐ Social Security (SSA/SSDI)
☐ Family/Friend (most Youth fall here) ☐ Public Assistance ☐ Unemployment Compensation
☐ None ☐ Retirement Pension ☐ Wages/Salary

3. MONTHLY HOUSEHOLD GROSS INCOME (Immediate family ONLY) M15

4. MONTHLY PERSONAL INCOME (GROSS) M16

5. In the last 30 days (ASI):
How many days were you paid for working: ___ D3
How much money did you receive from employment: ___ E6
How much money did you receive from illegal activities: ___ I4

E. MILITARY VETERAN

1. Have you ever served on active duty in the U.S. Military?
☐ Yes ☐ No ☐ Refused V2
Start month/year: M9 End month/year: ___ M10

2. What branch of service?
☐ Air Force ☐ Marine Corps M11
☐ Army ☐ Navy
☐ Coast Guard

3. Have you ever been a member of the National Guard or Reserves? G19
☐ National Guard ☐ No ☐ Refused ☐ Reserves
Start month/year: ___ M9 End month/year: ___ M10

4. Are you the spouse, partner or dependent minor of someone who has served or is serving in the U.S. Military, National Guard, or Reserves?
☐ Child ☐ Spouse/Domestic Partner
☐ No M8 ☐ Widow
☐ Other ☐ Refused
Start month/year: M9 End month/year: ___ M10

F. PHYSICAL HEALTH

1. PREVIOUS MEDICAL TREATMENT – NOT PREVENTATIVE

In the last 30 days (ASI):
How many days have you experienced medical problems: ___ M3
How troubled or bothered have you been by these medical problems (ASI Scale Number): ___ T33
How important to you now is treatment for these medical problems (ASI Scale Number): ___ T9

(FOR ASSESSMENTS AND ADMISSIONS, PREVIOUS MEANS THE LAST YEAR, FOR DISCHARGE, PREVIOUS MEANS SINCE ADMISSION)

2. Number of previous emergency room visits: ___ P11
3. Number of previous outpatient/clinic visits: ___ P16
4. Number of previous hospital inpatient admissions: ___ P13
5. Number of previous hospital inpatient days: ___ P12
6. How many times have you been tested for STD in the last year? ___ S26

	YES	NO	IN NEED
7. Currently under care for infectious disease? C3	☐	☐	☐
8. Have you ever had a traumatic head injury that resulted in loss of consciousness? T8	☐	☐	☐
9. Currently under care for traumatic injury? C4	☐	☐	☐
10. Currently under care for continuing illness? C1	☐	☐	☐
11. Currently under care for dental? C2	☐	☐	☐

NOTES

DBHR TARGET DATA ELEMENTS

Assessment / Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	S24
CLIENT NAME	C18

Section IV: Client Milestones (Continued)

H. PHYSICAL HEALTH (CONTINUED)

12. DISABILITY – MAJOR LIMITATIONS (CHECK ALL THAT APPLY)

☐ ADHD/ADD ☐ Hearing ☐ Mobility ☐ Speech-Impaired
☐ Cognitive Impairment ☐ Learning ☐ None ☐ Vision D13
☐ Developmental ☐ Mental/Psychological ☐ Parkinson's ☐ Other:

13. HAVE YOU EVER BEEN A VICTIM OF DOMESTIC VIOLENCE? ☐ Yes ☐ No ☐ Uncertain D26

14. ARE YOU CURRENTLY A VICTIM OF DOMESTIC VIOLENCE? ☐ Yes ☐ No ☐ Uncertain D25

G. PREGNANCY STATUS

1. ESTIMATED DUE DATE (MM/DD/YYYY)	2. HAS PRENATAL PROVIDER?	3. PREGNANCY END DATE (MM/DD/YYYY)
E13	☐ Yes ☐ No P7	P4

H. MENTAL/PSYCHOLOGICAL CONDITIONS

1. PREVIOUS MENTAL TREATMENT (FOR ASSESSMENTS AND ADMISSIONS, PREVIOUS MEANS THE LAST YEAR. FOR DISCHARGE, PREVIOUS MEANS SINCE ADMISSION.) (CHECK ONE BOX ONLY)
☐ No/NA ☐ Unknown ☐ With Hospitalization ☐ With Outpatient Treatment P13

2. DAYS HOSPITALIZED FOR MENTAL TREATMENT D4

3. **CURRENT PSYCHOLOGICAL EVALUATION** (CHECK ONE BOX ONLY)
☐ No Evaluation Made C38 ☐ Psychological Evaluation Made, Problem Diagnosed
☐ Problem Indicated, Referral Made ☐ Re-evaluation Needed
☐ Psychological Evaluation Made, No Problem Found

4. Does anyone in your immediate family or current living situation have a diagnosed mental illness? ☐ Yes ☐ No M4
5. In the last 30 days (ASI):
   How many days have you experienced psychological or emotional problems: ___ P20
   How troubled or bothered have you been by psychological or emotional problems (ASI Scale Number): ___ T33
6. How important to you now is treatment for these psychological problems (ASI Scale Number): ___ T9
7. In the past 30 days have you had a significant period of time (that was not a direct result of A/D use) in which you have (ASI):

		Yes	No
a.	Experienced serious depression - sadness, hopelessness, loss of interest, difficulty with daily functions? E16	☐	☐
b.	Experienced serious anxiety/tension - uptight, unreasonably worried, inability to feel relaxed? E15	☐	☐
c.	Experienced hallucinations - saw things or heard voices that were not there? E17	☐	☐
d.	Experienced trouble understanding, concentrating, or remembering? E19	☐	☐
	For the next three items below, patient can have been under the influence of alcohol / drugs.		
e.	Experienced trouble controlling violent behavior including episodes of rage or violence? E20	☐	☐
f.	Experienced serious thoughts of suicide (patient seriously considered a plan for taking his/her life)? E18	☐	☐
g.	Attempt suicide (include actual suicide gestures or attempts)? A36	☐	☐

8. CURRENTLY RECEIVING MENTAL HEALTH SERVICES?	9. CURRENTLY ON PRESCRIBED PSYCHIATRIC MEDICATIONS? C39	10. QUADRANT PLACEMENT
☐ Yes ☐ No ☐ In Need C41	☐ Yes ☐ No ☐ Unknown	Q1

NOTES

DBHR TARGET DATA ELEMENTS

Assessment/Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	C24

CLIENT NAME C18

SECTION IV: CLIENT MILESTONES (CONTINUED)

I. ARRESTS AND LEGAL ISSUES

1. PREVIOUS ARREST(S) (FOR ASSESSMENTS AND ADMISSIONS, PREVIOUS MEANS THE LAST YEAR. FOR DISCHARGE, PREVIOUS MEANS SINCE ADMISSION.) (CHECK ALL THAT APPLY)

☐ Crime(s) Unknown	☐ Embezzlement	☐ None
☐ Criminal Trespass P8	☐ Forgery	☐ Other Public-Order Offenses
☐ Domestic Violence	☐ Fraud (includes bad checks	☐ Property Crimes
☐ Driving Under the Influence	☐ ID Theft	☐ Theft
☐ Drug Possession	☐ Malicious Mischief or Disorderly Conduct	☐ Violent Crimes
☐ Drug Trafficking or Manufacturing		

2. How many times in the last 30 days have you been arrested? ____ A28

3. How many times have you ever been charged with (NOTE: Adult offense only) (ASI):

Arson ____	Forgery ____	Rape ____
Assault ____ C9	Homicide ____	Robbery ____
Burglary ____	Other Criminal Offense ____	Shoplifting ____
Contempt of Court ____	Probation Violation ____	Weapons Offense ____
Drug Related Violations ____	Prostitution ____	

4. CURRENT LEGAL INVOLVEMENT (CHECK ALL THAT APPLY)

☐ Awaiting Charges	☐ Drug Court - Adult	☐ Incarcerated, Pre-Trial
☐ Awaiting Trial	☐ Drug Court - Juvenile	☐ None
☐ Child Custody Issue	☐ In DUI Deferred Prosecution Status	☐ On Probation or Parole
☐ Convicted, Awaiting Sentence		☐ On Trial
☐ CPS Court Involved	☐ In Other Supervised Program	☐ Petitioning for DUI Deferred Prosecution
☐ Diversion C35	☐ Incarcerated, Post-Conviction	

5. How many days in the past 30 days have you engaged in illegal activities for profit: ____ (ASI) I3

6. How serious do you feel your present legal problems are (ASI Scale Number): ____ T33

7. How important to you now is counseling or referral for these legal problems (ASI Scale Number): ____ T9

J GAMBLING ISSUE

	Yes	No
1. In the last twelve months:		
a. Have there been periods when you needed to gamble with increasing amounts of money or with larger bets than before in order to get the same feeling of excitement? G3	☐	☐
b. Have you continued to gamble in spite of adverse consequences that have affected your finances, family relationships, work, or other parts of your life? G2	☐	☐
c. Have you lied to family members, friends, or others about how much you gamble? G7	☐	☐
d. Have there been periods lasting two weeks or longer when you spent a lot of time thinking about you gambling experiences or planning out future gambling ventures or bets? G10	☐	☐
e. Have you tried but not succeeded in stopping cutting, down, or controlling your gambling behavior? G12	☐	☐

2. In the last twelve months:

a. Have you contemplated or attempted suicide? ☐ Yes ☐ No G9

b. Have you contemplated or attempted to do physical harm to another person? ☐ Yes ☐ No A35

3. Score on South Oaks Gambling Screen (SOGS): ____ S12

NOTES

DBHR TARGET DATA ELEMENTS

Assessment/Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER A22	STAFF IDENTIFICATION S24
CLIENT NAME C18	

SECTION IV: CLIENT MILESTONES (CONTINUED)

J GAMBLING ISSUE (CONTINUED)

4. In the past 30 days, how many days have you played (enter quantity):

Bingo ____	Gambling and substance use in the same day ____
Bowl, pool, golf or other games of skill ____	Internet gambling ____
Card Games (non Casino) ____	Lottery, numbers, instant tickets(scratch-offs) ____
Casino table games ____ G11	Other forms of gambling ____
Dice games, dominoes ____	Play slots, poker machines, video lottery terminals ____
Horses, dogs ____	Sports ____
Gambling more than you can afford ____	Stock options, commodities ____

5. **In the past 30 days:**
   a. How much money would you say you spent per week on gambling? $____ G8
   b. Number of gambling episodes per week ____ G5

K. SUBSTANCE ABUSE

1. If administered a breath test, what were the results: ____ B3
2. In the past 30 days (ASI):

How much money would you say you spent on alcohol: $____ A23
How much money would you say you spent on drugs: $____ D28
How many days have you experienced alcohol problems: ____ A25
How troubled or bothered have you been by these alcohol problems (ASI Scale Number): ____ T33
How important to you now is treatment for these alcohol problems (ASI Scale Number):____ T9
How many days have you experienced drug problems: ____ D29
How troubled or bothered have you been by these drug problems (ASI Scale Number):____ T33
How important to you now is treatment for these drug problems (ASI Scale Number): ____ T9

3. Does anyone in your immediate family or current living situation have an alcohol problem? ☐ Yes ☐ No A26
4. Does anyone in your immediate family or current living situation have a problem with drugs other than alcohol or tobacco? ☐ Yes ☐ No D30
5. Does anyone in your immediate family or current living situation have a gambling problem? ☐ Yes ☐ No G4
6. How many times in the last 30 days have you used alcohol to intoxication: ____ (ASI) A24

NOTES

DBHR TARGET DATA ELEMENTS

Assessment/Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	S24

CLIENT NAME C18

SECTION IV: CLIENT MILESTONES (CONTINUED)

L. SUBSTANCE USE HISTORY

KEY CODES

PST CODES	ADMINISTRATION CODES	FREQUENCY OF USE/PEAK USE PER MONTH
Primary (1) P19	Inhalation (I) Oral (O) A17	1 - No use 4 - 13 or more times
Secondary (2)	Injection (J) Other (X)	2 - 1 to 3 times 5 - Daily F8 + P1
Tertiary (3)	Intra nasal (N) Smoking (S)	3 - 4 to 12 times 6 - Unknown

SUBSTANCES

SUBSTANCE	PST (CHECK ONE BOX PER SUBSTANCE) 1	2	3	SUBSTANCE	PST (CHECK ONE BOX PER SUBSTANCE) 1	2	3
1. Alcohol	☐	☐	☐	12. No substance abuse	☐	☐	☐
2. Amphetamines	☐	☐	☐	13. Other:	☐	☐	☐
3. Barbiturates	☐	☐	☐	14. Other Sedatives or Hypnotics	☐	☐	☐
4. Benzodiazepines S28	☐	☐	☐	15. Other Opiates and Synthetics	☐	☐	☐
5. Cocaine	☐	☐	☐	16. Over the Counter	☐	☐	☐
6. Hallucinogens	☐	☐	☐	17. Oxy/Hydro Codone	☐	☐	☐
7. Heroin	☐	☐	☐	18. PCP	☐	☐	☐
8. Inhalants	☐	☐	☐	19. Prescribed Opiate Substitute	☐	☐	☐
9. Major tranquilizers	☐	☐	☐	20. Substance Unknown	☐	☐	☐
10. Marijuana – Cannabis	☐	☐	☐	21. Tobacco products (can not be primary)	☐	☐	☐
11 Methamphetamine	☐	☐	☐		☐	☐	☐

1. IN THE FOLLOWING TABLE DESCRIBE SUBSTANCE USE WITH THE ABOVE KEY CODES.

PST	SUBSTANCE (CODE)	ADMIN (CODE)	AGE OF FIRST USE	FREQUENCY OF USE IN LAST 30 DAYS (CODE)	PEAK USE PER MONTH IN LAST YEAR (CODE)	DATE LAST USED MM/DD/YYYY	AMOUNT TAKEN/COMMENTS
1	S28	A17	A20	F8	P1	D1	A27
2							
3							

2. CURRENT STAGE OF USE

☐ Chemically Dependent (Addicted) ☐ Experimental Use ☐ In Recovery C40

☐ Abuse ☐ No Significant Problem

3. Have you ever used needles to illicitly inject drugs? ☐ Continuously ☐ Intermittently ☐ Rarely ☐ Never E14

4. Inject drugs in the last 30 days? ☐ Yes ☐ No **This option for abort discharge ONLY:** ☐ **Unknown** I8

5. Currently use tobacco products: ☐ Smoke ☐ Chew ☐ Both ☐ None T5

Ever tried to quit using tobacco products? ☐ Yes ☐ No T6

Want to quit using tobacco products now? ☐ Yes ☐ No T7

NOTES

DBHR TARGET DATA ELEMENTS

Assessment / Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	S24

CLIENT NAME C18

Section V: Client Referrals, Modality, and Funding

Complete the section that corresponds to the client's assessment or admission. Note: If this is for an ADATSA Assessment, do not use this form instead continue with the DSHS 04-433(X), ADATSA Assessment Addendum.

☐ A. ASSESSMENT COMPLETION (NON-ADATSA)

REFERRALS

1. FORWARD REFERRAL (CHECK ALL THAT APPLY)

☐ ADATSA Assessment Agency	☐ CSO F6	☐ No Referral
☐ ADATSA Treatment	☐ Detoxification	☐ Non-ADATSA Treatment
☐ Alcohol/Drug Information School	☐ Gambling Treatment	☐ Other (specify):
☐ ATR Services	☐ Medical/Dental Services	☐ Self-Help Group
☐ CD Involuntary Commitment	☐ Mental Health Services	

2. Did you suggest client apply for DSHS Public Assistance? S31
☐ Yes ☐ No

3. RECOMMENDED ASAM PLACEMENT LEVEL A29

FUNDING SOURCE

1. SPECIAL PROJECT STATE	2. SPECIAL PROJECT COUNTY	3. SPECIAL PROJECT AGENCY
S17	S16	S15

4. CURRENT PUBLIC ASSISTANCE (CHECK ONE BOX ONLY)

☐ ADATSA	☐ None
☐ Applicant P21	☐ Refugee Assistance
☐ Disability Lifeline	☐ Supplemental Security Income (SSI; S01)
☐ Disability Lifeline - Expedited	☐ Temporary Assistance for Needy Families (TANF)
☐ Medical Assistance Only	

5. CONTRACT (CHECK ONE BOX ONLY)

☐ ADATSA	☐ Criminal Justice – Innovation	☐ Other/None
☐ Adult Outpatient C26 + M14	☐ DOC - COM	☐ Pregnant/Parenting
☐ Adult Residential	☐ DOC - Jail	☐ TANF (ESA)
☐ ATR – Access to Recovery	☐ Gov2Gov (Non XIX)	☐ Tribe MOA (Title XIX)
☐ CDDA (COMM)	☐ Indian Health Services (IHS)	☐ WA-CARES
☐ CDDA (LS)	☐ Local Sales Tax	☐ WASBIRT
☐ Criminal Justice (CJ)	☐ Molina – Managed Care	☐ Youth Treatment

6. FUND SOURCE CD (CHECK ONE BOX ONLY)

☐ Agency Funded	☐ Federal Direct	☐ State Direct
☐ County Community Services F9 + M14	☐ Other	☐ State DSHS (Non DASA)
☐ DOC	☐ Private Pay	☐ Tribal Community Services

7. FUND SOURCE GAMBLING (Check One Box Only)	8. TITLE XIX FUNDED	9. GOVERNING COUNTY (If Not County Of Facility)
☐ State Direct ☐ Private Pay ☐ Other G6	☐ Yes 74 ☐ No	C31

10. ASSESSMENT STAFF ID	11. CASE MONITOR (IF DIFFERENT)	12. ASSESSMENT DURATION
S23	S21	HOURS MINUTES D32

13. INTERVIEWER'S SIGNATURE	14. DATE

NOTES

DBHR TARGET DATA ELEMENTS

Assessment / Admission and Discharge

☐ Assess ☐ Admit

AGENCY NUMBER	STAFF IDENTIFICATION
A22	S24

CLIENT NAME C18

Section V: Client Referrals, Modality, and Funding (Continued)

☐ **B. ADMISSION COMPLETION**

1. CURRENT PUBLIC ASSISTANCE (CHECK ONE BOX ONLY)

☐ ADATSA
☐ Applicant
☐ Disability Lifeline
☐ Disability Lifeline - Expedited
☐ Medical Assistance Only
☐ None P21
☐ Refugee Assistance
☐ Supplemental Security Income (SSI)
☐ Temporary Assistance for Needy Families (TANF)

2. MODALITY (CHECK ONE BOX ONLY)

☐ Detoxification
☐ Group Care Enhancement
☐ Housing Support Services
☐ Intensive Inpatient
☐ Intensive Outpatient
☐ Long-Term Residential
☐ Recovery House M12 + M14
☐ Methadone/Opiate Substitution Treatment
☐ Outpatient

3. CONTRACT (CHECK ONE BOX ONLY)

☐ ADATSA
☐ Adult Outpatient
☐ Adult Residential
☐ ATR – Access to Recovery
☐ CDDA (COMM) C26 + M14
☐ CDDA (LS)
☐ Criminal Justice (CJ)
☐ Criminal Justice – Innovation
☐ DOC - COM
☐ DOC - Jail
☐ Gov2Gov (Non XIX)
☐ Indian Health Services (IHS)
☐ Local Sales Tax
☐ Molina – Managed Care
☐ Other/None
☐ Pregnant/Parenting
☐ TANF (ESA)
☐ Tribe MOA (Title XIX)
☐ WA-CARES
☐ WASBIRT
☐ Youth Treatment

4. FUND SOURCE (CHECK ONE BOX ONLY)

☐ Agency Funded
☐ County Community Services
☐ DOC
☐ Federal Direct
☐ Other
☐ Private Pay
☐ State Direct F9 + M14
☐ State DSHS (Non DASA)
☐ Tribal Community Services

5. FUND SOURCE GAMBLING (CHECK ONE BOX ONLY)	6. TITLE XIX FUNDED	8. RECOMMENDED ASAM PLACEMENT LEVEL
☐ State Direct ☐ Private Pay ☐ Other G6	☐ Yes ☐ No T3	A29

9. SPECIAL PROJECT STATE	10. SPECIAL PROJECT COUNTY	11. SPECIAL PROJECT AGENCY
S17	S16	S15

12. GOVERNING COUNTY (IF NOT COUNTY OF FACILITY)	13. INSURANCE PAYMENT (PRIVATE) (CHECK ONE BOX ONLY) I9
C30	☐ No Insurance Payment ☐ 50% or greater ☐ Less than 50%

14. ADMISSION STAFF ID	15. COUNSELOR STAFF ID	16. ADMISSION DURATION
S20	S23	Hours: Minutes: D32

17. COURT ORDERED	18. DOC SUPERVISION	19. CONSENT STATUS
☐ CD ☐ MH ☐ Both ☐ None C33	☐ Yes ☐ No D24	C25 ☐ Permitted ☐ Refused ☐ Revoked

20. CONSENT DATE	21. INTERVIEWER'S SIGNATURE	22. DATE
C24		

NOTES

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)
ALCOHOL AND DRUG ADDICTION TREATMENT AND SUPPORT ACT (ADATSA)

DBHR Target Data Elements
Discharge or ADATSA Closure

ADATSA: ☐ Yes ☐ No

AGENCY NUMBER: A22

STAFF IDENTIFICATION: S24

Section I: Client Information

1. LAST NAME	2. FIRST NAME	3. MIDDLE NAME	4. DATE OF BIRTH
L1	F5	M5	B1

5. DISCHARGE OR CLOSURE TYPE (CHECK ONE BOX ONLY) D15

- ☐ Charitable Choice
- ☐ Client Died
- ☐ Completed Treatment
- ☐ Funds Exhausted
- ☐ Inappropriate Admission
- ☐ Incarcerated
- ☐ Moved
- ☐ No Contact/Abort
- ☐ Not Amenable to Treatment/Lacks Engagement
- ☐ Rule Violation
- ☐ Transferred to Different Facility
- ☐ Withdrew Against Program Advice
- ☐ Withdrew With Program Advice

Section II: Discharge

1. ADMISSION DATE	2. DISCHARGE DATE	3. DISCHARGE TIME	4. LEFT TREATMENT DUE TO RELAPSE
A18	D14	: D14	☐ Yes ☐ No ☐ Unknown

5. IF RECOMMENDING CONTINUING ALCOHOL/DRUG TREATMENT (CHECK ONE MODALITY BOX) R4

- ☐ Detoxification
- ☐ Group Care Enhancement
- ☐ Intensive Inpatient
- ☐ Intensive Outpatient
- ☐ Long-Term Residential
- ☐ Methadone/Opiate (Substitution) Treatment
- ☐ Outpatient
- ☐ Recovery House

6. Has client been essentially compliant with program or treatment expectations: ☐ Yes ☐ No C22

7. OTHER SERVICE REFERRAL (CHECK ALL THAT APPLY) O6

- ☐ ADATSA Assessment Agency
- ☐ ATR Services
- ☐ Gambling Treatment
- ☐ Housing Assistance
- ☐ Housing Support Services
- ☐ Mental Health Services
- ☐ Medical / Dental Services
- ☐ Mental Health Services
- ☐ None
- ☐ Other Health Care Provider
- ☐ Self-Help Group
- ☐ Vocational Rehabilitation / Job Placement
- ☐ Other: _____

RECOMMENDED ASAM PLACEMENT LEVEL: A29

Section III: ADATSA Closure (Assessment Centers Only)

1. ASSESSMENT DATE	2. CLOSURE DATE
A32	C21

DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Detox Short Form

AGENCY NUMBER: A22

CLIENT IDENTIFICATION

1. LAST NAME	2. FIRST NAME	3. MIDDLE NAME
L1	F5	M5

4. OTHER LAST NAME	5. GENDER	6. DATE OF BIRTH
04	☐ Male ☐ Female G13	B1

7. SOCIAL SECURITY NUMBER*	8. WASHINGTON DRIVER'S LICENSE OR ID NUMBER
S11	W1

8. WHICH RACE/ETHNICITY GROUP WOULD YOU IDENTIFY YOURSELF WITH (CHECK A MAXIMUM OF FOUR THAT APPLY)

☐ Asian Indian	☐ Guamanian	☐ Native American	☐ Thai
☐ Black/African American	☐ Hawaiian (Native)	☐ Other Asian	☐ Vietnamese
☐ Cambodian	☐ Japanese	☐ Other Pacific Islander	☐ White/European American
☐ Chinese	☐ Korean R1	☐ Other Race	
☐ Filipino	☐ Laotian	☐ Refused to Answer	Tribal Code (No. 1) _____
	☐ Middle Eastern	☐ Samoan	Tribal Code (No. 2) _____

9. SPANISH/HISPANIC/LATINO (CHECK ONE BOX ONLY) S14

☐ Cuban	☐ Not Spanish/Hispanic/Latino	☐ Puerto Rican
☐ Mexican, Mexican American, Chicano	☐ Other Spanish/Hispanic/Latino	☐ Refused to answer

TREATMENT INFORMATION

BEGIN DATE	BEGIN TIME	END DATE	END TIME
A18	A18 ☐ A.M. ☐ P.M.	D14	D14 ☐ A.M. ☐ P.M.

KEY CODES

PST CODES	ADMINISTRATION CODES	FREQUENCY OF USE/PEAK USE PER MONTH
Primary (1) P19	Inhalation (I) Oral (O) A17	1 - No use 4 - 13 or more times
Secondary (2)	Injection (J) Other (X)	2 - 1 to 3 times 5 - Daily F8+P1
Tertiary (3)	Intra nasal (N) Smoking (S)	3 - 4 to 12 times 6 - Unknown

SUBSTANCES

SUBSTANCE	PST (CHECK ONE BOX PER SUBSTANCE) 1 2 3	SUBSTANCE	PST (CHECK ONE BOX PER SUBSTANCE) 1 2 3
1. Alcohol	☐ ☐ ☐	12. No substance abuse	☐ ☐ ☐
2. Amphetamines	☐ ☐ ☐	13. Other:	☐ ☐ ☐
3. Barbiturates	☐ ☐ ☐	14. Other Sedatives or Hypnotics	☐ ☐ ☐
4. Benzodiazepines S28	☐ ☐ ☐	15. Other Opiates and Synthetics	☐ ☐ ☐
5. Cocaine	☐ ☐ ☐	16. Over the Counter S28	☐ ☐ ☐
6. Hallucinogens	☐ ☐ ☐	17. Oxy/Hydro Codone	☐ ☐ ☐
7. Heroin	☐ ☐ ☐	18. PCP	☐ ☐ ☐
8. Inhalants	☐ ☐ ☐	19. Prescribed Opiate Substitute	☐ ☐ ☐
9. Major tranquilizers	☐ ☐ ☐	20. Substance Unknown	☐ ☐ ☐
10. Marijuana – Cannabis	☐ ☐ ☐	21. Tobacco products (can not be primary)	☐ ☐ ☐
11 Methamphetamine	☐ ☐ ☐		

1. IN THE FOLLOWING TABLE DESCRIBE SUBSTANCE USE WITH THE ABOVE KEY CODES.

PST	SUBSTANCE (CODE)	ADMIN (CODE)	AGE OF FIRST USE	FREQUENCY OF USE IN LAST 30 DAYS (CODE)	PEAK USE PER MONTH IN LAST YEAR (CODE)	DATE LAST USED MM/DD/YYYY	AMOUNT TAKEN/COMMENTS
1	S28	A17	A20	F8	P1	D1	A27
2							
3							

* The Social Security Act provides for the collection of Social Security Number to assist in the administration of public funded programs.

DSHS 04-417 (REV. 10/2010)

DBHR Target Detox Short Form

CLIENT NAME	AGENCY NUMBER	STAFF IDENTIFICATION
C18	A22	S24

2. CONTRACT (CHECK ONE BOX ONLY)
☐ Adult Outpatient ☐ Criminal Justice (CJ) ☐ Criminal Justice – Innovation ☐ Local Sales Tax
☐ Other/None ☐ Pregnant/Post Partum ☐ Youth Treatment C26

3. FUND SOURCE (CHECK ONE BOX ONLY)
☐ Agency Funded ☐ Federal Direct F9 + M14 ☐ Private Pay ☐ State Non DSHS
☐ County Community Services ☐ Other ☐ State Direct ☐ Tribal Community Services

4. TITLE XIX FUNDED
☐ Yes ☐ No T4

5. INSURANCE PAYMENT (CHECK ONE BOX ONLY)
☐ Less than 50% ☐ 50% or greater ☐ No Insurance Payment I9

6. SPECIAL PROJECT STATE	7. SPECIAL PROJECT COUNTY	8. SPECIAL PROJECT AGENCY
S17	S16	S15

9. CURRENT PUBLIC ASSISTANCE (CHECK ONE BOX ONLY)
☐ ADATSA ☐ None
☐ Applicant P21 ☐ Refugee Assistance
☐ Disability Lifeline ☐ Supplemental Security Income (SSI; S01)
☐ Disability Lifeline - Expedited ☐ Temporary Assistance for Needy Families (TANF)
☐ Medical Assistance Only

10. ENTRY REFERRAL (CHECK ALL THAT APPLY)

☐ ADATSA Assessment Center	☐ Employer / EAP	☐ Other Health Care Provider
☐ At Risk Youth (ARY / CHINS)	☐ First Steps or PPP Case	☐ Pharmacist
☐ Attorney	☐ Gambling Facility	☐ Phone Book
☐ BECCA Involved	☐ Group Care	☐ Police
☐ Court / Probation E8	☐ Help Line	☐ School/Education
☐ DCFS / CPS	☐ Involuntary Commitment	☐ Self/Help
☐ Department of Corrections (DOC)	☐ JRA	☐ Self/Family
☐ Department of Licensing (DOL)	☐ Mass Media	☐ Social Security Administration
☐ Detoxification Facility	☐ MD / Primary Care Provider	☐ Website
☐ Diversion	☐ Mental Health Provider	☐ Other:
☐ DSHS Community Services Office	☐ Other Alcohol / Drug Facility	

11. DETOX END REFERRAL (CHECK ALL THAT APPLY)

☐ ADATSA Assessment Agency	☐ Involuntary Treatment (ITA)	☐ Not Amenable to Treatment/Lacks Engagement
☐ ADATSA Assessment Completed	☐ Gambling Treatment	
☐ ATR Services	☐ Medical/Dental Services 06	☐ Other: ____
☐ CSO	☐ Mental Health Services	☐ Referred to CD Treatment
☐ Housing Support Services	☐ None	☐ Self-Help Group

12. DISCHARGE OR CLOSURE TYPE (CHECK ONE BOX ONLY)

☐ Client Died	☐ Inappropriate Admission	☐ Transferred to Different Facility
☐ Completed Treatment	☐ Incarcerated D15	☐ Withdrew Against Program Advice
☐ Funds Exhausted	☐ Rule Violation	☐ Withdrew With Program Advice

13. GOVERNING COUNTY	14. RECOMMENDED ASAM PLACEMENT LEVEL
C31	A29

15. HOMELESS OR ON THE STREET	16. STAFF ID
☐ Yes ☐ No H1	S24

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVER (DBHR)

DBHR Target Treatment Activities

ADMISSION DATE: A18
AGENCY NUMBER: A22

SECTION I: CLIENT IDENTIFICATION

1. LAST NAME	2. FIRST NAME	3. MIDDLE NAME	4. DATE OF BIRTH
L1	F5	M5	B1

SECTION II: TREATMENT ACTIVITIES

ACTIVITY CODES

ACTIVITY TYPE (CODE 1) A12
- Acupuncture (A)
- Case Management (M)
- Case Management (Gambling) (S)
- Childcare (C)
- Conjoint (with client) (J)
- Family (without client) (F)
- Group (G)
- Group (Gambling) (B)
- Individual (I)
- Individual (Gambling) (D)
- Methadone/Opiate Dependency Dose Change (R)
- Patch Analysis (P)
- Urinalysis Sample (U)

ATTENDANCE (CODE 2) A38
- No Show
- Yes
- Excused

CHILDCARE TYPE (CODE 3) C1Φ
- In-Home Care (H)
- Licensed Childcare Center (L)
- Licensed Family/Home Care (C)
- Not Applicable (N)
- On-Site Facility (F)
- Relative Care (R)
- Therapeutic Center (T)
- Unknown (U)

ACTIVITY DATE	ACTIVITY TIME	ACTIVITY TYPE (CODE 1)	DURATION ACTIVITY HOURS HRS	DURATION ACTIVITY HOURS MIN	ATTEND (CODE 2)	STAFF ID	NUMBER OF CHILDREN	CHILD CARE TYPE (CODE 3)	OPIATE DEPENDENCY DOSE (MG)
A5	A5 : ☐ A.M. ☐ P.M.	A12	A6	:	A38	S24	C11	C1Φ	01
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					
	: ☐ A.M. ☐ P.M.			:					

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Client Support Activities (Non-Treatment)

AGENCY NUMBER: A22

ACTIVITY TYPE (CODE 1) A7

- Adolescent Case Management (G)
- Alcohol Drug Information School (A)
- Brief Intervention (Q)
- Brief Therapy Conjoint (J)
- Brief Therapy Family (P)
- Brief Therapy Group (O)
- Brief Therapy Individual (U)
- Case Consultation (K)
- Community Education (E)
- Crisis Services (C)
- Family Support (F)
- FASD Cnsl Edu or Ref (J)
- Non Treatment Individual (N)
- HIV/AIDS/TB Edu: Tst Ref (T)
- Housing Support Services (H)
- Involuntary Commitment (I)
- Non-Treatment Group (L)
- Phone Contact (M)
- Prenatal Care Ref (D)
- Outreach Services (V)
- Referral (R)
- Screening (Y)
- Sobering Services (B)
- Staff Continuing Education (S)

FUND SOURCE (CODE 2) F9

- A - Agency Funded
- C - County Community Services
- D - Department of Corrections
- F - Federal Direct
- O - Other
- P - Private Pay
- S - State Direct
- M – State DSHS (Non DASA)
- T - Tribal Community Services

CONTRACT TYPE (CODE 3) C26

- 1 – ADATSA
- 2 – Adult Outpatient
- 3 – Adult Residential
- 4 – ATR – Access to Recovery
- 5 – CA Out Station
- 6 – CDDA (COMM)
- 7 – CDDA (LS)
- 8 – Criminal Justice (CJ)
- 9 – Criminal Justice – Innovation
- 10 – CSO Out Station
- 11 – DOC-COM
- 12 – DOC-JAIL
- 13 – Gov2Gov (Non XIX)
- 14 – Indian Health Services (IHS)
- 15 – Intensive Case Management
- 16 – Local Sales Tax
- 17 – Molina – Managed Care
- 18 – Other/None
- 19 – Pregnant/Parenting
- 20 – TANF (ES)
- 21 – Tribe MOA (Title XIX)
- 22 – WASBIRT
- 23 – Youth Treatment

SUPPORT ACTIVITIES

ACTIVITY DATE	ACTIVITY TIME	ACTIVITY TYPE (CODE 1)	SERVICE HOURS	STAFF AND VOLUNTEER HOURS	OTHER QUANTITY	OTHER DESCRIPTION	CLIENT NAME	STAFF ID	CONTRACT TYPE (CODE 3)	FUNDING SOURCE (CODE 2)
A4	A4 :	A7	S8 :	S19 :	05	02	C18	S24	C26	F9
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Agency Staff

AGENCY NUMBER A22

SECTION I: STAFF PERSONAL INFORMATION

1. LAST NAME	2. FIRST NAME	3 MIDDLE NAME	4. GENDER
L1	F5	M5	☐ Male ☐ Female G13

5. DATE OF BIRTH	6. STAFF IDENTIFICATION
B1	S24

7. SPANISH/HISPANIC/LATINO (CHECK ONE BOX ONLY) S14

- ☐ Cuban
- ☐ Mexican, Mexican American, Chicano
- ☐ Not Spanish/Hispanic/Latino
- ☐ Other Spanish/Hispanic/Latino
- ☐ Puerto Rican
- ☐ Refused to Answer

8. RACE/ETHNICITY (CHECK A MAXIMUM OF FOUR THAT APPLY)

- ☐ Asian Indian
- ☐ Black/African American
- ☐ Cambodian
- ☐ Chinese
- ☐ Filipino
- ☐ Guamanian
- ☐ Hawaiian
- ☐ Japanese
- ☐ Korean
- ☐ Laotian R1
- ☐ Middle Eastern
- ☐ Native American
- ☐ Other Asian
- ☐ Other Pacific Islander
- ☐ Other Race
- ☐ Refused to Answer
- ☐ Samoan
- ☐ Thai
- ☐ Vietnamese
- ☐ White/European American

9. EMPLOYEE START DATE	10. EMPLOYEE END DATE
E7	E5

DSHS 04-420 (REV. 09/2010)

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVORIAL HEALTH AND RECOVERY (DBHR)

DBHR Target Change of Circumstances

AGENCY NUMBER: A22
STAFF IDENTIFICATION: S24

INSTRUCTIONS: For clients receiving treatment, use this form to record only the types of change of circumstances shown below. Record other client changes that occur during treatment at discharge on the DBHR Target Data Elements, DSHS 04-416. Record only the area(s) that have changed.

Section I: Client Identification

1. LAST NAME	2. FIRST NAME	3. MIDDLE NAME
L1	F5	M5
4. DATE OF BIRTH	**5. ORIGINAL ADMISSION DATE**	**6. CHANGE START DATE**
B1	A18	C6

Section II: Pregnancy Outcome

PREGNANCY OUTCOME CODES

L - Live Birth Child M – Miscarriage S - Stillborn Child (dead) T - Other Termination

1. ESTIMATED DUE DATE (MM/DD/YYYY)	2. HAS PRENATAL PROVIDER	3. PREGNANCY END DATE (MM/DD/YYYY)
E13	☐ Yes ☐ No P7	P4

4. Complete the table below to document the fetus/infant(s) associated with the actual date from Section 3. (The table allows for multiple births.). **Note:** Only complete columns 2, 3, and 4 if outcome = L - Live Birth Child

OUTCOME	WEIGHT LBS OZ	INFANT'S FIRST NAME	L5 IS CHILD LIVING WITH CLIENT
P6	B2	I7	☐ Yes ☐ No ☐ Unknown
			☐ Yes ☐ No ☐ Unknown
			☐ Yes ☐ No ☐ Unknown

Section III: Funding

1. CURRENT PUBLIC ASSISTANCE (CHECK ONE BOX ONLY)

☐ ADATSA
☐ Applicant
☐ Disability Lifeline
☐ Disability Lifeline - Expedited
☐ Medical Assistance Only
☐ None
☐ Refugee Assistance P21
☐ Supplemental Security Income (SSI)
☐ Temporary Assistance for Needy Families (TANF)

2. CONTRACT (CHECK ONE BOX ONLY)

☐ ADATSA
☐ Adult Outpatient
☐ Adult Residential
☐ ATR – Access to Recovery
☐ CDDA (COMM)
☐ CDDA (LS)
☐ Criminal Justice (CJ)
☐ Criminal Justice – Innovation
☐ DOC – COM
☐ DOC - Jail C26 + M14
☐ Gov2Gov (Non XIX)
☐ Indian Health Services (IHS)
☐ Local Sales Tax
☐ Molina – Managed Care
☐ Other/None
☐ Pregnant/Parenting
☐ TANF (ESA)
☐ Tribe MOA (Title XIX)
☐ WA-CARES
☐ WASBIRT
☐ Youth Treatment

3. FUND SOURCE (CHECK ONE BOX ONLY)

☐ Agency Funded
☐ County Community Services
☐ DOC
☐ Federal Direct
☐ Other F9 + M14
☐ Private Pay
☐ State Direct
☐ State DSHS (Non DASA)
☐ Tribal Community Services

4. TITLE XIX FUNDED	5. SPECIAL PROJECT STATE	6. SPECIAL PROJECT COUNTY
☐ Yes ☐ No T3	S17	S16
7. SPECIAL PROJECT AGENCY	**8. GOVERNING COUNTY (IF NOT COUNTY OF FACILITY)**	
S15	C31	

9. INSURANCE PAYMENT (PRIVATE) (CHECK ONE BOX ONLY)

☐ No Insurance Payment ☐ 50% or greater ☐ Less than 50% I9

10. CHANGE MODALITY (CHECK ONE) M12 + M14

☐ Intensive Outpatient (IO) to Outpatient (OP)
☐ Intensive Outpatient (IO) to Methadone (MT)
☐ Outpatient (OP) to Intensive Outpatient (IO)
☐ Outpatient (OP) to Methadone (MT)
☐ Methadone (MT) to Outpatient (OP)
☐ Methadone (MT) to Intensive Outpatient (IO)

11. CLIENT REGISTRY PARTICIPATION	12. STATUS DATE
☐ Permitted ☐ Refused ☐ Revoked C20	C19

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Group Treatment Activities

GROUP NAME G16	AGENCY NUMBER A22

ACTUAL DATE A5	ACTUAL TIME : A5 ☐ A.M. ☐ P.M.	ACTUAL DURATION A6	STAFF IDENTIFICATION S24

CHILD CARE TYPE C1Φ

C – Licensed Family/Home Care F – On-site Facility H – In-Home Care L – Licensed Childcare Center N – Not Applicable R – Relative Care
T – Therapeutic Center U - Unknown

ATTENDANCE

LAST NAME	FIRST NAME	MIDDLE	DATE OF BIRTH	ATTENDANCE A38			CHILD CARE TYPE	NUMBER OF CHILDREN
				YES	EXCUSED	NO SHOW		
L1	F5	M5	B1	☐	☐	☐	C1Φ	C11
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		
				☐	☐	☐		

Washington State Department of Social & Health Services

DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHVAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Agency Support Activities (Non-Treatment)

AGENCY NUMBER: A22

ACTIVITY TYPE (CODE 1) — A7

Adolescent Case Management (G)
Alcohol and other Drug Information School (A)
Case Consultation (K)
Community Education (E)
Crisis Services (C) — Outreach Services (V)
Family Support (F) — Phone Contact (M)
FASD Cnsl Edu or Ref (J) — Referral (R)
HIV/AIDS/TB Edu or Ref (D) — Screening (Y)
Housing Support Services (H) — Sobering Services(B)
Involuntary Commitment (I) — Staff Continuing Education (S)
Non Treatment Group (L)

FUND SOURCE (CODE 2) — F9

A - Agency Funded
C - County Community Services
D. – Department of Corrections
F - Federal Direct
O - Other
P - Private Pay
S - State Direct
N - State DSHS (Non DASA)
T – Tribal Community Services

CONTRACT TYPE (CODE 3) — C26

1 – ADATSA
2 – Adult Outpatient
3 – Adult Residential
4 – ATR – Access to Recovery
5 – CA Out Station
6 – CDDA (COMM)
7 – CDDA (LS)
8 – Criminal Justice (CJ)
9 – Criminal Justice - Innovation
10 – CSO Out Station
11 – DOC-COM
12– DOC-JAIL
13 – Gov2Gov (Non XIX)
14– Indian Health Services (IHS)
15 – Intensive Case Management
16 – Local Sales Tax
17 – Molina – Managed Care
18 – Other/None
19 – Pregnant/Parenting
20 – TANF (ES)
21 – Tribe MOA (Title XIX)
22 – WASBIRT
23 – Youth Treatment

SUPPORT ACTIVITIES

ACTIVITY DATE	ACTIVITY TIME	ACTIVITY TYPE (CODE 1)	SERVICE HOURS	STAFF AND VOLUNTEER HOURS	NUMBER OF PERSONS/ STUDENTS	OTHER QUANITY	OTHER DESCRIPTION	STAFF ID	CONTRACT TYPE (CODE 3)	FUNDING SOURCE (CODE 2)
A4	A4	A7	S8	S19	N1	05	02	S24	C26	F9
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						
	:		:	:						

DSHS 04-437 (REV. 10/2010)

Washington State Department of Social & Health Services

DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Group Support Activities

GROUP NAME	AGENCY NUMBER
G16	A22

ACTIVITY TYPE (CODE 1)

- ☐ Alcohol and other Drug Information School
- ☐ Brief Therapy - Group
- ☐ Community Education
- ☐ Crisis Services
- ☐ Family Support
- ☐ Housing Services
- ☐ Non-Treatment Group
- ☐ Outreach Services
- ☐ Referral
- ☐ Screening
- ☐ Staff Continuing Education

A7

CONTRACT TYPE (CODE 3)

1 – ADATSA
2 – Adult Outpatient
3 – Adult Residential
4 – ATR – Access to Recovery
5 – CDDA (COMM) C26
6 – CDDA (LS)
7 – Criminal Justice (CJ)
8 – Criminal Justice - Innovation
9 – DOC-COM
10 – DOC-JAIL
11 – Gov2Gov (NonXIX)
12 – Indian Health Services (IHS)
13 – Intensive Case Management
14 – Local Sales Tax
15 – Molina – Managed Care
16 – Other/None
17 – Pregnant/Parenting
18 – TANF (ES)
19 – Tribe MOA (Title XIX)
20 - WA-CARES
22 – WASBIRT
23 – Youth Treatment

FUND SOURCE (CODE 2)

- ☐ Agency Funded
- ☐ County Community Services
- ☐ Dept. of Corrections (DOC)
- ☐ Federal Direct
- ☐ Other
- ☐ Private Pay F9
- ☐ State Direct
- ☐ Tribal Community Services

ACTUAL DURATION	ACTUAL DATE	ACTUAL TIME
D32	A4	: ☐ A.M. ☐ P.M. A4
SERVICE HOURS	**STAFFIDENTIFICTION**	**STAFF TIME**
: S8	S24	: S19

ATTENDANCE

LAST NAME	FIRST NAME	MIDDLE	DATE OF BIRTH	ATTENDANCE YES	ATTENDANCE A37 EXCUSED	ATTENDANCE NO SHOW
L1	F5	M5	B1	☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

What kind of information about me will be in Client Registry Lookup?

Your name, social security number, birth date, gender, ethnic background and current treatment agency/facility will be in Client Registry Lookup. This information will only be available in the Client Registry Lookup for one year after the service ends.

Is the information about me safeguarded?

Your social security number, birth date, gender and ethnic background information in the Client Registry Lookup are protected by law from unauthorized access and disclosure.[1] No other information about you or the services that you receive in this program will be included in Client Registry Lookup. If additional information is required, you will be asked to sign another form.

You do not have to sign this form. At any time, you can take back your consent to be included in the Client Registry Lookup.

[1] Code of Federal Regulations (CFR) 42 Part 2.

The Department of Social and Health Services

It is the mission of the Department of Social and Health Services (DSHS) to improve the quality of life for individuals and families in need. Working together we can make a difference in the lives of the people we serve.

Clients receiving any of the following services from DSHS will be included in the Client Registry Lookup:

- **Medical Assistance**
- **Medicare/Medicaid**
- **WorkFirst (welfare)**
- **Food Stamps**
- **Nursing home care**
- **Care for disabled and frail adults**
- **Care for abused and neglected children**
- **Mental health care**
- **Juvenile offender rehabilitation services**

Washington State Department of Social & Health Services

DSHS 22-382(X) (6/99)

Consent To Be Seen In Client Registry Lookup

What is the purpose of the Client Registry Lookup?

Client Registry Lookup enables Department of Social and Health Services (DSHS) staff to work together as a team. Authorized DSHS staff will check this system to determine what services you are receiving and also to assist in getting you services that you need. Authorized staff providing those different services can then coordinate your case to ensure that you receive the most effective and efficient service.

In 1997, over 550,000 DSHS clients used two or more DSHS programs. That was more than 55 percent of our clients.

The Client Registry is a valuable tool that gives staff the ability to determine if a client is receiving services from another program in the department. Authorized staff can then work together, coordinating services that best serve the needs of our clients.

Our goal in the department is to ensure that clients can achieve safe, self-sufficient, healthy and secure lives.

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Division of Behavioral Health and Recovery

I, _____ agree that the Division of Behavioral Health and Recovery may provide information to the computerized Client Registry Lookup managed by the Department of Social and Health Services (DSHS), State of Washington.

The DSHS Client Registry will help case managers who are working with me to best coordinate the state social services that I receive.

The information included in the Client Registry is limited to when and where I received services, my name, social security number, birthdate, sex, and ethnic background. This information will appear in the Client Registry for one year following your discharge from this program.

No other information about the services I receive in this program will be included. I understand that information about me is protected by law from unauthorized access and disclosure. If anyone wants additional information, they will ask me to sign another form.

I understand that I do not have to sign this form to receive these services. At any time, I can take back my consent to be included in the Client Registry.

If I have any questions, I may call _____.
(DBHR Counselor)

_____ _____
(Signature of Client) (Date)

_____ _____
(Witness) (Date)

_____ _____
(Parental Signature of Minor Child if Required) (Date)

STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

Criminal Justice System/Multi-Party
AUTHORIZATION FOR RELEASE OF INFORMATION

CONSENT FOR THE RELEASE OF CONFIDENTIAL INFORMATION ABOUT MENTAL HEALTH AND ALCOHOL OR DRUG TREATMENT

I, _____ authorize (1) The Department of Corrections

and

(2) the following Mental Health Treatment Provider:
*Name:*_____
*Address:*_____
*Phone Number:*_____

(3) the following Alcohol or Drug Treatment Provider:
*Name:*_____
*Address:*_____
*Phone Number:*_____

(4) the following Designated Chemical Dependency Specialist (DCDS):
*Name:*_____
*Address:*_____
_____
*Phone Number:*_____

(5) the following other provider of information necessary for cross-systems communication:
*Name:*_____
*Address:*_____
*Phone Number:*_____

To communicate with and disclose to one another the following information (The client must initial each type of information authorized):

(1) Department of Corrections
____ Pre-Sentence Investigation
____ Judgment and Sentence
____ Criminal History
____ Risk Assessment
____ Compliance with Supervision
____ Conditions of Supervision
____ Mental Health Assessments
____ Violations of Terms of a Court Ordered Treatment

(3) Chemical Dependency/Substance Abuse Treatment
____ Chemical Dependency Assessments and Treatment Plans
____ CD Treatment History and Progress Reports
____ CD Treatment Discharge Summaries
____ CD Treatment Continuing Care Plan
____ Treatment Compliance Reports (Requested by DOC)
____ Request to Designated Chemical Dependency Specialist (DCDS) for an Assessment
____ Involuntary Treatment History/Records (RCW 70.96 A)

(2) Mental Health Treatment
____ MH Treatment Discharge Summaries
____ MH Treatment History and Progress Reports
____ Involuntary Treatment History/Records (RCW 71.05)
____ MH Intake and Treatment Plans
____ Psychological Evaluations
____ Psychiatric Evaluations
____ Forensic Discharge Review (State Hospital)

(4) Designated Chemical Dependency Specialist (DCDS)
____ Violations of a Treatment Order or Condition of Supervision that relates to Public Safety
____ Information about a Petition for Involuntary Commitment

(5) Other: Specify other information as necessary for cross-systems collaboration:
____ _____

The purpose of the disclosures authorized in this consent is:

(1) To improve public safety by allowing communication and multidisciplinary case management and release planning.

(2) To enable treatment providers to communicate continuing care plan referrals to the above agencies

I understand that my alcohol and/or drug treatment records are protected under the federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 Code of Federal Regulations (CFR) Part 2, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 CFR, Parts 160 and 164. I understand that this authorization shall remain in effect for the duration of my DOC supervision unless revoked prior to that time. I also understand that I may revoke this consent at any time except to the extent that action has been taken in reliance on it, and that in any event this consent expires automatically as follows:

_____ There has been a formal and effective termination or revocation of my release from confinement, probation, or parole, or other proceeding under which I was mandated to treatment, or,

_____ _____
(Specify other time when consent can be revoked and/or expires)

I understand that I might be denied services if I refuse to consent to a disclosure for purposes of treatment, payment, or health care operations, if permitted by state law. I will not be denied services if I refuse to consent to a disclosure for other purposes.

Signature of Offender/Client:	Initials:	Date:
DOC Number:	**Social Security Number:**	

The records contained herein are protected by Federal Confidentiality Regulations 42 CFR Part 2 and 45 CFR Parts 160 and 164. The Federal rules prohibit further disclosure of this information to parties outside of the Department of Corrections unless such disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

Washington State Department of Social & Health Services
DBHR Division of Behavioral Health and Recovery

DIVISION OF BEHVIORAL HEALTH AND RECOVERY (DBHR)

DBHR Target Data Elements
Gain Short Screening Setup

ADMINISTRATION TIME	STAFF IDENTIFICATION	DATE	AGENCY NUMBER
G1	S24	G1	A22

SECTION I CLIENT IDENTIFICATION

1. LAST NAME	2. FIRST NAME	3. MIDDLE NAME	4. OTHER LAST NAME
L1	F5	M5	O4

5. GENDER	6. DATE OF BIRTH	7. SOCIAL SECURITY NUMBER	8. WASHINGTON DRIVER'S LICENSE OR ID NUMBER
G13 ☐ Male ☐ Female	B1	S11	W1

9. WHICH RACE/ETHNICITY GROUP WOULD YOU IDENTIFY YOURSELF WITH (CHECK A MAXIMUM OF FOUR THAT APPLY)

- ☐ Asian Indian
- ☐ Black/African American
- ☐ Cambodian
- ☐ Chinese R1
- ☐ Filipino
- ☐ Guamanian
- ☐ Hawaiian (Native)
- ☐ Japanese
- ☐ Korean
- ☐ Laotian
- ☐ Middle Eastern
- ☐ Native American
- ☐ Other Asian
- ☐ Other Pacific Islander
- ☐ Other Race
- ☐ Refused to Answer
- ☐ Samoan
- ☐ Thai
- ☐ Vietnamese
- ☐ White/European American
- ☐ Non – Federal Tribe

Tribal Code (No. 1) T11

Tribal Code (No. 2)

10. SPANISH/HISPANIC/LATINO (CHECK ONE)

- ☐ Cuban
- ☐ Mexican, Mexican American, Chicano
- ☐ Not Spanish/Hispanic/Latino
- ☐ Other Spanish/Hispanic/Latino
- ☐ Puerto Rican S14
- ☐ Refused to Answer

Global Appraisal of Individual Needs-Short Screener (GAIN-SS)

*The following questions are about common psychological, behavioral or personal problems. These problems are considered **significant** when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on. Please answer the questions Yes or No.*

Mental Health Internalizing Behaviors (IDScr 1): During the past 12 months, have you had significant problems			
a.	with feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	☐ Yes	☐ No
b.	with sleep trouble, such as bad dreams, sleeping restlessly or falling sleep during the day?	☐ Yes	☐ No
c.	with feeling very anxious, nervous, tense, scared, panicked or like something bad was going to happen?	☐ Yes	☐ No
d.	when something reminded you of the past, you became very distressed and upset?	☐ Yes	☐ No
e.	with thinking about ending your life or committing suicide?	☐ Yes	☐ No
	Each yes answer is "1" point **IDS Sub-scale Score (0 to 5)** I1		
Mental Health Externalizing Behaviors (EDScr 2): During the past 12 months, did you do the following things two or more times?			
a.	Lie or con to get things you wanted or to avoid having to do something?	☐ Yes	☐ No
b.	Have a hard time paying attention at school, work or home?	☐ Yes	☐ No
c.	Have a hard time listening to instructions at school, work or home?	☐ Yes	☐ No
d.	Been a bully or threatened other people?	☐ Yes	☐ No
e.	Start fights with other people?	☐ Yes	☐ No
	Each yes answer is "1" point **EDS Sub-scale Score (0 to 5)** E1		
Substance Abuse Screen (SDScr 3): During the past 12 months, did.....			
a.	you use alcohol or drugs weekly?	☐ Yes	☐ No
b.	you spend a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs (high, sick)?	☐ Yes	☐ No
c.	you keep using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	☐ Yes	☐ No
d.	your use of alcohol or drugs cause you to give up, reduce or have problems at important activities at work, school, home or social events?	☐ Yes	☐ No
e.	you have withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or use any alcohol or drugs to stop being sick or avoid withdrawal problems?	☐ Yes	☐ No
	Each yes answer is "1" point **SDS Sub-scale Score (0 to 5)** S4		

Part III

Data Elements

ACADEMIC/TRAINING ACHIEVEMENT

Field Description	Indicates the highest educational achievement of the client. Choices are listed in alphabetical order. Check the highest level of achievement that applies.	
Valid Entries	Description	Target Code
	AA Degree (Academic)	1
	AA Degree (Vocational)	9
	G.E.D.	11
	High School Diploma	4
	No degree	5
	Post-graduate degree	7
	Undergraduate degree	2
	Unknown	8
	Vocational training (certificate)	3
	Vocational training (no certificate)	6
	Not Collected [*Inactive 6/1/93*]	10

Business Rules	Required Field		
Tables	DEGREE_LUT TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Degree_ID 2 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	Degree_Desc 35 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93

ACTIVE DATE

Field Description	Indicates the date that a data element became active. A data element cannot be associated to an event that is before its Active Date. Also see entry for Inactive Date in the Data Dictionary.
Valid Entries	Format: mm/dd/yyyy
Business Rules	Cannot be earlier than 1/1/1900 Cannot be greater than Inactive Date Cannot be greater than today's date Cannot be greater than 12/31/13 for ADATSA assessment type.
Tables	ADATSA_EXCEPTION_TYPE_LUT ARREST_TYPE_LUT ASAM_LEVEL_LUT ASI_PATIENT_RATING_SCALE_LUT ASSESSMENT_PRIORITY_LUT CHILD_CARE_TYPE_LUT CLIENT_REGISTRY_STATUS_LUT COMMUNITY_SERVICE_OFFICE_LUT CONTRACT_TYPE_LUT DEGREE_LUT DISABILITY_TYPE_LUT DISCHARGE_TYPE_LUT EMPLOYMENT_ACTIVITY_LUT ENGLISH_ABILITY_LUT ENTRY_REFERRAL_LUT FORWARD_REFERRAL_LUT FREQUENCY_LUT FUNDING_SOURCE_LUT HISPANIC_LUT INCAPACITY_LUT LANGUAGE_LUT LEGAL_ISSUE_TYPE_LUT LIVING_ARNG_LUT MARITAL_SATISFACTION_LUT MARITAL_STATUS_LUT MEDICAL_TREATMENT_NEED_LUT MENTAL_TREATMENT_TYPE_LUT METHOD_LUT MILESTONE_TYPE_LUT MODALITY_CONTRACT_FUNDING MODALITY_LUT NEEDLE_USE_LUT NONELIG_REASON_LUT OFFERED_SERVICE OTHER_SERVICES_REFERRAL_LUT

ACTIVE DATE -Continued

Tables	PERSONAL_RELATIONSHIP_TYPE_LUT PREGNANCY_OUTCOME_TYPE_LUT PRIMARY_INCOME_LUT PRIVATE_FEE_STATUS_LUT PRIVATE_INSURANCE_PAYMENT_LUT PSYCH_EVALUATION_STATUS_LUT PUBLIC_ASSIST_LUT RACE_LUT RESIDENCE_TYPE_LUT RUNAWAY_COUNT_LUT SCHOOL_STATUS_LUT SCHOOL_TYPE_LUT SERVICE_FUNDING SEXUAL_ORIENTATION_LUT SPECIAL_ASSESSMENT_TYPE_LUT SPECIAL_PROJECT_LUT STAGE_OF_USE_LUT SUBSTANCE_LUT SUPPORT_ACTIVITY_TYPE_LUT TITLE_XIX_STATUS_LUT TOBACCO_PRODUCT_TYPE_LUT TREATMENT_ACTIVITY_TYPE_LUT TRIBE_LUT USER_DEFINED_OPTION_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Active_Date 16 Datetime, not null
Data Element History	---		

ACTIVITY DATE/TIME (SUPPORT)

Field Description	Indicates the date and time of the support activity event. If the Support Activity record is for a monthly activity summary, enter the last day of the month (example: 8/31/2001) and "activity summary" for the activity description.		
Valid Entries	Format: mm/dd/yyyy hh:mm:ss AM/PM (12-hour format)		
Business Rules	Required Field If this is for a Client Support Activity the activity date cannot be earlier than the client's date of birth. Cannot be greater than today's date and time		
Tables	CLIENT_SUPPORT_ACTIVITY FACILITY_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Support_Activity_DateTime 16 Datetime, not null
Data Element History	For Agency Support Activity, Staff_ID was added as primary key in addition to Support_Activity_DateTime. If appropriate, Agency Support Activities can now overlap as long as the Staff_ID is different		04/04/05

ACTIVITY DATE/TIME (TREATMENT)

Field Description	Indicates the date and time of the treatment activity event.		
Valid Entries	Format: mm/dd/yyyy hh:mm:ss AM/PM (12-hour format)		
Business Rules	Required Field Cannot be greater than today's date/time. Warning message if Activity Date/Time is between 1:00 and 5:00 AM. Activity Date/Time cannot be before Admission Date/Time plus Admission Duration. Activity Date/Time plus Activity Duration cannot be greater than Discharge Date/Time.		
Tables	TREATMENT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Treatment_DateTime 16 Datetime, not null
Data Element History	---		

ACTIVITY DURATION (TREATMENT)

Field Description	Indicates the duration, in hours and minutes, of the treatment activity. It is not required that providers track no show or excused hours; this is an optional feature of the system.		
Valid Entries	Format: hh:mm		
Business Rules	Maximum duration of 12 hours and 59 minutes.		
Tables	TREATMENT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Activity_Duration_Hours 2 Integer, not null
	DASA Database (SQL)	Name: Length: Type:	Activity_Duration_Minutes 2 Tinyint, not null
Data Element History	---		

ACTIVITY TYPE (SUPPORT)

Field Description	Indicates the type of non-treatment support activity provided.				
Valid Entries				Displays on	
	Form Code	Support Activity Type	Target Code	Client	Agency
	G	Adolescent Case Management	7	✓	✓
	A	Alcohol and Other Drug Information School	1	✓	✓
	Q	Brief Intervention	22	✓	
	J	Brief Therapy -Conjoint	20	✓	
	P	Brief Therapy –Family	19	✓	
	O	Brief Therapy –Group	18	✓	
	U	Brief Therapy – Individual	17	✓	
	K	Case Consultation	59	✓	✓
	E	Community Education	5	✓	✓
	C	Crisis Services	3	✓	✓
	F	Family Support	6	✓	✓
	J	FASD Counseling, Education or Referral	64	✓	✓
	T	HIV/AIDS/TB Education, Testing or Referral	62	✓	✓
	H	Housing Services	16	✓	✓
	I	Involuntary Commitment	8	✓	✓
	L	Non-Treatment Group	9	✓	✓
	N	Non-Treatment Individual	65	✓	
	V	Outreach Services	15	✓	✓
	M	Phone Contact	66	✓	✓
	D	Prenatal Care Referral	63	✓	
	R	Referral	61	✓	✓
	Y	Screening	60	✓	✓
	B	Sobering Services	2	✓	✓
	S	Staff Continuing Education	13	✓	✓

Form Code	Support Activity Type	Target Code	Displays on Client	Displays on Agency
-	Alcohol and Drug-Free Social Recreational Activities	56	✓	
-	Alcohol/Drug Testing - ATR [*Inactive 4/25/06*]	42		
-	Anger Management	47	✓	
-	Basic Needs	51	✓	
-	Child Care - ATR	32	✓	
-	Continuing Care - ATR [*Inactive 4/25/06*]	45		
-	Dental Care	44	✓	
-	Employment Coaching - ATR [*Inactive 4/25/06*]	35		
-	Employment Services	33	✓	
-	Family Services – ATR [*Inactive 4/25/06*]	31		
-	Family/Marriage Counseling	26	✓	
-	Financial Services	39	✓	
-	Home Safety Repairs	46	✓	
-	HIV/AIDS Counseling – ATR [*Inactive 4/25/06*]	29		
-	HIV/AIDS Medical Support & Testing – ATR [*Inactive 4/25/06*]	43		
-	HIV/AIDS Services – ATR [*Inactive 4/25/06*]	38		
-	Housing Support – ATR [*Inactive 4/25/06*]	55		
-	Individual Counseling	24		
-	Legal Services	52	✓	
-	Medical Care	41	✓	
-	Mental Health Group Counseling	25	✓	

ACTIVITY TYPE (SUPPORT) –Continued

Form Code	Support Activity Type	Target Code	Displays on Client	Displays on Agency
-	Mental Health Assessment	27	✓	
-	Other Clinical Services – ATR [*Inactive 4/25/06*]	30		
-	Other Peer-to-Peer Recovery Support Service - ATR [*Inactive 4/25/06*]	58		
-	Peer Coaching or Mentoring – ATR [*Inactive 4/25/06*]	54		
-	Pharmacy	28	✓	
-	Pre-employment Services	34	✓	
-	Recovery Coordination Services	40	✓	
-	RSS Assessment	36	✓	
-	RSS Educational Services	53	✓	
-	Screening/Assessment – ATR [Inactive *4/25/06*]	21		
-	Self – ATR [Inactive*4/25/06*]	48		
-	Spiritual Support	49	✓	
-	Transportation	37	✓	
-	Treatment Planning – ATR [Inactive *4/25/06*]	23		
-	Vision Care]	57	✓	

ACTIVITY TYPE (SUPPORT) –Continued

	Form Code	Support Activity Type	Target Code	Displays on Client	Displays on Agency
	D	Depend Strength Art. Pro. [*Inactive 11/15/01*]	4		
	T	Moral Reconation Therapy [*Inactive 11/15/01*]	14		
	M	Case Management [*Inactive 7/11/03*]	10		✓
		Interim Services t [*Inactive 7/1/10*]	11	✓	✓
	-	Screening and Referral [*Inactive 10/1/06*]	12	✓	✓
Business Rules	Required Field				
Tables	CLIENT_SUPPORT_ACTIVITY FACILITY_SUPPORT_ACTIVITY SUPPORT_ACTIVITY_TYPE_LUT				
Field Information	DASA Database (SQL)	Name: Length: Type:	Support_Act_Type_ID 2 Tinyint, null		
	(Look-up table only)	Name: Length: Type:	Support_Act_Type_Desc 50 Varchar, null		

ACTIVITY TYPE (SUPPORT) –Continued

Data Element History	Inactivated Depend Strength Art Program [*DOC Only*] and Moral Reconation Therapy [*DOC Only*]	11/15/01
	Inactivated Case Management	7/11/03
	Added four Brief Therapy activity types	4/1/04
	Added thirty-eight ATR activity types	1/1/05
	ATR types are no longer displayed as this data is collected through the ATR Services screen	4/25/05
	Added Case Consultation	10/1/05
	Assessment and Referral changed to Screening and Referral	2/23/06
	Inactivated Screening and Referral	10/1/06
	Added Referral	10/1/06
	Added Screening	10/1/06

ACTIVITY TYPE (TREATMENT)

Field Description	Indicates the type of treatment activity provided.
Valid Entries	Form Code / Treatment Activity Type / Target Code A — Acupuncture — 7 M — Case Management — 6 - — Case Management (Gambling) — 14 C — Childcare — 5 J — Conjoint (with client) — 3 F — Family (without client) — 4 G — Group — 2 - — Group (Gambling) — 12 I — Individual — 1 - — Individual (Gambling) — 11 R — Methadone/Opiate Dose Change — 8 P — Patch Analysis — 13 U — Urinalysis Sample — 9 - — Not collected [*Inactive 6/1/93*] — 10
Business Rules	Required Field ACTIVITY TYPE ADATSA will no longer be available for selection for assessments and/or admissions occurring on or after 1/1/14.
Tables	TREATMENT_ACTIVITY TREATMENT_ACTIVITY_TYPE_LUT
Field Information	DASA Database (SQL) — Name: Treatment_Activity_Type_ID; Length: 2; Type: Tinyint, null Lookup Table Only — Name: Treatment_Activity_Desc; Length: 60; Type: Varchar, null
Data Element History	Inactivated Not Collected — 9/1/93 Added Group (Gambling) — 7/1/05 Added Individual (Gambling) — 7/1/05 Added Patch Analysis — 1/1/06 Added Case Management (Gambling) — 11/1/06

ADATSA ADMISSION

Field Description	Indicates whether or not this is an ADATSA admission.
Valid Entries	Choice — Target Code Yes — 1 No — 0
Business Rules	Required Field Must be Yes if an ADATSA assessment is selected on the Admission Setup screen. Defaults to Yes if there is an ADATSA Assessment for the client within the last three years; defaults to No otherwise. ADATSA Admission will not be accessible after 12/31/2013. (Due to closure of ADATSA program).
Tables	ADMISSION
Field Information	DASA Database (SQL) — Name: ADATSA_Admission; Length: 1; Type: Tinyint, null
Data Element History	Changed business rules to reflect the removal of case plans from the ADATSA record. — 1/1/2003 Removed business rule - Defaults to yes if there is an ADATSA Assessment for the client within the last three years; defaults to no otherwise. — 01/31/2011

ADATSA TREATMENT ELIGIBILITY (ADATSA)

Field Description	Indicates whether the client is eligible for ADATSA funded treatment		
Valid Entries	Choice Yes No	Target Code 1 0	
Business Rules	Can only be modified if Assessment Type equals ADATSA. Required field if Assessment Type equals ADATSA. Defaults to Yes if Assessment Type equals ADATSA ADATSA Assessment options will no longer be available for assessments and/or admissions occurring on or after 1/1/2014.		
Tables	ASSESSMENT		
Field Information	DASA Database (SQL)	Name: Length: Type:	ADATSA_Treatment_Eligibility 1 Tinyint, null
Data Element History	---		

ADDRESS DESC

Field Description	This field describes the type of address recorded for the client		
Valid Entries	Currently, we only record the client's primary address, so this field is defaulted to "Primary Address" This is not a data entry field.		
Business Rules	Defaulted to "Primary Address"		
Tables	CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type:	Address_Desc 35 Varchar, not null
Data Element History	---		

ADDRESS ENTRY DATE

Field Description	This field indicates the date of the milestone event associated with this address.		
Valid Entries	This is not a data entry field.		
Business Rules	The value of this field is the same as the Milestone_Datetime in the MILESTONE table.		
Tables	CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type:	Address_Entry_Date 16 Datetime, not null
Data Element History	---		

ADMINISTRATION METHOD

Field Description	Indicates the most common method the client uses to administer a specific substance.
Valid Entries	Form Code / Method / Target Code I — Inhalation — 1 J — Injection — 2 N — Intranasal — 3 O — Oral — 4 X — Other — 6 S — Smoking — 5 Z — Not Collected — 7 [*Inactive 9/30/2005*]
Business Rules	Required field if a substance has been selected. Cannot be changed at discharge.
Tables	METHOD_LUT SUBSTANCE_USED
Field Information	DASA Database (SQL) — Name: Method_ID; Length: 1; Type: Tinyint, not null (Look-up table only) — Name: Method_Desc; Length: 25; Type: Varchar, null
Data Element History	Inactivated Not Collected 9/30/2005

ADMISSION DATE/TIME

Field Description	The date and time at which the client is enrolled in the program.
Valid Entries	Format: mm/dd/yyyy hh:mm AM/PM (12-hour format)
Business Rules	Required Field Cannot be greater than today's date and time. A caution message will appear if the time entered is between 1 a.m. and 6:59 a.m. TARGET only allows one open admission for a client at an agency at one time Cannot overlap another admission through discharge period. Must be greater than or equal to the milestone date/time plus duration for any other milestones for that client. In other words if there is an assessment for the client at 9:00 with a duration of 1 hour then the admission cannot be from 9:00 to 10:00 though it could be at 10:01. Once entered into the database, this date and time cannot be corrected; a deletion and re-entry of the admission is required to modify this field.
Tables	ADMISSION CLIENT_SUPPORT_ACTIVITY DISCHARGE DISCHARGE_REFERRAL GROUP_ROSTER SERVICE_FUNDING TREATMENT_ACTIVITY
Field Information	DASA Database (SQL) Name: Admission_DateTime Length: 16 Type: Datetime, not null
Data Element History	Changed format for the import/export function from YYYY-MM-DD HH:MM to YYYY-MM-DD HH:MM:SS 6/27/05

ADMISSION TYPE

Field Description	Variable is either set by the system or by the user depending on the user's location within Target. Detox Short Form – set automatically [2] Support Activity - set automatically [3] (Regular) Admission – chosen by user. The options are: CD [1] Gambling [4] CD and Gambling [5]
Valid Entries	Admission Type — Target Code CD — 1 Detox Short Form — 2 Support Activity — 3 Gambling — 4 CD and Gambling — 5
Business Rules	Required field For regular admissions it defaults to "CD"
Tables	ADMISSION ADMISSION_TYPE_LUT
Field Information	DASA Database (SQL) — Name: Admission_Type_Id; Length: 1; Type: tinyint, null
Data Element History	Changed description of type 1 from Regular/Standard to CD — 10/3/05 Added Gambling — 10/3/05 Added CD and Gambling — 10/3/05

AGE OF FIRST USE

Field Description	Indicates the age at which the client first used the specific substance.		
Valid Entries	##		
Business Rules	Required if a substance is selected. Cannot be zero. Must be less than or equal to client's age at milestone. Cannot be changed at discharge.		
Tables	SUBSTANCE_USED		
Field Information	DASA Database (SQL)	Name: Length: Type:	First_Use_Age 2 Tinyint, null
Data Element History	---		

AGENCY NAME

Field Description	Indicates the full name of the agency. Agency name must be the same as the agency name that appears in the approved DBHR directory (the "Greenbook").		
Valid Entries	Text		
Business Rules	Required Field For DBHR staff only.		
Tables	FACILITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Facility_Name 70 Varchar, not null
Data Element History	---		

AGENCY NUMBER

Field Description	A six-digit number assigned to a certified agency.	
Valid Entries	######	
Business Rules	Required Field	
Tables	ADMISSION ADMISSION_ENTRY_REFERRAL AGENCY_PREFERENCES ASI_MILESTONE ASSESSMENT ASSESSMENT_ENTRY_REFERRAL ASSESSMENT_FORWARD_REFERRAL CASE_PLAN CLIENT_REGISTRY CLIENT_SUPPORT_ACTIVITY CURRENT_LEGAL_ISSUE DEPARTMENTAL_COLLABORATION DISABILITY_MILESTONE DISCHARGE DISCHARGE_REFERRAL FACILITY_AGENCY FACILITY_STAFF FACILITY_STAFF_RACE FACILITY_SUPPORT_ACTIVITY	GAMBLING_MILESTONE GROUP_LUT GROUP_ROSTER OFFERED_SERVICE PREGNANCY_OUTCOME PREVIOUS_ARREST RELATIONSHIP_PROBLEM SERVICE_FUNDING SPECIAL_ASSESSMENT SPECIAL_PROJECT_LUT SUBSTANCE_USED TREATMENT_ACTIVITY TREATMENT_MILESTONE TX_ACTIVITY_IMPORT_ERROR_DETAIL TX_ACTIVITY_IMPORT_ERROR_HEADER TX_ACTIVITY_IMPORT_LOG USER_DEFINED_OPTION_LUT WEB_USER_FACILITY
Field Information	DASA Database (SQL)	Name: Agency_Number Length: 6 Type: Character, not null
Data Element History	---	

ALCOHOL EXPENSES

Field Description	Indicates how much money the client reports having spent in the past thirty days on alcohol. (Round to the nearest whole dollar.)		
Valid Entries	#### Number from 0 through 9999.		
Business Rules	Rounds to the nearest whole dollar. Do not include the dollar sign ($), commas or periods.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Alcohol_expense_amount 4 Money, null
Data Element History	---		

ALCOHOL INTOXICATION

Field Description	Indicates how many times, in the last thirty days, the client used alcohol to intoxication.		
Valid Entries	##		
Business Rules	Integer between 0 and 30 inclusive.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Alcohol_Intoxication_30_Days 1 Tinyint, null
Data Element History	Element added		7/1/2007

ALCOHOL PROBLEMS

Field Description	Indicates how many days in the past thirty that the client reports having experienced alcohol problems.		
Valid Entries	##		
Business Rules	Integer between 0 and 30 inclusive.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Alcohol_prob_days 2 Tinyint, null
Data Element History	---		

ALCOHOL PROBLEMS – ENVIRONMENT

Field Description	Does anyone in the client's immediate family or current living situation have an alcohol problem.		
Valid Entries	Choices Yes No	Target Code 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Family_Alcohol_Prob 1 Tinyint, null
Data Element History	---		

AMOUNT TAKEN \ COMMENTS

Field Description	Amount of a specific substance typically taken during use periods or for entering comments about the drug usage.
Valid Entries	This is for agency use only and is not entered into TARGET.
Business Rules	None
Tables	N/A
Field Information	N/A
Data Element History	---

ARRESTED IN LAST 30 DAYS

Field Description	Indicates how many times in the last thirty days the client has been arrested.		
Valid Entries	Numeric, 0 to 30		
Business Rules	Required for milestones occurring on or after 03/01/2009		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Arrested_30_days 1 Tinyint, null
Data Element History	Added element		7/1/07

ASAM PLACEMENT LEVEL

Field Description	Indicates the level of care that the counselor recommends for the client.		
Valid Entries	Level	Description	Target Code
	Level 0	No further ASAM placement level recommended.	0
	Level 0.5	Willing to understand how current use affects them. Early Intervention	11
	Level I	Willing to cooperate, needs motivating strategies. Outpatient	8
	Level II.1	Resistance high enough to require structured program. Intensive Outpatient	7
	Level II.5	Resistance high enough to require structured program. Outpatient with Partial Hospitalization	6
	Level III.1	Open to recovery, needs structured environment to maintain. Clinically Managed Low Intensity Residential Services	5
	Level III.2-D	Clinically managed residential detoxification sub-acute detox	12
	Level III.3	Little awareness, client needs intervention to engage. Clinically Managed Medium Intensity Residential Services	4
	Level III.5	Marked difficulty with opposition to treatment with dangerous consequences if not engaged in treatment. Clinically Managed Med/High Intensity Residential Services	3
	Level III.7	Resistance high and impulse control poor despite negative consequences; client needs 24 hour structured setting. Medically Monitored Intensive Inpatient Services (sobering unit)	2
	Level III.7-D	Clinically managed residential detoxification acute detox	13
	Level IV	Problems in this dimension do not qualify the client for Level IV series. Medically Managed Intensive Inpatient Services, Detox or Hospital	1

ASAM PLACEMENT LEVEL - Continued

	Level OMT OP	Resistance high enough to require structured therapy. Opioid Maintenance Therapy	9
	Level OMT ME	Request Methadone maintenance. Methadone Maintenance. [*Inactive 10/26/01*]	10
Business Rules	Required field for Assessments, Admissions, Discharges and short form Detox records.		
Tables	TREATMENT_MILESTONE ASAM_LEVEL_LUT		
Field Information	DASA Database (SQL) (Look-up table only) (Look-up table only)	Name: ASAM_Level_ID Length: 2 Type: Tinyint, null Name: ASAM_Level_Short_Desc Length: 20 Type: Varchar, null Name: ASAM_Level_Long_Desc Length: 70 Type: Varchar, null	
Data Element History	Added Level 0. This is not an official ASAM level, but was added per provider requests to indicate that no further treatment is recommended. Inactivated Level OMT ME. ATR Recovery Plan table removed ASAM level		7/1/01 10/26/01 7/25/2011

ASI RATING SCALE

Field Description	The Addiction Severity Index scale used in several locations on the forms and in the Target system. Note that the some ASI questions use the scale number and some do not. Those that use this scale are indicated with "(ASI Scale Number)".
Valid Entries	Response — Scale Number Not at all — 0 Slightly — 1 Moderately — 2 Considerably — 3 Extremely — 4
Business Rules	None
Tables	ASI_PATIENT_RATING_SCALE_LUT
Field Information	DASA Database (SQL) Name: ASI_Rating_ID Length: 1 Type: Int; null Name: ASI_Rating_Desc Length: 50 Type: Varchar; null
Data Element History	---

ASSESSMENT DATE/TIME

Field Description	The date and time the client assessment information is completed.		
Valid Entries	Format: mm/dd/yyyy hh:mm AM/PM (12-hour format)		
Business Rules	Required Field Must be less than the current date/time. Assessment Date/Time cannot be the same as the Date/Time of any other assessment, admission or discharge for the same client. Once the assessment is saved, the assessment date/time cannot be changed; a deletion and re-entry is required. A warning message is displayed if the time is between 1:00 AM and 6:59 AM. The record can still be saved.		
Tables	ASSESSMENT ASSESSMENT_ENTRY_REFERRAL ASSESSMENT_FORWARD_REFERRAL CASE PLAN SERVICE_FUNDING SPECIAL_ASSESSMENT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Assessment_DateTime 16 Datetime, not null
Data Element History	---		

ASSESSMENT TYPE

Field Description			
Valid Entries	Assessment Type	Description	Target Code
	ADATSA Assessment	Indicates whether this assessment is an ADATSA Assessment.	1
	CD & Gambling	Indicates that the assessment is for both chemical dependency and gambling	8
	Deferred Prosecution	Indicates whether the client is currently undergoing a deferred prosecution assessment.	2
	DUI/Department of Licensing	Indicates whether the client's assessment is a Driving Under the Influence/Department of Licensing assessment.	3
	Expanded Assessment	Assessments for clients referred by Children's Administration staff or for off-site assessments for adults receiving SSI.	7
	Gambling	Used to indicate if the assessment is to determine gambling addiction.	6
	Involuntary Commitment	Indicates assessment for legally mandated treatment.	4
	Other	Used for all other assessment types.	5
Business Rules	Required field Effective 3/1/08 new assessments are limited to only one assessment type. Assessments with a date before 3/1/08 are allowed more than one assessment type. Only allow one open ADATSA Assessment statewide for a client at a time. If the assessment type = ADATSA then the facility must be authorized to perform ADATSA Assessments. The ADATSA treatment type will no longer be available for selection on assessments dated 1/1/14 or later.		
Tables	SPECIAL_ASSESSMENT SPECIAL_ASSESSMENT_TYPE_LUT		

ASSESSMENT TYPE - Continued

Field Information	DASA Database (SQL)	Name: Length: Type:	Special_Assessment_Type_ID 1 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	Special_Assessment_Desc 30 Varchar, null
Data Element History	Added Gambling		7/1/05
	Added Expanded Assessment		7/1/07
	Added CD & Gambling		3/1/08

ATTEMPT TO HARM

Field Description	Has the client attempted to harm another person in the last twelve months? This field is for gambling milestones.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.
Tables	GAMBLING_MILESTONE
Field Information	DASA Database (SQL) — Name: Harm; Length: 1; Type: tinyint, null
Data Element History	Created 10/3/05

ATTEMPTED SUICIDE

Field Description	In the past 30 days has the client attempted suicide? (Include actual suicide gestures or attempts)? This includes symptoms that are a direct result of substance abuse.		
Valid Entries	Yes, No		
Business Rules			
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Suicide_Attempts 1 Tinyint, null
Data Element History	Added element		7/1/2007

ATTENDANCE – SUPPORT ACTIVITY

Field Description	Indicates if the client attended a support activity. It is not required that providers track no show or excused hours; this is an optional feature of the system.		
Valid Entries	Choices		Target Codes
	Yes (default)		1
	Excused, by provider		2
	No Show, unexcused absence		0
Business Rules	Required field for treatment activities.		
Tables	CLIENT SUPPORT ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Service_Attendance 4 Int, null
Data Element History	Changed “No Show” from 3 to 0		1/30/05

ATTENDANCE – TREATMENT ACTIVITY

Field Description	Indicates if the client attended a treatment activity. It is not required that providers track no show or excused hours; this is an optional feature of the system.		
Valid Entries	Choices		Target Codes
	Yes (default)		1
	Excused, by provider		2
	No Show, unexcused absence		0
Business Rules	Required field for treatment activities.		
Tables	TREATMENT ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Service_Attendance 4 Tinyint, null
Data Element History	Changed “No Show” from 3 to 0		1/30/05

AUTOMOBILE AVAILABLE

Field Description	Indicates whether the client currently has access to an automobile (Does not require ownership).		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Access_to_Auto 1 Tinyint, null
Data Element History	---		

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BIRTH DATE

Field Description	Indicates the birth date of the client or staff member.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Required field for client records (not for staff records). Must be greater than 01/01/1800. Cannot be greater than today's date. Warning message if client age is less than 10 years old. Warning message if client age is greater than 100 years old.		
Tables	CLIENT_MASTER FACILITY_STAFF		
Field Information	DASA Database (SQL) - CLIENT_MASTER	Name: Length: Type:	Client_BirthDate 10 Datetime, null
	DASA Database (SQL) - FACILITY_STAFF	Name: Length: Type:	Staff_BirthDate 10 Datetime, null
Data Element History	---		

BIRTH WEIGHT

Field Description	If the client's pregnancy results in a live birth, indicate the birth weight of the child, or children if a multiple birth.		
Valid Entries	##lbs., ##oz. Valid range for pounds is from 0 though 99. Valid range for ounces is from 0 through 15.		
Business Rules	Can only be added if Pregnancy End Date is filled in and Pregnancy Outcome is Live Born Child. Maximum ounces is 15. Warning message if birth weight is more than 15 lbs and 15 oz. Maximum birth weight allowed by the system is 99 lbs and 15 oz.		
Tables	PREGNANCY_OUTCOME		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Birth_Weight_Pounds 2 Tinyint, null Birth_Weight_Ounces 2 Tinyint, null
Data Element History	---		

BREATH TEST RESULTS

Field Description	Indicates the results of the breath test. The results of the breath test are a percentage of blood alcohol level and expressed as a decimal.		
Valid Entries	.##		
Business Rules	Intended for use in DUI/Physical Control Assessments. Must be less than or equal to 0.50		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Breath_Test_Result 5,3 Numeric, null
Data Element History	---		

CARE FOR CONTINUING ILLNESS

Field Description	Include persons who had persistent medical problems that were likely to restrict or prevent full use of their abilities. Chronic conditions are serious or potentially serious physical or medical problems that require continuous care (medication, dietary restrictions, and inability to take part in or perform normal activities, etc.). Ongoing medical conditions that were first noticed more than three months before admission or that commonly have durations greater that three months are reported in this category. Examples include: hypertension, diabetes, emphysema, arthritis, and physical disabilities.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	In Need	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE MEDICAL_TREATMENT_NEED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Care_for_Chronic_Illness 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_ID 1 Tinyint, not null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_Desc 20 Varchar, null
Data Element History	Changed value of “No” from 2 to 0		1/30/2005
	Changed value of “In-Need” from 3 to 2		1/30/2005

CARE FOR DENTAL PROBLEM

Field Description	Under care for dental problems such as: root canal, abscess or extractions.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	In Need	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE MEDICAL_TREATMENT_NEED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Care_for_Dental_Probl 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_ID 1 Tinyint, not null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_Desc 20 Varchar, null
Data Element History	Changed value of “No” from 2 to 0		1/30/2005
	Changed value of “In-Need” from 3 to 2		1/30/2005

CARE FOR INFECTIOUS DISEASE

Field Description	Include persons with hepatitis, venereal disease, tuberculosis, malaria, HIV/AIDS or other diseases that can be transmitted from one individual to another.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	In Need	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE MEDICAL_TREATMENT_NEED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Care_for_Infect_Disease 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_ID 1 Tinyint, not null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_Desc 20 Varchar, null
Data Element History	Changed value of “No” from 2 to 0		1/30/2005
	Changed value of “In-Need” from 3 to 2		1/30/2005
	Changed data dictionary to reflect correct spelling of “Care_for_Infect_Disease” variable		1/30/2005

CARE FOR TRAUMATIC INJURY

Field Description	Under care for an injury that caused physical damage such as: fracture or broken bone, abrasions, or burns.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	In Need	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE MEDICAL_TREATMENT_NEED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Care_for_Traumatic_Inj 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_ID 1 Tinyint, not null
	(Lookup table only)	Name: Length: Type:	Treatment_Need_Desc 20 Varchar, null
Data Element History	Changed value of “No” from 2 to 0		1/30/2005
	Changed value of “In-Need” from 3 to 2		1/30/2005

CHANGE MODALITY

Field Description	Indicates the particular change of modality that is reflected on the Change of Circumstances Form. The only modality changes allowed during a treatment admission are for outpatient categories. i.e.: Intensive Outpatient (IO) to Outpatient (OP) or Outpatient (OP) to Methadone/Opiate Substitution Treatment(MT)
Valid Entries	Intensive Outpatient (IO), Outpatient (OP), Methadone/Opiate Substitution Treatment(MT) This field appears only in the forms. Modality is changed in Target via the Change of Funding screen.
Business Rules	None
Tables	N/A
Field Information	N/A
Data Element History	---

CHANGE START DATE/TIME

Field Description	Indicates the effective date of the funding change.		
Valid Entries	Format: mm/dd/yyyy, Defaults to the current date		
Business Rules	Required Field The time of a funding change is always 12:00 AM. Any existing funding is ended the day before the Change Start Date at 11:59 PM.		
Tables	SERVICE_FUNDING		
Field Information	DASA Database (SQL)	Name: Length: Type:	Service_Funding_Datetime 16 Datetime, null
Data Element History	---		

CHANGE UPDATE DATE

Field Description	Indicates the date and time of initial entry or of the last change to a particular record.
Valid Entries	A date/time is entered in this field by the Target system when a record is saved. Format: mm/dd/yyyy hh:mm
Business Rules	System generated field.
Tables	ADATSA_EXCEPTION ADMISSION ADMISSION_ENTRY_REFERRAL AGENCY_PREFERENCES ASI_MILESTONE ASSESSMENT ASSESSMENT_ENTRY_REFERRAL ASSESSMENT_FORWARD_REFERRAL CASE_PLAN CLIENT_ADDRESS CLIENT_MASTER CLIENT_PHONE CLIENT_RACE CLIENT_REGISTRY CLIENT_REGISTRY_STATUS_LUT CLIENT_SUPPORT_ACTIVITY CLIENT_TRIBE COMMUNITY_SERVICE_OFFICE_LUT CURRENT_LEGAL_ISSUE DEPARTAMENTAL_COLLABORATION DISABILITY_MILESTONE DISCHARGE DISCHARGE_REFERRAL FACILITY_STAFF FACILITY_SUPPORT_ACTIVITY GAMBLING_MILESTONE GROUP_ROSTER MODALITY_CONTRACT_FUNDING OFFERED_SERVICE OTHER_SERVICES_REFERRAL_LUT PREGNANCY_OUTCOME PREVIOUS_ARREST RELATIONSHIP_PROBLEM SERVICE_FUNDING SPECIAL_ASSESSMENT SPECIAL_PROJECT_LUT SPECIAL_PROJECT_PROGRAM_LUT SUBSTANCE_USED TREATMENT_ACTIVITY TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Change_update_date Length: 16 Type: Datetime, not null
Data Element History	---

CHANGE USER ID

Field Description	Indicates the TARGET user ID of the person who made the last change to a particular record.
Valid Entries	This is a system generated field
Business Rules	N/A
Tables	ADATSA_EXCEPTION ADMISSION ADMISSION_ENTRY_REFERRAL AGENCY_PREFERENCES ASI_MILESTONE ASSESSMENT ASSESSMENT_ENTRY_REFERRAL ASSESSMENT_FORWARD_REFERRAL CASE_PLAN CLIENT_ADDRESS CLIENT_MASTER CLIENT_PHONE CLIENT_RACE CLIENT_REGISTRY CLIENT_REGISTRY_STATUS_LUT CLIENT_SUPPORT_ACTIVITY CLIENT_TRIBE COMMUNITY_SERVICE_OFFICE_LUT CURRENT_LEGAL_ISSUE DEPARTAMENTAL_COLLABORATION DISABILITY_MILESTONE DISCHARGE DISCHARGE_REFERRAL FACILITY_STAFF FACILITY_SUPPORT_ACTIVITY GAMBLING_MILESTONE GROUP_ROSTER MODALITY_CONTRACT_FUNDING OFFERED_SERVICE OTHER_SERVICES_REFERRAL_LUT PREGNANCY_OUTCOME PREVIOUS_ARREST RELATIONSHIP_PROBLEM SERVICE_FUNDING SPECIAL_ASSESSMENT SPECIAL_PROJECT_LUT SPECIAL_PROJECT_PROGRAM_LUT SUBSTANCE_USED TREATMENT_ACTIVITY TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Change_user_id Length: 20 Type: Change_user_id, not null
Data Element History	---

CHARGED WITH

Field Description	Several questions which indicate the number of times in their lifetime that the client reports having been arrested and formally charged with a variety of specific crimes. Include total number of counts not just convictions. Do not include juvenile (under age 18) crimes, unless they were charged as an adult. If you wish to record		
Valid Entries	### from 0 to 255 Charged with categories are: Arson Assault Burglary Contempt of Court Drug Charges Forgery Homicide Other Criminal Charges Probation Violation Prostitution Rape Robbery Shoplifting Weapons Offense		
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Assault_charge_count Burglary_charge_count Contempt_charge_count Drug_charge_count Forgery_charge_count Homicide_charge_count Other_charge_count Probation_parole_charge_count Prostitution_charge_count Rape_charge_count Robbery_charge_count Shoplifting_charge_count Weapons_charge_count 3 Tinyint, null
Data Element History	---		

CHILD CARE TYPE

Field Description	Indicates the type of publicly funded childcare the client 's children attend during treatment of the client.
Valid Entries	Form Code / Childcare Type / TARGET Code H — In-Home Care — 3 L — Licensed Childcare Center — 4 C — Licensed Family/Home Care — 1 N — Not Applicable — 6 F — On-Site Facility — 2 R — Relative Care — 7 T — Therapeutic Center — 8 U — Unknown — 9 M — Licensed Mini-Care [*Inactive 11/15/01*] — 5 Z — Not Collected [*Inactive 6/1/93*] — 10
Business Rules	Required if the Treatment Activity Type is Child Care. Cannot be Not Applicable if the Treatment Activity Type is Child Care.
Tables	CHILD_CARE_TYPE_LUT TREATMENT_ACTIVITY
Field Information	DASA Database (SQL) — Name: Child_Care_Type_ID; Length: 2; Type: Tinyint, Not null (Look-up table only) — Name: Child_Care_Desc; Length: 60; Type: Varchar, null
Data Element History	Inactivated Not Collected — 6/1/93 Inactivated Licensed Mini-Care — 11/15/01

CHILD NUMBER

Field Description	System generated variable to identify up to three pregnancy outcomes (births, miscarriages, etc).		
Valid Entries	1, 2 or 3		
Business Rules	System defined field		
Tables	PREGNANCY_OUTCOME		
Field Information	DASA Database (SQL)	Name: Length: Type:	Child_Number 1 Tinyint
Data Element History	---		

CHILDREN ATTENDING CHILD CARE

Field Description	Indicates how many of the client's children attended childcare.		
Valid Entries	### From 1 to 255		
Business Rules	Required if the Treatment Activity Type is Child Care		
Tables	TREATMENT ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Children_Attending_CC 3 Tinyint, null
Data Element History	---		

CHILDREN, NOT YOURS, WITH YOU

Field Description	The number of children (under age 18) living with the client in the household not including the client's own children.		
Valid Entries	##		
Business Rules	Cannot be greater than Persons in Household minus 1. [Children, Not Your, With You] + [Children, Yours, With You] must be greater than 0 if Living Arrangement = Children Alone Added together with Your Children Living With You must equal at least 1 less than total Persons in Household.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Other_Kids 2 Tinyint, null Other_Kids _Under_12 2 Tinyint, null
Data Element History	Removed Part B, of the total number of children listed in Part A, how many are less than 12 years of age?		7/1/07

CHILDREN, YOURS, NOT WITH YOU

Field Description	The number of the client's children (under age 18) not living with the client in the household. This question has two parts.		
Valid Entries	##		
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Kids_Elsewhere 2 Tinyint, null Kids_ Elsewhere _Under_12 2 Tinyint, null
Data Element History	Removed Part B, of the total number of children listed in Part A, how many are less than 12 years of age?		7/1/07

CHILDREN, YOURS, WITH YOU

Field Description	The number of the client's children (under age 18) living with the client in the household. This question has two parts.		
Valid Entries	##		
Business Rules	Cannot be greater than Persons in Household minus 1. [Children, Not Your, With You] + [Children, Yours, With You] must be greater than 0 if Living Arrangement = Children Alone Added together with Others' Children Living With You must equal at least 1 less than total Persons in Household.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Kids_At_Home 2 Tinyint, null Kids_At_Home_Under_12 2 Tinyint, null
Data Element History	Removed Part B, of the total number of children listed in Part A, how many are less than 12 years of age?		7/1/07

CITY

Field Description	Indicates the client's current city of residence. Use the city of the agency if the client is transient, resides outside of the United States or if the client's address is unknown.		
Valid Entries	Text		
Business Rules	Required field		
Tables	CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type:	City 30 Varchar, null
Data Element History	---		

CLIENT IDENTIFIER

Field Description	The Client Identifier is created automatically by the TARGET system when a Client Master is established for a new client. Also called GUID. The GUID, short for Global Unique Identifier, consists of 32 hexadecimal digits interspaced with a few hyphens for readability. The total field length, with hyphens, is 36 characters. The client name is only used with the CLIENT_MASTER table. In all other tables within TARGET the client is identified by the Client Identifier.		
Valid Entries	Determined by the Client Master function. XXXXXXXX-XXXX-XXXX-XXXX-XXXXXXXXXXXX		
Business Rules	Required field, system generated		
Tables	ADATSA_EXCEPTION ADMISSION ADMISSION_ENTRY_REFERRAL ASI_MILESTONE ASSESSMENT ASSESSMENT_ENTRY_REFERRAL ASSESSMENT_FORWARD_REFERRAL CLIENT_ADDRESS CLIENT_MASTER CLIENT_PHONE CLIENT_RACE CLIENT_REGISTRY CLIENT_SUPPORT_ACTIVITY CLIENT_TRIBE	CURRENT_LEGAL_ISSUE DEPARTMENTAL_COLLABORATION DISABILITY_MILESTONE DISCHARGE DISCHARGE_REFERRAL GAMBLING_MILESTONE GROUP_ROSTER INTERVAL_INFO PREGNANCY_OUTCOME PREVIOUS_ARREST RELATIONSHIP_PROBLEM SERVICE_FUNDING SPECIAL_ASSESSMENT SUBSTANCE_USED TREATMENT_ACTIVITY TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Table: Crosswalk	Name: Length: Type: Name: Length: Type:	Client_Identifier 36 Uniqueidentifier, not null Client_ID 36 Uniqueidentifier, not null
Data Element History	---		

CLIENT NAME

Field Description	Client's full name. Used on the forms and screens for convenience and clarification for counselors and data entry personnel. Client name in Target is stored in the CLIENT_MASTER table as Client_Name_Last, Client_Name_First and Client_Name_Middle Within the Target system the client is linked to the various tables through the Client_Identifier.
Valid Entries	N/A
Business Rules	None
Tables	N/A
Field Information	N/A
Data Element History	---

CLIENT REGISTRY EXPIRATION

Field Description	Indicates the date that the client refused, permitted or revoked their participation in the registry release.		
Valid Entries	dd/mm/yyyy		
Business Rules	Must be less than or equal to today's date. Required if Client Registry Participation is not null		
Tables	CLIENT_REGISTRY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Expiration_Date 16 Datetime, null
Data Element History	---		

CLIENT REGISTRY PARTICIPATION

Field Description	Indicates if the client has signed a release to permit information to be displayed in the DSHS client registry.
Valid Entries	Registry Participation — Target Codes Permitted — 1 Refused — 2 Revoked — 3
Business Rules	A record is only created if a selection is made. This is not a required field.
Tables	CLIENT_REGISTRY CLIENT_REGISTRY_STATUS_LUT
Field Information	DASA Database (SQL) — Name: Client_Registry_Status_ID; Length: 1; Type: Tinyint, not null (Lookup table only) — Name: Client_Registry_Status_Desc; Length: 60; Type: Varchar, null
Data Element History	---

CLOSURE DATE (ADATSA ASSESSMENT)

Field Description	Indicates the date the ADATSA assessment is closed. The client's case monitor enters this date when the client has completed all ADATSA treatment. Non-ADATSA assessments are closed automatically at [Assessment Date/Time] + [Duration Hours/Minutes].		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Required Field Closure Date cannot be greater than today's date. Closure time is recorded as 11:59:59 PM on the Closure Date Closure Date cannot be greater than 12/31/13.		
Tables	ASSESSMENT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Closure_Date 16 Datetime, null
Data Element History	The following business rules were removed when the use of case plans was inactivated: Cannot enter closure date until all corresponding case plan records have been completed. Case Plan records are completed if they meet one of the criteria: 1. All admission and discharge records are entered. 2. Client Show field = "No" 3. Case Plan record has been deleted.		1/1/03

COMPLIANT WITH TREATMENT

Field Description	Indicates if the client has essentially been compliant with the treatment goals of the program.		
Valid Entries	Choices	Target Code	
	Yes	1	
	No	0	
	Unknown	2	
Business Rules	None		
Tables	DISCHARGE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Compliant_Flag 1 Integer, null
Data Element History	Added “Unknown”		1/30/05

CONFLICTS – FAMILY/ENVIRONMENT

Field Description	Indicates how many days in the last 30 that the client has had serious conflicts with family members.		
Valid Entries	Number from 0 through 30		
Business Rules	Default is null		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Family_Conflict_Count 2 Tinyint, null
Data Element History	---		

CONSENT DATE

Field Description	This is the date the DOC Release of Information form has been permitted, refused or revoked. This form, “Criminal Justice System/Multi-Party AUTHORIZATION FOR RELEASE OF INFORMATION (DOC 14-029)” can be downloaded from the DASA website at : http://www1.dshs.wa.gov/dasa/services/target/T2KeForms.shtml		
Valid Entries	mm/dd/yyyy		
Business Rules	Required field if DOC Supervision = Yes		
Tables	DEPARTMENTAL_COLLABORATION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Consent_Datetime 8 datetime, null
Data Element History	---		

CONSENT STATUS

Field Description	If the client is under court order to attend treatment and is also under DOC supervision then the client is to complete a consent form for release of information. This form, "Criminal Justice System/Multi-Party AUTHORIZATION FOR RELEASE OF INFORMATION (DOC 14-029)" can be downloaded from the DASA website at : http://www1.dshs.wa.gov/dasa/services/target/T2KeForms.shtml
Valid Entries	Choices — Target Codes Permitted — 1 Refused — 2 Revoked — 3
Business Rules	Required field if DOC Supervision = Yes
Tables	DEPARTMENTAL_COLLABORATION
Field Information	DASA Database (SQL) Name: Consent_Status_ID Length: 1 Type: tinyint, null
Data Element History	---

CONTRACT TYPE

Field Description	Indicates the contract type for support activities, assessment or treatment. For assessment or admission, Modality, Contract and Fund Source are stored as separate data elements. Each valid combination of these three elements is assigned a numeric code by the database and stored in the Modality_Contract_Funding table. This numeric code, named "MCF_ID" is associated with each individual record in the Service_Funding table. The form code is used with the Support Activity forms (04-416, 04-419, 04-423, 04-437, 04-438). *If you have any questions about which modality, contract type or fund source to use please contact your county alcohol and drug coordinator or regional administrator.*
Valid Entries	

Form Code	Contract Type	Target Code
1	ADATSA	1
2	Adult Outpatient	19
3	Adult Residential	25
4	ATR - Access to Recovery	22
5	CDDA (COMM)	15
6	CDDA (LS)	11
7	Criminal Justice	12
8	Criminal Justice - Innovation	24
9	DOC – COM	2
10	DOC – Jail	6
11	Gov2Gov (Non XIX)	4
12	Indian Health Service (IHS)	5
13	Intensive Case Management Project	28
14	Local Sales Tax	29
15	Molina - Managed Care	23
16	Other/None	8
17	Pregnant/Parenting	9
18	TANF (ESA)	16
19	Tribe MOA (Title XIX)	17

CONTRACT TYPE - Continued

	20	WA-CARES	30
	21	WASBIRT	21
	22	Youth Treatment	18
		Low Income Indigent [*Inactive 11/15/01*]	7
		CA-Out Station [*Inactive 12/1/10*]	26
		CSO Out Station [*Inactive 2/1/09*]	27
		Structured Youth Residential Services [*Inactive 7/1/03*]	10
		Division of Children & Family Services [*Inactive 7/1/05*]	3
		SSI [*Inactive 7/1/05*]	20
		TASC (PSEA) [*Inactive 7/1/05*]	13

Business Rules	Required Field ADATSA is listed as a Contract Type. The Contract Type ADATSA will no longer be available for selection for assessments/admissions dated 1/1/14 or later.		
Tables	CLIENT_SUPPORT_ACTIVITY FACILITY_SUPPORT_ACTIVITY CONTRACT_TYPE_LUT MODALITY_CONTRACT_FUNDING		
Field Information	DASA Database (SQL) (Lookup Table Only)	Name: Length: Type: Name: Length: Type:	Contract_Type_ID 2 Tinyint, null Contract_Type_Desc 60 Varchar, null

Data Element History	Inactivated CA Out Station	12/1/10
	Inactivated CSO Out Station	2/1/09
	Inactivated Low Income Indigent	12/1/10
	Inactivated Structured Youth Residential Services	11/15/01
	Added WASBIRT	7/1/03
	Added ATR and Molina	4/1/2004
	Added Criminal Justice – Innovations	1/1/2005
	Added Adult Residential	5/11/05

	Added Criminal Justice	5/11/05
	Inactivated Division of Children & Family Services	5/11/05
	Inactivated SSI	7/1/05
	Added CA Outstation	7/1/05
	Added CSO Outstation	10/1/05
	Added Intensive Case Management Project	10/1/05
	Added Local Sales Tax	10/1/05

COUNTY

Field Description	List of counties that can be used in Target
Valid Entries	

County	Target Code	County	Target Code
Adams	01	Lewis	21
Asotin	02	Lincoln	22
Benton	03	Mason	23
Chelan	04	Okanogan	24
Clallam	05	Pacific	25
Clark	06	Pend Oreille	26
Columbia	07	Pierce	27
Cowlitz	08	San Juan	28
Douglas	09	Skagit	29
Ferry	10	Skamania	30
Franklin	11	Snohomish	31
Garfield	12	Spokane	32
Grant	13	Stevens	33
Grays Harbor	14	Thurston	34
Island	15	Wahkiakum	35
Jefferson	16	Walla Walla	36
King	17	Whatcom	37
Kitsap	18	Whitman	38
Kittitas	19	Yakima	39
Klickitat	20	Out of state	99
		Dept. of Corrections	45

Business Rules	In the Special Project screens this is a required field if the special project type is County.		
Tables	County SPECIAL_PROJECT_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	County_ID 2 Character, not null
	(Lookup table only)	Name: Length: Type:	County_Name 20 Character, not null
Data Element History	---		

COUNTY, AGENCY

Field Description	The county where the agency is located. This is entered by DASA.		
Valid Entries	Any county from the list of counties See entry for “County”		
Business Rules	Required Field.		
Tables	FACILITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Facility_County_ID 2 Character, not null
Data Element History	---		

COUNTY, GOVERNING

Field Description	Indicates the county funding the treatment. This field defaults to the facility county. Change this field only if contracting with another county to provide service for them. In this case Washington State Department of Corrections is treated as a county.		
Valid Entries	Any county from the list of counties See entry for "County"		
Business Rules	Required Field		
Tables	SERVICE_FUNDING CLIENT_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Governing_County_ID 2 Character, null
Data Element History	---		

COUNTY, RESIDENCE

Field Description	Indicates the county where the client currently resides. If the client is transient, use the county of the agency.		
Valid Entries	Any county from the list of counties See entry for "County"		
Business Rules	Required Field Defaults to the county set up in Agency Defaults if one is present.		
Tables	AGENCY_PREFERENCES CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type:	County_ID 2 Character, null
Data Element History	---		

COURT ORDERED

Field Description	This indicates that the client has been ordered by a court to attend treatment for substance abuse or mental health issues. Any type of court order applies; criminal, civil, family, etc.
Valid Entries	Choice — Target Code None — 0 Chemical Dependency Treatment — 1 Mental Health Treatment — 2 Both Chemical and Mental Health — 3 Not Collected [*Inactive 7/1/05*] — 4
Business Rules	Required field
Tables	COURT_ORDERED_LUT DEPARTMENTAL_COLLABORATION
Field Information	DASA Database (SQL) Name: Court_Ordered_ID; Length: 1; Type: tinyint, not null (lookup table only) Name: Court_Ordered_Desc; Length: 40; Type: varchar, null
Data Element History	Inactivated Not Collected 7/1/05

CSO REFERRAL DATE

Field Description	Indicates the date the client was referred for Assessment by the Community Service Office, or Home and Community Service Office.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Required field if Referring CSO is filled in. Date must be greater than 01/01/1989 and cannot be after the Assessment date.		
Tables	ASSESSMENT		
Field Information	DASA Database (SQL)	Name: Length: Type:	CSO_Referral_Date 10 Datetime, null
Data Element History	---		

CURRENT LEGAL INVOLVEMENT

Field Description	Indicates if the client is currently involved with the criminal justice system. Check all that apply.
Valid Entries	

Choice / Definition	Target Code
Awaiting Charges	2
Indicates that the client is involved with the criminal justice system and either charges are suspended pending client treatment or charges are awaiting legal review.	
Awaiting Trial	1
Indicates if the client is currently involved with the criminal justice system and awaiting trial for a non-specified offence.	
Child Custody Issue	13
Indicates that the client is involved with a case for custody of one or more of their children	
Convicted Awaiting Sentence	4
Indicates if the client is currently involved with the criminal justice system convicted and awaiting sentence.	
CPS Court Involved	14
Client is involved with the Child Protective Services portion of the criminal justice system.	
Diversion	15
[Youth] Local courts may divert certain charges such as Minor In Possession (MIP) and require youth to attend assessment and drug/alcohol education services.	
Drug Court – Adult	12
Client was referred from a county designated court and has opted for treatment services instead of incarceration.	
Drug Court – Juvenile	11
Client was referred from a county designated court and has opted for treatment services instead of incarceration.	

CURRENT LEGAL INVOLVEMENT - Continued

	In DUI Deferred Prosecution Status	9
	Indicates if the client has currently been granted Deferred Prosecution for a Driving Under the Influence offense.	
	In Other Supervised Program	10
	Indicates if the client is currently participating in a program supervised by a criminal-justice-related agency that: was designed to monitor drug use or criminal behavior (urine monitoring, electronic monitoring); or offered treatment in lieu of arrest, indictment, prosecution, or final sentencing. Do not include criminal justice programs for persons on probation or parole. Do not include Child Protective Services unless prosecuted for child abuse and a court ordered a supervised-type program.	
	Incarcerated Post-Conviction	6
	Indicates if the client is currently incarcerated due to a criminal justice system conviction.	
	Incarcerated Pre-Trial	5
	Indicates if the client is currently incarcerated prior to a criminal justice system trial.	
	None	16
	On Probation or Parole	7
	Indicates if the client is currently on probation or parole through the criminal justice system.	
	On Trial	3
	Indicates if the client is currently on trial in the criminal justice system.	
	Petitioning for DUI Deferred Prosecution	8
	Indicates whether the client is petitioning for deferred prosecution.	
	Not Collected [*Inactive 6/1/93*]	18

CURRENT LEGAL INVOLVEMENT - Continued

Business Rules	Required Field Cannot select any other values if None or Not Collected is selected.		
Tables	CURRENT_LEGAL_ISSUE LEGAL_ISSUE_TYPE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Legal_Issue_Type_ID 2 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Legal_Issue_Desc 75 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93

CURRENT PSYCHOLOGICAL EVALUATION

Field Description	Indicates the outcome of the client's most recent psychological evaluation or current need for evaluation. This includes any psychological evaluation administered by a qualified mental health practitioner.
Valid Entries	Choice — Target Code No Evaluation Made — 2 Problem Indicated, Referral Made — 3 Psychological Evaluation Made, No Problem Found — 4 Psychological Evaluation Made, Problem Diagnosed — 5 Re-Evaluation Needed — 1 Not Collected [*Inactive 6/1/93*] — 6
Business Rules	None
Tables	TREATMENT_MILESTONE PSYCH_EVALUATION_STATUS_LUT
Field Information	DASA Database (SQL) — Name: Psych_Eval_Status_ID; Length: 1; Type: Tinyint, null (Look-up table only) — Name: Psych_Eval_Status_Desc; Length: 65; Type: Varchar, null
Data Element History	Inactivated Not Collected — 6/1/93 Changed field name from Current Psychiatric Evaluation to Current Psychological Evaluation — 9/1/06 Changed “Psychiatric” to “Psychological” for choices — 1/1/07

CURRENT PSYCHIATRIC MEDICATION

Field Description	Indicates if the client is currently taking prescribed psychiatric medication. Include only those medications that were legally prescribed for acute or chronic mental health disorders.		
Valid Entries	Choices	Target Code	
	Yes	1	
	No (default)	0	
	Unknown	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Takes_Psych_Meds 4 Int, null
Data Element History	Changed value of “Unknown” from -1 to 2.		1/30/05

CURRENT STAGE OF USE

Field Description	Indicates the diagnostic impression of the client's level of substance abuse by a qualified staff.		
Valid Entries	Stage of Use		Target Code
	Chemically Dependent (Addicted)		2
	Abuse		1
	Experimental Use		3
	No Significant Problem		0
	In Recovery		4
Business Rules	Required Field Cannot be No Significant Problem at Admission unless Admission Type is Gambling.		
Tables	TREATMENT_MILESTONE STAGE_OF_USE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Stage_ID 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Stage_Desc 35 Varchar, null
Data Element History	Added "In Recovery"		1/1/03

CURRENTLY RECEIVING MENTAL HEALTH SERVICES

Field Description	Indicates if the client is currently receiving mental health services. This includes both residential and outpatient services by a qualified mental health service agent.		
Valid Entries	Choices	Target Code	
	Yes	1	
	No	0	
	In Need	2	
Business Rules	Required Field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Receiving_Mental_Care 1 Tinyint, null
Data Element History	Changed value of “No” from 2 to 0		1/30/2005
	Changed value of “In Need” from 3 to 2		1/30/2005

DATE LAST USED

Field Description	Date that client last used a specific substance.		
Valid Entries	mm/dd/yyyy		
Business Rules	Required field if any substance other than “No Substance Abuse” is selected Must be less than or equal to the milestone date Date Last Used must be greater than the client’s date of birth plus Age of First Use		
Tables	SUBSTANCE_USED		
Field Information	DASA Database (SQL)	Name: Length: Type:	Date_Last_Used 8 Datetime, null
Data Element History			

DATE OF FIRST CONTACT

Field Description	Records the date that the client first made contact with the agency related to this specific treatment episode. This could be, for example, the date that the client first contacted the agency by telephone, made an appointment or first walked in the door. If the client has been in contacted the treatment agency multiple times use the initial contact relating to the current treatment episode.		
Valid Entries	mm/dd/yyyy		
Business Rules	Must be less than or equal to the milestone date. Required field if milestone date is greater than of equal to 11/1/2007. Must be less than 365 days from milestone date.		
Tables	ASSESSMENT ADMISSION		
Field Information	DASA Database (SQL)	Name: Length: Type:	First_Contact_Datetime 8 Datetime, null
Data Element History	Added element		7/1/07

DAYS EMPLOYED

Field Description	Indicates how many days in the past thirty that the client reports having been employed for pay. (Include "under the table" work, paid sick and vacation days).		
Valid Entries	##		
Business Rules	Cannot exceed 30 days.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Days_Employed 2 Tinyint, null
Data Element History	---		

DAYS HOSPITALIZED FOR MENTAL TREATMENT

Field Description	Indicates the total number of days the client has received some portion of their treatment for a mental health condition as an inpatient in a psychiatric or general hospital. ▪ If you are processing an assessment or admission consider the past one year period. ▪ For discharge consider the time period since admission.		
Valid Entries	### Any whole number from 0 through 366		
Business Rules	Required field if Previous Mental Health Treatment equals Hospitalization.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Mental_Hospital_Days 4 Integer, null
Data Element History	---		

DEFAULT - CITY

Field Description	The city name the provider sets as a system default in the Agency Defaults screen. This value will appear on the milestone data entry screens where city is required.		
Valid Entries	Text		
Business Rules	None		
Tables	AGENCY_PREFERENCES		
Field Information	DASA Database (SQL)	Name: Length: Type:	Default_City 35 Varchar, null
Data Element History	---		

DEFAULT - FEE STATUS

Field Description	Indicates the default fee status for clients entered by this agency. The selected fee status will appear on the data entry screens where fee status is required.
Valid Entries	<u>Choices</u> / <u>Description</u> / <u>Target Codes</u> No Fee — Full payment made by public funds/client pays nothing — 1 Full Fee — Full payment made by client and/or their insurance — 2 Partial Fee — Partial payment made by public funds and partial payment from other funds — 3
Business Rules	None
Tables	AGENCY_PREFERENCES PRIVATE_FEE_STATUS_LUT
Field Information	DASA Database (SQL) Name: Private_Fee_Status_ID Length: 1 Type: Tinyint, not null Name: Private_Fee_Status_Desc Length: 30 Type: Varchar, null
Data Element History	---

DEFAULT – MEETING DAY (GROUP ACTIVITY)

Field Description	Indicates the default meeting day for a particular group. This field is only used as a display on the Create Group search screen.		
Valid Entries	Blank or Day of week		
Business Rules	None		
Tables	GROUP_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Default_Meeting_Day 50 Varchar, null
Data Element History	---		

DEFAULT – MEETING TIME (GROUP ACTIVITY)

Field Description	Indicates the default meeting time for a particular group		
Valid Entries	hh:mm AM/PM		
Business Rules	None		
Tables	GROUP_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Default_Meeting_Time 11 Varchar, null
Data Element History	---		

DEFAULT – MODALITY/ CONTRACT/ FUND SOURCE

Field Description	Sets the default Modality/Contract/Fund Source selected by the agency. This default value will appear on the system where financial information is required. The default value can be changed in the Agency Defaults utility. The list that appears in the Agency Defaults is based on what services the agency is contracted to offer.		
Valid Entries	Any selection from the available list is valid		
Business Rules	None		
Tables	AGENCY_PREFERENCES		
Field Information	DASA Database (SQL)	Name: Length: Type:	MCF_ID 4 Int, null
Data Element History	---		

DEFAULT – STAFF (GROUP ACTIVITY)

Field Description	Indicates the default Staff for a particular group		
Valid Entries	Staff name from the list of currently active staff members.		
Business Rules	GROUP_LUT FACILITY_STAFF		
Tables			
Field Information	DASA Database (SQL)	Name: Length: Type:	Default_Staff_ID 5 Varchar, null
	FACILITY_STAFF	Name: Length: Type:	Staff_ID 5 Varchar, not null
Data Element History	---		

DEFAULT - TITLE XIX

Field Description	The default Title XIX status. This Title XIX status will appear on the data entry screens where title XIX is required, unless changed through the Agency Defaults utility.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	None
Tables	AGENCY_PREFERENCES
Field Information	DASA Database (SQL) Name: Title_XIX Length: 1 Type: Tinyint, null
Data Element History	---

DEFAULT - ZIP CODE

Field Description	Identifies the default zip code. This zip code will appear on the data entry screens where zip code is required, unless changed through the Agency Defaults utility.		
Valid Entries	##### or ##### - ####		
Business Rules	None		
Tables	AGENCY_PREFERENCES		
Field Information	DASA Database (SQL)	Name: Length: Type:	Default_Zip_Code 10 Varchar, null
Data Element History	---		

DISABILITY

Field Description	Indicates if the client has a long term, major limiting disability (other than through transitory effects of alcohol or drugs). This includes any person who has a physical or mental impairment that substantially limits one or more major life activity; has a record of such impairment; or is regarded as having such impairment.
Valid Entries	Choices — Target Codes ADHD/ADD — 12 Cognitive Impairment — 8 Developmental — 10 Hearing — 2 Learning — 6 Mental/Psychological — 3 Mobility — 5 None — 1 Other — 4 Parkinson's — 13 Speech Impaired — 7 Vision — 9 Not Collected [*Inactive 6/1/93*] — 11
Business Rules	Required Field Cannot select another option if None or Not Collected is selected
Tables	DISABILITY_MILESTONE DISABILITY_TYPE_LUT
Field Information	DASA Database (SQL) — Name: Disability_Type_ID; Length: 2; Type: Tinyint, null (Look-up table only) — Name: Disability_Desc; Length: 35; Type: Varchar, null
Data Element History	Inactivated Not Collected — 6/1/93 Added Parkinson's and ADHD for Gambling Milestones only. — 7/1/05 Parkinson's and ADHD choices available for all milestones. — 7/1/07

DISCHARGE DATE/TIME

Field Description	The date and time at which a client's involvement with a treatment program is terminated. If discharge type is "no contract abort" use the last date service was provided as the discharge date.		
Valid Entries	Format: mm/dd/yyyy hh:mm AM/PM (12-hour format)		
Business Rules	Required Field Must be greater than admission date plus date and duration of last activity. Cannot be greater than today's date and time. Once discharge record is saved, discharge date/time cannot be modified. Deleting the record and re-entering the discharge is the only way to change this field.		
Tables	DISCHARGE DISCHARGE_REFERRAL		
Field Information	DASA Database (SQL)	Name: Length: Type:	Discharge_DateTime 16 Datetime, not null
Data Element History	---		

DISCHARGE OR CLOSURE TYPE

Field Description	Indicates the primary reason the client is being discharged from treatment, or for ADATSA assessments, the reason for assessment closure.
Valid Entries	

Choices	Description	Target Code
Charitable Choice		16
	The client chose to enter treatment at another treatment facility due to religious or moral convictions	
Client Died		3
	The client died while in treatment, or died within 30 days of the service contact, and no other form of discharge had been initiated prior to death. If an individual died after any of the other discharge types were initiated, the category of the originally initiated discharge type should be reported.	
Completed Treatment		2
	Services at this ASAM level of care have been completed	
DOC End of Supervision		17
	Discharged due to release from Department of Corrections supervision and no longer required to attend treatment. For Department of Corrections use only.	
Funds Exhausted		5
	Terminate or transfer of treatment services due the lack of funds.	
Inappropriate Admission		6
	A termination of treatment or change in the client's level of care (level of care does not meet client's needs)	
Incarcerated		10
	Treatment was terminated because the client was in jail or prison for more than 30 days and there was no treatment service provided for that period of time.	
Moved *		14
	Client moved from the area in which current treatment is located	

DISCHARGE OR CLOSURE TYPE - Continued

	No Contact/Abort *	8
	Clients who have no contact or abort treatment with the provider, as established within agreed upon treatment plan.	
	Not Amenable to Treatment/Lacks Engagement *	13
	A clinical decision is made to discharge the client when all other therapeutic approaches have been exhausted and the client continues to not be engaged in treatment.	
	Rule Violation/Non-compliance	9
	A termination of treatment services that is initiated by the provider in response to a client's continued violation of the agency's established rules.	
	Transferred to Different Facility	4
	Indicates either a transfer or a change in the ASAM level of care by the provider.	
	Withdraw Against Program Advice	1
	A termination of treatment initiated by the client, without the provider's concurrence.	
	Withdraw With Program Advice	11
	A termination of treatment services that is initiated by the provider in response to a client's inability to continue participating in treatment (i.e. medical reasons, transfer of job, etc.)	
	Not Collected [*Inactive 6/1/93*]	15
	Administrative Discharge [*Inactive 7/1/01*]	12
	Other [*Inactive 11/15/01*]	7
	Completed ADATSA Treatment [*Inactive*]	-
	No Longer Financially Eligible [*Inactive*]	-
	Not Eligible [*Inactive*]	-
	* Indicates a Discharge type that is not valid for Detox Short form	

DISCHARGE OR CLOSURE TYPE - Continued

Business Rules	Required Field If Discharge Type equals Client Died then a warning message appears stating that the Regional Administrator needs to be notified with an incident report. Treatment <u>Completed</u> discharge types: Completed Treatment Treatment <u>Not Completed</u> discharge types: Charitable Choice Client Died DOC End of Supervision Funds Exhausted Inappropriate Admission Incarcerated No contact/ Abort Not Amenable to Treatment/ Lacks Engagement Rule Violation Transfer to Different Facility Moved Withdrew Against Program Advice Withdraw With Program Advice The treatment completion percentage is calculated by dividing the Treatment Completed Totals by the sum of the Treatment Completed and Treatment Not Completed Totals. These figures may also be obtained by running the Trend: Discharge Listing report in Target.

DISCHARGE OR CLOSURE TYPE - Continued

Tables	DISCHARGE ASSESSMENT DISCHARGE_TYPE_LUT		
Field Information	DASA Database ASSESSMENT	Name: Length: Type:	ADATSA_Closure_Type_ID 2 Tinyint, null
	DISCHARGE DISCHARGE_TYPE_LUT	Name: Length: Type:	Discharge_Type_ID 2 Tinyint, null
	DISCHARGE_TYPE_LUT	Name: Length: Type:	Discharge_Desc 50 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93
	Inactivated Completed ADATSA Treatment		
	Inactivated No Longer Financially Eligible		
	Inactivated Not Eligible		
	Inactivated Administrative Discharge		11/15/01
	Inactivated Other		11/15/01
	Added Charitable Choice		5/11/05
	Changed treatment completion rate in Data Dictionary to reflect standard practices		7/14/06
	Added DOC End of Supervision, effective 7/1/1997		3/27/07

DISCHARGE UPDATE FLAG

Field Description	Indicates if the complete Discharge record has been updated with the client's current information. Box should be checked if this is true.		
Valid Entries	Choices	Target Codes	
	Checked = Yes	1	
	Unchecked = No	Null / 0	
Business Rules	Defaulted to Unchecked. Required for discharges in MidTier.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Copy_Update_Flag 1 Tinyint, null
Data Element History	---		

DISPLAYS ON ADMISSION

Field Description	Indicates which Entry Referral types are displayed in an Admission. The Target database administrator updates this field.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ENTRY_REFERRAL_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Displays_On_Admission 1 Tinyint, null
Data Element History	Changed value of “No” from Null to 0		1/30/2005

DISPLAYS ON ASSESSMENT

Field Description	Indicates which Entry Referral types are displayed in an Admission. The Target database administrator updates this field.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ENTRY_REFERRAL_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Displays_On_Assessment 1 Tinyint, null
Data Element History	Changed value of “No” from Null to 0		1/30/2005

DISPLAYS ON CLIENT ACTIVITY

Field Description	Indicates which Support Activity types are displayed in a Client Support Activity. The Target database administrator updates this field.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	SUPPORT_ACTIVITY_TYPE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Displays_On_Client_Activity 1 Tinyint, null
Data Element History	---		

DISPLAYS ON FACILITY ACTIVITY

Field Description	Indicates which Support Activity types are displayed in an Agency Support Activity. The Target database administrator updates this field.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	SUPPORT_ACTIVITY_TYPE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Displays_On_Facility_Activity 1 Tinyint, null
Data Element History	---		

DOC SUPERVISION

Field Description	This refers to a client that is under Department of Corrections (DOC) supervision. Examples of this would be clients who are under a work release program, are currently incarcerated or under other DOC community supervision.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	Required field if Court Ordered is anything other than Not Collected or None.
Tables	DEPARTMENTAL_COLLABORATION
Field Information	DASA Database (SQL) Name: DOC_Supervision_ID Length: 1 Type: Tinyint, null
Data Element History	---

DOMESTIC VIOLENCE, CURRENT VICTIM

Field Description	Indicates if the client is a current victim of domestic violence (within the last the last 30 days). This includes: physical harm, bodily injury, assault, or the infliction of fear of imminent physical harm, bodily injury, or assault between family or household members; or sexual assault of one family or household member by another.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	Uncertain	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Curr_Domestic_Violence 1 Int, null
Data Element History	Changed value of “Uncertain” from -1 to 2		1/30/2005

DOMESTIC VIOLENCE, EVER BEEN VICTIM

Field Description	Indicates if the client has ever been a victim of domestic violence. This includes: physical harm, bodily injury, assault, or the infliction of fear of imminent physical harm, bodily injury, or assault between family or household members; or sexual assault of one family or household member by another.		
Valid Entries	Choices Yes No Uncertain	Target Codes 1 0 2	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Past_Domestic_Violence 1 Int, null
Data Element History	Changed value of “Uncertain” from -1 to 2		1/30/2005

DRIVERS LICENSE

Field Description	Indicates if the client has a currently valid drivers license.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Valid_Drivers_License 1 Tinyint, null
Data Element History	Corrected Data Dictionary to reflect 0 as correct value for "No"		1/30/2005

DRUG EXPENSES

Field Description	Indicates how much money the client reports having spent in the past thirty days on drugs. (Round to the nearest whole dollar).		
Valid Entries	#### Number from 0 through 9999.		
Business Rules	Rounds to the nearest whole dollar. Do not include the dollar sign ($), commas or periods.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Drug_expense_amount 4 Money, null
Data Element History	---		

DRUG PROBLEMS

Field Description	Indicates how many days in the past thirty days that the client reports having experienced drug problems.		
Valid Entries	##		
Business Rules	Cannot be greater than 30.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Drug_Prob_Days 2 Tinyint, null
Data Element History	---		

DRUG PROBLEMS - ENVIRONMENT

Field Description	Indicates if anyone in the client's immediate family or current living situation has a problem with drugs other than alcohol or tobacco.		
Valid Entries	Choices Yes No	Target Code 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Family_Drug_Prob 1 Tinyint, null
Data Element History	---		

DUE TO RELAPSE

Field Description	Indicates if the client left treatment due to a relapse.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	Unknown	2	
Business Rules	None		
Tables	DISCHARGE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Relapsed 1 Integer, null
Data Element History	Changed value of “Unknown” from -1 to 2		1/30/2005

DURATION HOURS/MINUTES

Field Description	Indicates number of hours and minutes used in performance of an assessment, admission or activity.		
Valid Entries	Hours: ## from 0 through 5 Minutes: ## from 0 through 59		
Business Rules	Required Field Duration Hours plus Duration Minutes cannot be greater than 5 hours and 0 minutes for assessment or admission. Duration Hours plus Duration Minutes cannot be greater than hours 12and 59 minutes for client treatment and client support activities. Duration Hours plus Duration Minutes cannot be greater than 99 hours and 59 minutes for agency support activities.		
Tables	ADMISSION ASSESSMENT TREATMENT_ACTIVITY CLIENT_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Duration_Hours 2 Integer, null Duration_Minutes 2 Integer, null
Data Element History	---		

EDS SCORE

Field Description	Total number of “yes” answers for Mental Health Externalizing Behaviors on GAIN SS.		
Valid Entries	0-5		
Business Rules	If a score is entered for the EDS, IDS or SDS subscales then all three must be entered.		
Tables	GAIN_SS		
Field Information	DASA Database (SQL)	Name: Length: Type:	EDS_Score 1 tinyint, null
Data Element History	Added data element		1/1/07

EMPLOYMENT ACTIVITY

Field Description	Indicates the client's current employment or primary daily activity. Employed persons who worked for someone else; were self-employed at a business, farm, or professional practice; or who did unpaid work in a family business or farm. Include persons who were absent from a job or business due to illness, vacation, strike, or bad weather if they were expected to return to work when the condition no longer existed. Freelance workers are considered employed if they had an arrangement with one or more employers to work for pay according to a weekly or monthly schedule, either full time or part time. Exclude persons receiving revenue for an enterprise but not participating in its operation. The work must be within a legitimate enterprise. Illegal aliens working at otherwise legitimate jobs are considered employed. Unemployed persons who were not working at a legitimate job or business. Include persons doing housework (exclude homemakers) or charity work for which they received no pay and seasonal workers during the portion of the year they were not working. Persons whose income was exclusively from stipends, welfare payments, and other untaxed sources are considered unemployed unless payments were conditional upon the performance of work.
Valid Entries	

Choices	Description	Target Codes
Employed full time		2
	Include persons who had a regular job of 30 or more hours per week. Individuals with concurrent part-time jobs that total at least 30 hours of work per week are considered to be employed full time. Self-employed persons and freelance workers must generally engage in procuring and/or performing work 30 hours per week to be counted as having full-time employment.	
Employed part time		8
	Include employed persons who work less than a total of 30 hours per week at one or more jobs.	
Employed temporary, on call, or intermittent		11

EMPLOYMENT ACTIVITY - Continued

	Homemaker	3
	Include persons who do not work at full-time day jobs because of the need or desire to care for a minor child or incapacitated family member, or who can demonstrate that a major portion of their day is spent in managing a multi-person household.	
	Institutionalized	4
	Include persons, who could not work because they were incarcerated, an inpatient in a hospital, or a person confined to any other institution.	
	Military	5
	Include persons who were on active duty in the armed forces, including the Coast Guard. Exclude members of the Reserves or National Guard unless activated at the time of data collection.	
	Not in Work Force	7
	Not Working Due to Disability.	1
	Retired	9
	Under Age – Not in Workforce	15
	Unemployed Not Seeking Work	6
	Include unemployed persons who had not actively sought employment in the last 30 days and who did not fit into any other category	
	Unemployed Seeking Work	13
	Include unemployed persons who had actively sought employment in the last 30 days. In order to be actively seeking employment, the person must have made at least one personal telephone or mail contact with an employer during the preceding 30 days or be registered with a recognized employment agency. Include persons who were on lay-off status but with the prospect of rehire.	
	Unknown	12
	Full Time Student [*Inactive 11/15/01*]	10
	Not Collected [*Inactive 6/1/93*]	14

EMPLOYMENT ACTIVITY - Continued

Business Rules	Required Field		
Tables	TREATMENT MILESTONE EMPLOYMENT_ACTIVITY_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Employment_Activity_ID 2 Tinyint, null Employment_Activity_Desc 60 Varchar, null
Data Element History	Changed definition of part time employment from 35 hours to 30 hours. Full Time Employment is now over 30 hours.		7/1/07

EMPLOYMENT END DATE (STAFF)

Field Description	Indicates the date the staff member was terminated or left employment. No event occurring after the end date can be associated with this staff member.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Must be greater than Employment Start Date TARGET Data Entry operator can add or modify staff information in the Agency Staff screen.		
Tables	FACILITY_STAFF		
Field Information	DASA Database (SQL)	Name: Length: Type:	Employment_End_Date 10 Datetime, null
Data Element History	---		

EMPLOYMENT INCOME

Field Description	Indicates the amount of money earned in the past thirty days by the client through working a job (net or take-home pay, include “under-the-table” pay).		
Valid Entries	########		
Business Rules	Must be a valid number Do not include a dollar sign ($) or commas.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Employment_Income_Amount 8 Money, null
Data Element History	---		

EMPLOYMENT START DATE (STAFF)

Field Description	Indicates the date the staff member was hired by the agency. No event occurring before a start date can be associated with this staff member.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	TARGET Data Entry operator can add or modify staff information in the Agency Staff screen.		
Tables	FACILITY_STAFF		
Field Information	DASA Database (SQL)	Name: Length: Type:	Employment_Start_Date 10 Datetime, null
Data Element History	---		

ENTRY REFERRAL

Field Description	Indicates all contributing reasons for the referral of the client to treatment. Check all that apply.
Valid Entries	

Choices	Description	Target Codes
ADATSA Assessment Center		1
	The client was referred to treatment from an ADATSA Assessment Center.	
At Risk Youth (ARY/CHINS)		25
	Indicates that a parent has petitioned the Division of Children & Family Services (DCFS) to assist in accessing services such as chemical dependency assessment and treatment. Especially for at-risk, runaway, homeless youth who may be out of the parents control and have need of services.	
Attorney		24
	An attorney or other legal counsel referred the client to treatment.	
BECCA Involved		26
	Client referred from the Division of Children & Family Services (DCFS) and is receiving benefits under the BECCA Legislation. Includes At-Risk Youth petitions. Children in Need of Services (CHINS) petitions, Truancy petitions and Parent Initiated Outpatient/Inpatient Treatment.	
Court/Probation		9
	The client was referred to treatment from court or probation.	
DCFS/Child Protective Services		13
	The client was referred to treatment from Child Protective Services.	
Department of Corrections		3
	Indicates whether the client was referred to treatment from the Department of Corrections.	
Department of Licensing		11
	The client was referred to treatment from the Department of Licensing.	

ENTRY REFERRAL - Continued

`	Detoxification Facility	4
	The client was referred to treatment from a detoxification facility.	
	Diversion	28
	Client accepts referral by local court in order to divert certain charges such as Minor In Possession (MIP).	
	DSHS Community Service Office	10
	The client was referred to treatment from a DSHS Community Service Office (CSO) or Home & Community Services (HCS)	
	Employer/EAP	5
	The client was referred to treatment from an employer or Employee Assistance Program.	
	First Steps or PPP Case	2
	The client was referred to treatment from a First Steps/Maternity Case Manager.	
	Gambling Facility	29
	Client was referred to treatment through Helpline phone number posted in gambling facility or on gambling machines or casino advertising.	
	Group Care	27
	Client participates and was referred from Group Care Enhancement which is a program that provides chemical dependency services in group home settings where these services would otherwise not be provided.	
	Help line	31
	Client was referred from the Gambling Help Line (1-800-547-6133)	

ENTRY REFERRAL - Continued

	Involuntary Commitment	8
	The client was referred to treatment from an involuntary commitment.	
	JRA	20
	Juvenile Rehabilitation Administration	
	Mass Media	32
	Client was referred to treatment through Helpline number broadcast by radio, television, newspaper or magazine article or through billboard or bus posters or other media seen by the public.	
	MD/Primary Care Provider	35
	Mental Health Provider	23
		6
	Other Alcohol/Drug Facility	
	The client was referred to treatment from another chemical dependency treatment provider.	
	Other	12
	Indicates whether the client was referred to treatment from any other source not listed.	
	Other Health Care Provider	7
	The client was referred to treatment from another health care provider.	
	Pharmacist	36
	Phone Book	33
	The client was referred to treatment by looking for assistance with a gambling problem in the phone book.	
	Police	19
	The person was referred to the program by law enforcement or other county designated personnel (usually called Emergency Service Patrol) under authority of Chapter 70.96A.120RCW.program.	
	School/Education	16
	The client was referred to treatment from a school or educational facility.	

ENTRY REFERRAL - Continued

	Self/Family	15
	The client was referred to treatment by him/herself. This also includes family referrals.	
	Self Help	34
	The client was referred to treatment by contact with another individual from a self-help or twelve step meeting.	
	Social Security Administration	22
	Client was referred by the Social Security Administration	
	TASC	21
	Client was referred by Treatment Accountability for Safer Communities (TASC)	
	Website	37
	Other	12
	Indicates whether the client was referred to treatment from any other source not listed.	
	Administrative Transfer [*Inactive 11/15/01*]	17
	Indicates that client was referred and transferred from another drug/alcohol treatment facility	
	Protective Custody [*Inactive 11/15/01*]	14
	Indicates that law enforcement personnel have removed the client from a potentially dangerous living environment.	
	Not Collected [*Inactive 6/1/93*]	18
Business Rules	Required field All options are stored as separate records. If “Not Collected” is selected then no other selections are allowed. ADATSA Assessment Center is an option for selection. ADATSA Assessment Center will be inactivated as of 1/1/2014	
Tables	ADMISSION_ENTRY_REFERRAL ASSESSMENT_ENTRY_REFERRAL ENTRY_REFERRAL_LUT	

ENTRY REFERRAL - Continued

Field Information	DASA Database (SQL)	Name: Length: Type:	Entry_Referral_ID 2 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Entry_Referral_Desc 30 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93
	Inactivated Administrative Transfer		11/15/01
	Inactivated Protective Custody		11/15/01
	Inactivated Gambling Retail		10/2012
	Added Gambling Facility, Gambling Retail, Help line, Mass media, Phone book and Self Help for Gambling milestones only.		7/1/05
	Gambling Facility, Gambling Retail, Help line, Mass media, Phone book and Self Help are available for all milestones.		7/1/07

ESTIMATED PREGNANCY DUE DATE

Field Description	Indicates the estimated due date of the client's current pregnancy.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Client must be female. Must be a valid date.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Pregnancy_Est_Due_Date 10 Datetime, null
Data Element History	---		

EVER USED NEEDLES

Field Description	Indicates if the client has ever used needles to inject illicit drugs.		
Valid Entries	Choices	Target Codes	
	Continuously	1	
	Intermittently	2	
	Rarely	3	
	Never	4	
	Yes [*Inactive 11/15/01*]	5	
	No [*Inactive 11/15/01*]	6	
Business Rules	Can't equal Never if Administration Method = Injected.		
Tables	NEEDLE_USE_LUT TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Needle_Use_ID 1 Tinyint, null Needle_Use_Desc 25 Varchar, null
Data Element History	Inactivated Yes		11/15/01
	Inactivated No		11/15/01

EXPERIENCED ANXIETY

Field Description	In the past 30 days has the client had a significant period of time when they experienced serious anxiety/tension-uptight, unreasonably worried, inability to feel relaxed? Do not include symptoms that are a direct result of substance abuse.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Experience_Anxiety 1 Tinyint, null
Data Element History	Added element		7/1/2007

EXPERIENCED DEPRESSION

Field Description	In the past 30 days has the client had a significant period of time when they experienced serious depression-sadness, hopelessness, loss of interest, difficulty with daily functions? Do not include symptoms that are a direct result of substance abuse.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Experience_Depression 1 Tinyint, null
Data Element History	Added element		7/1/2007

EXPERIENCED HALLUCINATIONS

Field Description	In the past 30 days has the client had a significant period of time when they experienced hallucinations-saw things or heard voices that were not there? Do not include symptoms that are a direct result of substance abuse.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Experience_Hallucinations 1 Tinyint, null
Data Element History	Added element		7/1/2007

EXPERIENCED THOUGHTS OF SUICIDE

Field Description	In the past 30 days has the client had a significant period of time when they experienced serious thoughts of suicide? (Patient seriously considered a plan for taking his/her life)? This includes symptoms that are a direct result of substance abuse.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Suicide_Thoughts 1 Tinyint, null
Data Element History	Added element		7/1/2007

EXPERIENCED TROUBLE CONCENTRATING

Field Description	In the past 30 days has the client had a significant period of time when they experienced trouble understanding, concentrating or remembering? Do not include symptoms that are a direct result of substance abuse.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Experience_Concentration 1 Tinyint, null
Data Element History	Added element		7/1/2007

EXPERIENCED VIOLENT BEHAVIOR

Field Description	In the past 30 days has the client had a significant period of time when they experienced trouble controlling violent behavior including episodes of rage or violence? This includes symptoms that are a direct result of substance abuse.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Controlling_Violence 1 Tinyint, null
Data Element History	Added element		7/1/2007

FEDERAL CLIENT NUMBER

Field Description	This is a computer generated number used to replace client identifying information in sending records to the Federal Client Database. (Not a Target data entry screen.)		
Valid Entries	Computer generated number		
Business Rules	None		
Tables	CLIENT_MASTER		
Field Information	DASA Database (SQL)	Name: Length: Type:	Federal_Client_Number 10 Int, null
Data Element History	---		

FIRST ACCEPTED SERVICE DATE

Field Description	Records the date of the first appointment for face-to-face service accepted by the client at the agency related to this specific treatment episode. This will normally be the same date as the First_Offered_Service_Date. This could be, for example, the date of the first orientation group or assessment for the client or the admission /intake session		
Valid Entries	mm/dd/yyyy		
Business Rules			
Tables	WAITING_LIST		
Field Information	DASA Database (SQL)	Name: Length: Type:	First_Accepted_Service_Date 8 Datetime, null
Data Element History	Added element		10/1/09

FIRST CONTACT DATE

Field Description	Records the date that the client first made contact with the agency related to this specific treatment episode. This could be, for example, the date that the client first contacted the agency by telephone, made an appointment or first walked in the door. If the client has been in contact with the treatment agency multiple times use the initial contact relating to the current treatment episode.
Valid Entries	mm/dd/yyyy
Business Rules	Must be less than or equal to the today's date. Required field.
Tables	ADMISSION ASSESSMENT AND WAITING_LIST
Field Information	DASA Database (SQL) Name: First_Contact_DateTime Length: 8 ADMISSION Type: Datetime, null ASSESSMENT WAIT_LIST Name: First_Contact_Date Length: 8 Type: Datetime, null
Data Element History	Expanded use of variable and included in the new Waiting List table 10/1/2009

FIRST OFFERED SERVICE DATE

Field Description	Records the date of the first appointment for face-to-face service offered by the agency for a particular client related to this specific treatment episode. This could be, for example, the date of the first orientation group or assessment for the client or the admission /intake session		
Valid Entries	mm/dd/yyyy		
Business Rules			
Tables	WAITING_LIST		
Field Information	DASA Database (SQL)	Name: Length: Type:	First_Offered_Service_Date 8 Datetime, null
Data Element History	Added element		10/1/09

FIRST NAME

Field Description	The first name of the client or staff member. Please report as complete a name as possible (i.e. Robert instead of Rob)		
Valid Entries	Fill in up to 40 characters. No numbers or special characters		
Business Rules	Required Field		
Tables	CLIENT_MASTER FACILITY_STAFF		
Field Information	DASA Database CLIENT_MASTER	Name: Length: Type:	Client_First_Name 40 Varchar, null
	FACILITY_STAFF	Name: Length: Type:	Staff_First_Name 40 Varchar, null
Data Element History	---		

FORWARD REFERRAL (ASSESSMENT)

Field Description	Indicates where a client is referred to upon completion of the Assessment.
`Valid Entries	Choices / Description / Target Codes ADATSA Assessment Center — 9 Indicates whether the client was referred to an ADATSA Assessment Center. ADATSA Treatment — 7 Indicates whether the client was referred to ADATSA funded treatment. Alcohol/Drug Information School — 3 Indicates whether the client was referred to Alcohol/Drug Information School. ATR Services — 13 Referred to services provided by the Access to Recovery grant CD Involuntary Commitment — 5 Indicated whether the client was referred to a Chemical Dependency Involuntary Commitment. Detoxification — 1 Indicates whether the client was referred to a detoxification facility. Gambling Treatment — 14 Client was referred to gambling treatment. Medical/Dental — 4 Indicates whether the client was referred to medical/dental services. Mental Health — 10 Indicates whether the client was referred to mental health services. No Referral — 11 Non-ADATSA Treatment — 2 Indicates whether the client was referred to Non-ADATSA treatment.

FORWARD REFERRAL (ASSESSMENT) - Continued

	Other		6
		Indicates whether the client was referred to another source not previously listed.	
	Self-Help Group		8
		Indicates whether the client was referred to a self-help group.	
	Not Collected [*Inactive 6/1/93*]		12
Business Rules	Required Field No other selections can be made if No Referral or Not Collected is selected. ADATSA Assessment Center, ADATSA Treatment, Non-ADATSA Treatment, and ATR are options for selection. ADATSA Assessment Center, ADATSA Treatment, will no longer be available for selection on or after 1/1/2014.		
Tables	ASSESSMENT_FORWARD_REFERRAL FORWARD_REFERRAL_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Forward_Referral_ID 2 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Forward_Referral_Desc 60 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93
	Added ATR Services		7/1/05
	Added Gambling Treatment		7/1/07

FREQUENCY OF USE

Field Description	Indicates the frequency that the client used a specific substance in the last 30 days		
Valid Entries	Choices		Target Codes
	No Use		1
	1 to 3 times		2
	4 to 12 times		7
	13 or more times		8
	Daily		5
	Unknown		6
	1-2 times per week [*Inactive 11/15/01*]		3
	3-6 times per week [*Inactive 11/15/01*]		4
Business Rules	Required field if a substance has been selected.		
Tables	FREQUENCY_LUT SUBSTANCE_USED		
Field Information	DASA Database (SQL)	Name: Length: Type:	Frequency_Of_Use_ID 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Frequency_ID 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Frequency_Desc 25 Varchar, null
Data Element History	Inactivated “1-2 times per week”		11/15/01
	Inactivated “3-6 times per week”		11/15/01

FUND SOURCE

Field Description	Indicates the fund source for support activities or treatment. For assessment or admission, Modality, Contract and Fund Source are stored as separate data elements. Each valid combination of these three elements is assigned a numeric code by the database and stored in the Modality_Contract_Funding table. This numeric code, named "MCF_ID" is associated with each individual record in the Service_Funding table. *If you have any questions about which modality, contract type or fund source to use please contact your county drug and alcohol coordinator or regional administrator.*
Valid Entries	

Form Codes	Choices	Target Codes
A	Agency Funded	1
C	County Community Services	2
D	Department of Corrections	3
F	Federal Direct	4
O	Other	5
P	Private Pay	6
S	State Direct	7
N	State DSHS (Non DASA)	9
T	Tribal Community Services	11
Z	Not Collected [*Inactive 6/1/93*]	8
H	State (Non DSHS) [*Inactive 7/1/07*]	10

Business Rules	None

FUND SOURCE – Continued

Tables	CLIENT_SUPPORT_ACTIVITY FACILITY_SUPPORT_ACTIVITY FUNDING_SOURCE_LUT		
Field Information	DASA Database (SQL) (Lookup Table Only)	Name: Length: Type: Name: Length: Type:	Funding_Source_ID 1 Tinyint, null Funding_Source_Dec 60 Varchar
Data Element History	Inactivated Not Collected Inactivated State DSHS (Non DASA)		6/1/93 7/1/07

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GAIN DATE/TIME

Field Description	Date and time of the GAIN SS assessment		
Valid Entries	Format: mm/dd/yyyy hh:mm:ss AM/PM (12-hour format)		
Business Rules	Required field Cannot be greater than today's date and time		
Tables	GAIN_SS		
Field Information	DASA Database (SQL)	Name: Length: Type:	Gain_Datetime 8 Datetime, not null
Data Element History	Added data element		1/1/07

GAMBLING – ADVERSE CONSEQUENCES

Field Description	In the past twelve months has the client continued to gamble despite adverse consequences resulting from gambling? This field is for gambling milestones.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	Required if assessment or admission type is Gambling At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Consequence 1 Tinyint, null
Data Element History	Created		10/3/05

GAMBLING – BETTING INCREASE

Field Description	Has the amount of money that the client wagers increased over the last twelve months? This field is for gambling milestones.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	Required if assessment or admission type is Gambling At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Betting 1 Tinyint, null
Data Element History	Created		10/3/05

GAMBLING - ENVIRONMENT

Field Description	Indicates if anyone in the client's immediate family or current living situation has a gambling problem.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Family_Gambling_Prob 1 Tinyint, null
Data Element History	---		

GAMBLING – EPISODES PER WEEK

Field Description	In the last 30 days, the average number of gambling episodes per week. This field is for gambling milestones.		
Valid Entries	A number from 0 through 10,000.		
Business Rules	Required if assessment or admission type is Gambling At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Episodes 4 Int, null
Data Element History	Created		10/3/05

GAMBLING FUND SOURCE

Field Description	Use to indicate the funding source for assessments and admissions for gambling treatment.
Valid Entries	Choices — Target Codes Other — 7 Private Pay — 6 State Direct — 5
Business Rules	Assessment: Required field for assessments if Assessment Type is Gambling. Entry in this field is not possible unless the Assessment Type is Gambling. Admission: Required field for admissions if Admission Type is Gambling or CD and Gambling. Entry in this field is not possible unless the Admission Type is Gambling or CD and Gambling. Gambling and CD/Gambling admissions must have modalities of either Outpatient or Intensive Outpatient
Tables	SERVICE_FUNDING FUNDING_SOURCE_LUT
Field Information	DASA Database (SQL) — Name: Gambling_Fund_Source_ID; Length: 4; Type: Int Lookup Table Only — Name: Funding_Source_ID; Length: 1; Type: Tinyint, not null Name: Funding_Source_Desc; Length: 60; Type: Varchar, null
Data Element History	Fixed display to show private pay on drop down 08/29/11

GAMBLING – LIED ABOUT

Field Description	Has the client lied about their gambling activities within the last twelve months? This field is for gambling milestones.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	Required if assessment or admission type is Gambling At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Lied 1 Tinyint, null
Data Element History	Created		10/3/05

GAMBLING – MONEY SPENT

Field Description	The average weekly amount of money that the client spent on gambling in the last 30 days? This field is for gambling milestones.		
Valid Entries	A number from 0 through $1,000,000 Format: ########		
Business Rules	Required if assessment or admission type is Gambling At discharge it is required if the admission type was Gambling or CD and Gambling. Do not use the dollar sign ($) or commas.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Spent 4 Int, null
Data Element History	Created		10/3/05

GAMBLING – SUICIDE

Field Description	Within the last twelve months has the client contemplated or attempted suicide. This field is for gambling milestones.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.
Tables	GAMBLING_MILESTONE
Field Information	DASA Database (SQL) Name: Suicide Length: 1 Type: Tinyint, null
Data Element History	Created 10/3/05

GAMBLING – THINKING ABOUT

Field Description	Within the last twelve months has the client spent long periods of time thinking about gambling? This field is for gambling milestones.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Thinking 1 Tinyint, null
Data Element History	Created		10/3/05

GAMBLING – TYPES

Field Description	This is a series of questions regarding how many days, within the past 30, the client has wagered on various types of games, events or activities. This field is for gambling milestones.		
Valid Entries	A number from 0 through 30 The questions are about the following types of gambling activities: Bingo Bowl, Pool, Golf, or other games of skill Card Games (non-casino) Casino Game Tables Dice, Dominos Horses, Dogs Internet Gambling Lottery, Scratch Tickets Other forms of Gambling Slots, Poker machines, Video Lottery Sports Stock Options, Commodities		
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database	Name:	Bingo Bowl_Pool Cards Casino Dice Dogs_Horses Internet Lottery OtherGambling Slots Sports Stocks
	(SQL)	Length: Type:	4 Int, null
Data Element History	Created		10/3/05

GAMBLING – UNSUCCESSFUL LIMIT

Field Description	Has the client unsuccessfully tried to limit the amount or time or money spent on gambling activities? This field is for gambling milestones.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.
Tables	GAMBLING_MILESTONE
Field Information	DASA Database (SQL) — Name: Limit; Length: 1; Type: Tinyint, null
Data Element History	Created 10/3/05

GENDER

Field Description	Indicates the gender of the staff member or client.		
Valid Entries	Choices Male Female	Target Codes M F	
Business Rules	Required Field		
Tables	CLIENT_MASTER FACILITY_STAFF		
Field Information	DASA Database CLIENT_MASTER FACILITY_STAFF	Name: Length: Type: Name: Length: Type:	Client_Gender 1 Char, null Staff_Gender 1 Char, null
Data Element History	---		

GROUP END DATE

Field Description	Indicates the ending date of a particular treatment or support group. An activity for a particular group cannot occur after its End Date. Also see entry for Group Start Date in the Data Dictionary.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	None		
Tables	GROUP_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	End_Date 10 Datetime, null
Data Element History	---		

GROUP ID

Field Description	Indicates the numeric group ID that TARGET assigns to distinguish various groups.		
Valid Entries	########		
Business Rules	Cannot be modified		
Tables	CLIENT_SUPPORT_ACTIVITY GROUP_ROSTER GROUP_LUT TREATMENT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Group_ID 7 Int, null
Data Element History	---		

GROUP NAME

Field Description	Group name assigned to treatment or support group to identify it.		
Valid Entries	Any name up to 60 characters in length.		
Business Rules	Required Field.		
Tables			
Field Information	DASA Database (SQL)	Name: Length: Type:	Group_Name 60 Varchar, null
Data Element History	---		

GROUP START DATE

Field Description	Indicates the starting date of a particular treatment or support group. An activity for a particular group cannot occur before its Start Date. Also see entry for Group End Date in the Data Dictionary.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Required Field		
Tables	GROUP_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Start_Date 10 Datetime, null
Data Element History	---		

GROUP TYPE

Field Description	Indicates the type of group.		
Valid Entries	Choices	Target Codes	
	Treatment	1	
	Support	2	
Business Rules	Required Field		
Tables	GROUP_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Group_Type 1 Tinyint, null
Data Element History	---		

GUARD (NATIONAL) OR RESERVES

Field Description	Indicates if the client has ever been a member of the National Guard or Reserves.		
Valid Entries	Choices	Target Codes	
	No	0	
	National Guard	1	
	Reserves	2	
Business Rules	None		
Tables	TREATMENT_MILESTONE NATIONAL_GUARD_ RESERVES_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Guard_Reserves_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Guard_Reserves _Desc 40 Varchar, not null
Data Element History	Added element		12/1/08

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HOMELESS

Field Description	Indicates whether client is currently homeless or on the street. This is only used in the Short Form Detox. For other milestones (Assessment, Admission and Discharge) please see the Data Dictionary entry on Residence.
Valid Entries	Choices — Target Codes Yes — 6 No — Null
Business Rules	If “Yes” then Target will set the Residence_Type_ID in the TREATMENT_MILESTONE table to ‘6’- On the street. If “No” then Target will set the Residence_Type_ID in the TREATMENT_MILESTONE table to null
Tables	TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Residence_Type_ID Length: 2 Type: Tinyint, null
Data Element History	---

IDS SCORE

Field Description	Total number of “yes” answers for Mental Health Internalizing Behaviors on GAIN SS.		
Valid Entries	0-5		
Business Rules	If a score is entered for the EDS, IDS or SDS subscales then all three must be entered.		
Tables	GAIN_SS		
Field Information	DASA Database (SQL)	Name: Length: Type:	IDS_Score 1 tinyint
Data Element History	Added data element		1/1/07

IDU FLAG

Field Description	This is a simple Yes / No field that records at the initial contact / Waiting List record whether or not the client has administered a drug by injection over the course of his / her drug using history.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	Refused	2	
Business Rules			
Tables	WAITING_LIST YES_NO_REFUSED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	IDU_Flag 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Yes_No_Refused_ID 1 Tinyint, not null
		Name: Length: Type:	Yes_No_Refused_Desc 20 Varchar, not null
Data Element History	Added element		10/1/09

ILLEGAL ACTIVITIES

Field Description	Indicates how many days in the past thirty that the client reports having been engaged in illegal activities.		
Valid Entries	## from 0 through 30		
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Ilegal_activity_count 2 Tinyint, null
Data Element History	---		

ILLEGAL INCOME

Field Description	Indicates the amount of cash earned by the client in the past thirty days through illegal activities.		
Valid Entries	########		
Business Rules	Must be a valid positive number Do not use the dollar sign ($) or commas.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Illicit_Income_Amount 8 Money, null
Data Element History	---		

INACTIVE DATE

Field Description	Indicates the date that a data element became inactive. A data element cannot be associated to an event that is after its Inactive Date. Also see entry for Active Date in the Data Dictionary.
Valid Entries	Format: mm/dd/yyyy
Business Rules	Cannot be earlier than 1/1/1900 Cannot be earlier than Active Date
Tables	ADATSA_EXCEPTION_TYPE_LUT ARREST_TYPE_LUT ASAM_LEVEL_LUT ASI_PATIENT_RATING_SCALE_LUT ASSESSMENT_PRIORITY_LUT CHILD_CARE_TYPE_LUT CLIENT_REGISTRY_STATUS_LUT COMMUNITY_SERVICE_OFFICE_LUT CONTRACT_TYPE_LUT DEGREE_LUT DISABILITY_TYPE_LUT DISCHARGE_TYPE_LUT EMPLOYMENT_ACTIVITY_LUT ENGLISH_ABILITY_LUT ENTRY_REFERRAL_LUT FORWARD_REFERRAL_LUT FREQUENCY_LUT FUNDING_SOURCE_LUT HISPANIC_LUT INCAPACITY_LUT LANGUAGE_LUT LEGAL_ISSUE_TYPE_LUT LIVING_ARNG_LUT MARITAL_SATISFACTION_LUT MARITAL_STATUS_LUT MEDICAL_TREATMENT_NEED_LUT MENTAL_TREATMENT_TYPE_LUT METHOD_LUT MILESTONE_TYPE_LUT MODALITY_CONTRACT_FUNDING MODALITY_LUT NEEDLE_USE_LUT NONELIG_REASON_LUT OFFERED_SERVICE OTHER_SERVICES_REFERRAL_LUT

INACTIVE DATE -Continued

Tables	PERSONAL_RELATIONSHIP_TYPE_LUT PREGNANCY_OUTCOME_TYPE_LUT PRIMARY_INCOME_LUT PRIVATE_FEE_STATUS_LUT PRIVATE_INSURANCE_PAYMENT_LUT PSYCH_EVALUATION_STATUS_LUT PUBLIC_ASSIST_LUT RACE_LUT RESIDENCE_TYPE_LUT RUNAWAY_COUNT_LUT SCHOOL_STATUS_LUT SCHOOL_TYPE_LUT SERVICE_FUNDING SEXUAL_ORIENTATION_LUT SPECIAL_ASSESSMENT_TYPE_LUT SPECIAL_PROJECT_LUT STAGE_OF_USE_LUT SUBSTANCE_LUT SUPPORT_ACTIVITY_TYPE_LUT TITLE_XIX_STATUS_LUT TOBACCO_PRODUCT_TYPE_LUT TREATMENT_ACTIVITY_TYPE_LUT TRIBE_LUT USER_DEFINED_OPTION_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Inactive_Date 16 Datetime, not null
Data Element History	---		

INFANT'S FIRST NAME

Field Description	Indicates the first name of the client's child.		
Valid Entries	Text		
Business Rules	None		
Tables	PREGNANCY_OUTCOME		
Field Information	DASA Database (SQL)	Name: Length: Type:	Infant_First_Name 20 Varchar, null
Data Element History	---		

INJECT DRUGS IN LAST 30 DAYS

Field Description	This field is to indicate if the client has injected drugs in the last 30 days.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	Unknown	2	(This option for No Contact/Abort discharges only)
Business Rules	Required Field Cannot select Unknown unless the discharge type is No Contact/Abort		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Used_Needle_Recently 1 Integer, null
Data Element History	---		

INSURANCE PAYMENT (PRIVATE)

Field Description	Indicates the percentage of treatment that the client's private health insurance will pay for.		
Valid Entries	Choices	Target Codes	
	No insurance payment	1	
	50% or greater	2	
	Less than 50%	3	
Business Rules	Required Field for admissions		
Tables	SERVICE FUNDING PRIVATE_INSURANCE_PAYMENT_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Private_Insurace_Payment_ID 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Private_Insurace_Payment_Desc 30 Varchar, null
Data Element History	Stopped collecting this information for assessments		3/1/03

LAST NAME

Field Description	Indicates the last name of client or staff member. Please do not include punctuation or titles (i.e., hyphens, apostrophes, Jr. etc.) when entering the data into the database.		
Valid Entries	Up to 60 characters.		
Business Rules	Required Field Letters only		
Tables	CLIENT_MASTER FACILITY_STAFF		
Field Information	DASA Database CLIENT_MASTER FACILITY_STAFF	Name: Length: Type: Name: Length: Type:	Client_Last_Name 60 Varchar, null Staff_Last_Name 60 Varchar, null
Data Element History	---		

LIVING ARRANGEMENT

Field Description	Indicates with whom the client is currently living. If client is no longer a minor and is living with one or more parents then select "Other family members with or without Child(ren)". It is possible that there may be certain situations that do not fall neatly into a particular category, particularly if the client is living in a group home or other institution. If that is the case then chose the option that best fits the client's immediate living situation; does the client have their own room (alone) or do they share a room with others (roommates).
Valid Entries	<u>Choices</u> <u>Description</u> <u>Target Codes</u> Alone 1 Child(ren) Alone 2 Client lives only with his or her child(ren) Foster Parents/Group Home 9 Friends 3 Include only individuals who shared living quarters with a person(s) with whom they have affection, a personal bond, or a stable social relationship and who live in a dwelling designed for family living (house, apartment, etc.). Exclude individuals who simply live with others with whom they shared little or no personal life (see roommates), such as might be found in dormitory-like settings, group homes, or hotels for transients. Other family members with or without Child(ren) 4 Client is currently living with immediate or extended family. Also use this choice if the client is at least 18 years of age and living with his/her parents. Parents/ Parents with Child(ren) 6 Client lives with one or more of their parents.

LIVING ARRANGEMENT – Continued

Valid Entries	Roommates Include those individuals who shared living quarters with a person(s) with whom they had no personal relationship or who lived in boarding houses, jails/prisons, hospitals, shelters, half-way houses, dormitories, residential treatment programs, and other group arrangements providing common dining and/or sleeping facilities for unrelated individuals. Spouse/Partner alone (without children) Spouse/Partner and Child(ren) Not Collected [*Inactive 6/1/93*] Unknown [*Inactive 11/15/01*]		7 5 8 11 10
Business Rules	Required Field		
Tables	TREATMENT_MILESTONE LIVING_ARNG_LUT		
Field Information	DASA Database (SQL) (Look-up table only) (Look-up table only)	Name: Length: Type: Name: Length: Type: Name: Length: Type:	Living_Arrangement 2 Tinyint, null Living_Arng_ID 2 Tinyint, null Living_Arng_Desc 60 Varchar, null
Data Element History	Inactivated Not Collected Inactivated Unknown		6/1/93 11/15/01

LIVING ENVIRONMENT

Field Description	Indicates if the client's current living environment is supportive of recovery efforts associated with treatment.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Conducive_Environment 1 Tinyint, null
Data Element History	---		

LIVING WITH CLIENT

Field Description	Indicates if the client's newborn child lives with the client.
Valid Entries	Choices — Target Codes Yes — 1 No — 0 Unknown — 2
Business Rules	Required field if Pregnancy Outcome is Live Born Child. Value forced to No if Pregnancy Outcome is not Live Born Child.
Tables	PREGNANCY_OUTCOME
Field Information	DASA Database (SQL) Name: Live_With_Client Length: 4 Type: Int, null
Data Element History	Changed value of "Unknown" from -1 to 2 1/30/05

MARITAL SATISFACTION

Field Description	Indicates if the is client satisfied with his/her marriage or relationship status. If the client is not in a marriage or committed relationship then this question would indicate how the client feels about their current, single relationship status.			
Valid Entries	Choices	Target Codes		
	Yes	1		
	No	0		
	Indifferent	2		
Business Rules	None			
Tables	ASI_MILESTONE MARITAL_SATISFACTION_LUT			
Field Information	DASA Database (SQL)	Name: Length: Type:	Marital_Satisfaction_Rating_ID 1 Int, null	
	(Look-up table only)	Name: Length: Type:	Marital_Satisfaction_Rating_Desc 50 Varchar, null	
Data Element History	Changed value of “No” from 2 to 0			1/30/05
	Changed value of “Indifferent” from 3 to 2			1/30/05

MARITAL STATUS

Field Description	Indicates the current marital status of the client.
Valid Entries	Choices / Description / Target Codes Divorced — 1 Include only marriages dissolved by court decrees. Married or Committed Relationship — 3 Include all persons who consider themselves married, including gay/lesbian bonds. Never married — 4 This category includes annulments and those who are single. Separated — 5 Include married persons not living together by choice, whether or not the separation is legal. Widowed — 7 Not collected [*Inactive 6/1/93*] — 8 Single (for old SAMS data only) [*Inactive 11/15/01*] — 2 Unknown [*Inactive 11/15/01*] — 6
Business Rules	Required Field
Tables	MARITAL_STATUS_LUT TREATMENT_MILESTONE
Field Information	DASA Database (SQL) — Name: Marital_Status_ID; Length: 1; Type: Tinyint, null (Look-up table only) — Name: Marital_Status_Desc; Length: 45; Type: Varchar, null
Data Element History	Inactivated Not collected — 6/1/93 Inactivated Single — 11/15/01 Inactivated Unknown — 11/15/01

MEDICAL PROBLEMS

Field Description	Indicates how many days in the past thirty that the client reports having had medical problems ranging from colds and flu through serious ailments (do not include alcohol or drug induced ailments).		
Valid Entries	## from 0 through 30		
Business Rules	Cannot be greater than 30 days.		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Days_Ill 2 Tinyint, null
Data Element History	---		

MENTAL ILLNESS – ENVIRONMENT

Field Description	Indicates if anyone in the client's immediate family or current living situation has a diagnosed mental illness. Only consider diagnosis by a mental health professional qualified to perform the diagnosis.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Family_Mental_Illness 1 Tinyint, null
Data Element History	---		

MIDDLE NAME

Field Description	Indicates the full middle name of the client or staff member. Use the full middle name if available, otherwise use the middle initial.		
Valid Entries	Letters		
Business Rules	Up to 40 characters. Leave blank only if the client has no middle name.		
Tables	CLIENT_MASTER FACILITY_STAFF		
Field Information	DASA Database CLIENT_MASTER	Name: Length: Type:	Client_Middle_Name 40 Varchar, null
	FACILITY_STAFF	Name: Length: Type:	Staff_Middle_Name 40 Varchar, null
Data Element History	---		

MILESTONE DATE/TIME

Field Description	Indicates the date and time of the Milestone event (Assessment, Admission or Discharge).		
Valid Entries	Format: mm/dd/yyyy hh:mm		
Business Rules	Required Field		
Tables	ASI_MILESTONE CURRENT_LEGAL_ISSUE DEPARTMENTAL_COLLABORATION DISABILITY_MILESTONE GAMBLING_MILESTONE PREGNANCY_OUTCOME PREVIOUS_ARREST RELATIONSHIP_PROBLEM SUBSTANCE_USED TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Milestone_Datetime 16 Datetime, not null
Data Element History	---		

MILESTONE TYPE

Field Description	Indicates the event type for which the treatment milestone data is being collected. (Not an entry field in the Target system.)		
Valid Entries	Choices / Target Codes Assessment 1 Admission 2 Periodic 3 Discharge 4 Detox 5		
Business Rules	System generated		
Tables	MILESTONE_TYPE_LUT TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Milestone_Type_ID 1 Tinyint, not null Milestone_Type_Desc 30 Varchar, null
Data Element History	Added Periodic Milestone Type		7/1/11

MILITARY RELATIVE

Field Description	Indicates if the client is the spouse, partner or dependant minor of someone who has served or is serving in the U.S. Military		
Valid Entries	Choices	Target Codes	
	No	0	
	Child	1	
	Other	2	
	Partner	3	
	Spouse	4	
	Widow	5	
Business Rules	None		
Tables	TREATMENT_MILESTONE MILITARY_RELATIVE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Military_Relative_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Military_Relative _Desc 40 Varchar, not null
Data Element History	Added element		12/1/08

MILITARY SERVICE START

Field Description	Start date of active military service.		
Valid Entries	Valid date		
Business Rules	Must be less than today's date Must be less than Military Service End date		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Military_Service_Start 8 Date\Time
Data Element History	Added element		12/1/08

MILITARY SERVICE END

Field Description	End date of active military service.		
Valid Entries	Valid date		
Business Rules	Must be less than today's date		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Military_Service_End 8 Date\Time
Data Element History	Added element		12/1/08

MILITARY BRANCH OF SERVICE

Field Description	Indicates the branch of service the client served in the U.S. military.		
Valid Entries	Choices	Target Codes	
	Air Force	1	
	Army	2	
	Coast Guard	3	
	Marines	4	
	Navy	5	
Business Rules	None		
Tables	TREATMENT_MILESTONE MILITARY_BRANCH_OF_SERVICE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Military_Branch_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Military_Branch_Desc 20 Varchar, not null
Data Element History	Added element		12/1/08

MODALITY

Field Description	Indicates the type of treatment to be provided to the client. Modality, Contract and Fund Source are stored as separate data elements. Each valid combination of these three elements is assigned a numeric code by the database and stored in the Modality_Contract_Funding table. This numeric code, named "MCF_ID" is associated with each individual record in the Service_Funding table. *If you have any questions about which modality, contract type or fund source to use please contact your county drug and alcohol coordinator or regional administrator.*
Valid Entries	Choices — Target Codes Detoxification — 2 Group Care Enhancement — 4 Housing Support Services — 15 Intensive Inpatient — 5 Intensive Outpatient — 6 Long Term Residential — 7 Methadone/Opiate Substitution — 11 MICA Outpatient — 9 Outpatient — 13 Recovery House — 14 ADATSA Assessment — 23 Non-ADATSA Assessment — 24 Dual Diagnosis [*Inactive 11/15/01*] — 1 Extended Care [*Inactive 11/15/01*] — 3 MICA Residential [*Inactive 11/15/01*] — 10 MICA [*Inactive 11/15/01*] — 8 Not Applicable [*Inactive 11/15/01*] — 12 Not Collected [*Inactive 6/1/93*] — 17 Variable Stay Residential [*Inactive 11/15/01*] — 16
Business Rules	None
Tables	MODALITY_CONTRACT_FUNDING MODALITY_LUT

MODALITY - Continued

Field Information	DASA Database (SQL)	Name: Length: Type:	Modality_ID 1 Tinyint, not null
	(Lookup Table Only)	Name: Length: Type:	Modality_Desc 50 Varchar, null

Data Element History	Inactivated Not Collected	6/1/93
	Inactivated Dual Diagnosis	11/15/01
	Inactivated Extended Care	11/15/01
	Inactivated MICA Residential	11/15/01
	Inactivated MICA	11/15/01
	Inactivated Not Applicable	11/15/01
	Inactivated Variable Stay Residential	11/15/01
	Renamed Transitional Housing to Housing Support Services	9/1/06

MODALITY/ CONTRACT/ FUND SOURCE

Field Description	Indicates the combination of Modality, Contract and Fund Source of the treatment the client is currently in, or being referred to, or offered by the program. Modality, Contract and Fund Source are separate data elements. Each valid combination of these three elements is assigned a numeric code and stored in the Modality_Contract_Funding table. This numeric code, named "MCF_ID" is associated with each individual record in the Service_Funding table. Please contact the DBHR Target Help Desk if you have questions regarding valid combinations of Modality, Contract and Fund Source. If you need a Modality, Contract and Fund Source combination either added or removed for your agency please contact your county drug and alcohol coordinator or your DBHR regional administrator.
Valid Entries	Any valid combination of Modality, Contract Type and Fund Source as determined by DBHR program managers.
Business Rules	Required Field Client age cannot be over 21 if a Contract Type of Youth is selected. Assessment – Modality cannot be Non-ADATSA if Assessment Type equals ADATSA. Modality cannot be ADATSA if Assessment Type is not equal to ADATSA. Admission – Contract type must be ADATSA if the ADATSA Admission field equals Yes.
Tables	AGENCY_PREFERENCES MODALITY_CONTRACT_FUNDING OFFERED_SERVICE SERVICE_FUNDING
Field Information	DASA Database (SQL) Name: MCF_ID Length: 3 Type: Integer, not null
Data Element History	---

MONTHLY HOUSEHOLD INCOME (GROSS)

Field Description	Include average total monthly income of the client plus that of any "family" members. For purposes of this field, family is considered to be either the client's immediate family, a significant other, or other group that functions as a family unit. Do not include roommates or housemates. All income (before deductions for personal income taxes, Social Security taxes, union dues, Medicare deductions, etc.) is recorded. Household income includes wages, salaries, child support, welfare payments, rents from property, pensions, and cash disbursements from investments and trusts. Exclude income from illegal activities and non-cash benefits such as food stamps, health benefits, and subsidized housing. If the household income is unknown then use the client's income, if any.		
Valid Entries	#####		
Business Rules	Required Field Must be greater than or equal to Monthly Personal Income. Cannot be greater than $50,000. Do not use the dollar sign ($) or commas.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Monthly_Household_Income 8 Money, null
Data Element History	---		

MONTHLY PERSONAL INCOME (GROSS)

Field Description	Include average total monthly income of the client. All income (before deductions for personal income taxes, Social Security taxes, union dues, Medicare deductions, etc.) is recorded. Personal income includes: wages, salaries, spousal maintenance, welfare payments, rents from property, pensions, and cash disbursements from investments and trusts. Exclude income from illegal activities and non-cash benefits such as food stamps, health benefits, and subsidized housing.		
Valid Entries	######		
Business Rules	Required Field Cannot be greater than $50,000. Do not use the dollar sign ($) or commas.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Monthly_Personal_Income 8 Money, null
Data Element History	---		

NUMBER OF PERSONS/STUDENTS (SUPPORT)

Field Description	Indicates the number of persons attending the support activity.		
Valid Entries	#####		
Business Rules	An entry into one of the four unit of service fields in the Support Activities screen (Number of People/Students, Service Hours, Staff Hours or Other Quantity) is required.		
Tables	FACILITY_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	People_Attending 4 Integer, null
Data Element History	---		

OPIATE DEPENDENCY DOSE

Field Description	Indicates client's dosage of opiate substitution medication in milligrams (mg). Use whenever the opiate substitution dosage changes.		
Valid Entries	### Maximum value of 800		
Business Rules	Required if Treatment Activity Type is Methadone Dose Change		
Tables	TREATMENT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Methadone_Dose 4 Integer, null
Data Element History	Data element changed from tinyint to integer. 8/28/06 Maximum value changed from 255 to 800.		

OTHER DESCRIPTION (SUPPORT)

Field Description	Describes the support activity Other Quantity. Use if staff hours or number of participants fields do not apply.		
Valid Entries	Text		
Business Rules	Required if the field Other Quantity is filled in.		
Tables	CLIENT_SUPPORT ACTIVITY FACILITY_SUPPORT_ACTIVITY		
Field Information	DASA Database	Name: Length: Type:	Other_Unit_Desc 20 Varchar, null
Data Element History	---		

OTHER INCAPACITY (ADATSA)

Field Description	For ADATSA assessment clients, indicates any mental or physical disability.		
Valid Entries	Choices		Target Codes
	Mental incapacity		2
	No other incapacity / Not Applicable		1
	Physical and mental incapacity		4
	Physical incapacity		3
Business Rules	None		
Tables	ASSESSMENT INCAPACITY_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Other_Incapacity 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Incapacity_ID 1 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	Incapacity_Desc 25 Varchar, null
Data Element History	---		

OTHER LAST NAME

Field Description	Indicates any other last name by which the client may have been reported to TARGET (i.e. maiden name or married name).		
Valid Entries	Up to 60 characters.		
Business Rules	Letters only		
Tables	CLIENT_MASTER		
Field Information	DASA Database (SQL)	Name: Length: Type:	Client_Alternate_Last_Name 60 Varchar, null
Data Element History	---		

OTHER QUANTITY (SUPPORT)

Field Description	Indicates the quantity of the OTHER UNIT in the Support Activities. This category is to be used if the support activity cannot be categorized as staff time, service time or number of students/persons. Agencies should report based on their contract. Use this field ONLY when one of the other fields does not fit the contract.		
Valid Entries	####		
Business Rules	An entry into one of the four unit of service fields in the Support Activities screen (Number of People/Students, Service Hours, Staff Hours or Other Quantity) is required.		
Tables	CLIENT_SUPPORT_ACTIVITY FACILITY_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Other_Unit_Qty 4 Integer, null
Data Element History	---		

OTHER SERVICE REFERRAL

Field Description	Indicates the exit referrals for the client at discharge or Detox End Referral.
Valid Entries	

Choices	Discharge	Detox Short	Target Codes
ADATSA Assessment Agency	✓	✓	8
ADATSA Assmt Completed	✓	✓	20
ATR Services	✓	✓	21
CSO	✓	✓	23
Gambling Treatment	✓	✓	22
Housing Assistance	✓		11
Housing Support Services	✓	✓	14
Involuntary Treatment (ITA)		✓	17
Medical/Dental Services	✓	✓	12
Mental Health Services	✓	✓	9
None	✓	✓	3
Not Amenable to Treatment/Lacks Engagement		✓	18
Other	✓	✓	4
Other Health Care Provider	✓		13
Referred to CD Treatment		✓	19
Self-Help Group	✓	✓	7
Vocational Rehabilitation/Job Placement	✓		10
Continuing Drug/Alcohol Treatment [*Inactive 11/15/01*]			16
Detoxification [*Inactive 11/15/01*]			1
Non-ADATSA Outpatient [*Inactive 11/15/01*]			5
Non-ADATSA Residential [*Inactive 11/15/01*]			6
Not Collected [*Inactive 6/1/93*]			15
Not Eligible [*Inactive 11/15/01*]			2

Business Rules	Required Field Cannot select any other values if None or Not Collected is selected. Must be None if Discharge Type equals Client Died.

OTHER SERVICE REFERRAL - Continued

Tables	DISCHARGE_REFERRAL OTHER_SERVICES_REFERRAL_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Other_Services_Referral_ID 2 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	Other_Services_Referral_Desc 50 Varchar, not null
Data Element History	Inactivated Not Collected		6/1/93
	Inactivated Continuing Drug/Alcohol Treatment		11/15/01
	Inactivated Detoxification		11/15/01
	Inactivated Not Eligible		11/15/01
	Inactivated Non-ADATSA Outpatient		11/15/01
	Inactivated Non-ADATSA Residential		1/1/05
	Added ATR Services		1/1/05
	Added Gambling Treatment		7/1/05
	Changed name of Transitional Housing to Housing Support Services		8/26/06
	Added CSO		5/1/11

PEAK USE

Field Description	Reflect the highest monthly use pattern in the twelve months preceding this milestone event.		
Valid Entries	Choices		Target Codes
	No Use		1
	1 to 3 times		2
	4 to 12 times		7
	13 or more times		8
	Daily		5
	Unknown		6
	1-2 times per week [*Inactive 7/1/01*]		3
	3-6 times per week [*Inactive 7/1/01*]		4
Business Rules	Required if a substance other than "No Substance Abuse" is selected		
Tables	FREQUENCY_LUT SUBSTANCE_USED		
Field Information	DASA Database (SQL)	Name: Length: Type:	Peak_Use_Frequency_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Frequency_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Frequency_Desc 25 Varchar, null
Data Element History	Inactivated "1-2 times per week"		7/1/01
	Inactivated "3-6 times per week"		7/1/01

PERSONS IN HOUSEHOLD

Field Description	Indicates the total number of persons living in the household including the client. In cases of institutional settings, enter the number of people sharing the same area considered their own such as a room, cell or dormitory.		
Valid Entries	##		
Business Rules	Required Field Must be greater than 0 and less than or equal to 99. Must equal 1 if Living Arrangement is Alone. Must be greater than 1 if Living Arrangement is any other value other than Alone. Cannot be less than the number of children living with the client plus one. Warning message if more than 15 (Still able to save the record however).		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Persons_in_Household 2 Tinyint, null
Data Element History	---		

PHONE ENTRY DATE

Field Description	This field indicates the date of the milestone event associated with this phone number.		
Valid Entries	This is not a data entry field.		
Business Rules	The value of this field is the same as the Milestone_Datetime in TREATMENT_MILESTONE.		
Tables	CLIENT_PHONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Phone_Entry_Date 16 Datetime, not null
Data Element History	---		

PREGNANCY END DATE

Field Description	Indicates the actual completion/termination date of the pregnancy. For example: the date of the birth of the child, or date of miscarriage or termination.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Can only enter if client is female.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Act_Pregnancy_Completion 10 Datetime, null
Data Element History	---		

PREGNANT FLAG

Field Description	This is a simple Yes / No field that records at the initial contact / Waiting List record whether or not the client reports being pregnant at the time of the contact.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	Refused	2	
Business Rules	This field is not enabled for male clients.		
Tables	WAITING_LIST YES_NO_REFUSED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Pregnant_Flag 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Yes_No_Refused_ID 1 Tinyint, not null
		Name: Length: Type:	Yes_No_Refused_Desc 20 Varchar, not null
Data Element History	Added element		10/1/09

PREGNANCY OUTCOME

Field Description	Indicates the outcome for any pregnancy that ended while the client was in drug/alcohol treatment. If there were multiple births, indicate the outcome for each (up to three).
Valid Entries	Choices — Target Codes Live Birth Child — 1 Miscarriage — 2 Stillborn Child (dead) — 3 Other Termination — 4 Not Collected [*Inactive 6/1/93*] — 5
Business Rules	Required Field when Pregnancy End Date is reported.
Tables	PREGNANCY_OUTCOME PREGNANCY_OUTCOME_TYPE_LUT
Field Information	DASA Database (SQL) — Name: Pregnancy_Outcome_Type_ID; Length: 1; Type: Tinyint, not null (Look-up table only) — Name: Pregnancy_Outcome_Desc; Length: 35; Type: Varchar, null
Data Element History	Inactivated Not Collected 6/1/93

PRENATAL PROVIDER

Field Description	Indicates if the client currently has a prenatal health care provider For example, First Steps Case Manager, physician, mid-wife, etc…		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
Business Rules	Required Field when there is an estimated due date.		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name:	Has_Prenatal_Provider
		Length:	1
		Type:	Tinyint, null
Data Element History	---		

PREVIOUS ARRESTS

Field Description	At assessment and admission indicates if the client has been previously arrested in the last year. At discharge indicates number of times the client was arrested since admission.
Valid Entries	Choices / Description / Target Codes Crimes Unknown — 9 Indicates if the client has been previously arrested for a crime unknown. This category is used when a person's records do not indicate whether they have been arrested or, they have been arrested and the type of offense was unavailable. Criminal Trespass — 13 Domestic Violence — 3 Indicates if the client has been previously arrested for domestic violence. Driving Under the Influence — 6 Indicates if the client has been previously arrested for driving while under the influence or Physical Control. Drug Possession — 2 Indicates if the client has been previously arrested for possession of an illegal drug Drug Trafficking or Manufacturing — 1 Indicates if the client has been previously arrested for drug offenses. Include the following: drug trafficking, including manufacturing, distributing, selling, smuggling, and "possession with intent to sell"; and other drug offenses such as those involving drug paraphernalia and forged or unauthorized prescriptions. Embezzlement — 14 Indicates that the client has been arrested for embezzlement; taking money for one's own use in violation of a trust or by fraudulent means.

PREVIOUS ARRESTS - Continued

	Forgery	15
	Indicates the client has been previously arrested for forgery; the illegal production of counterfeit materials or signatures.	
	Fraud	
	Indicates that the client has been arrested for fraud, which includes the passing of checks for which there are insufficient funds to cover the amount of the check.	16
	ID Theft	17
	Indicates that the client has previously been arrested for taking and using someone else's identity.	
	Malicious Mischief or Disorderly Conduct	7
	Indicates client has been arrested for breach of peace/disorderly conduct;	
	None	10
	No criminal charges in the last year or since discharge.	
	Other Public-Order Offenses	8
	Indicates if the client has been previously arrested for other public order offenses. Include the following: nonviolent sexual offense (morals and decency offenses); commercialized vice (prostitution, pimping, pornography); nonviolent family offenses (neglect, bigamy, nonpayment of child support); liquor law violations; obstructing justice; violating probation; escape; bribery; weapon offenses; health and safety offenses; habitual offender; contributing to the delinquency of a minor; and immigration violations.	
	Property Crime	5
	Indicates if the client has been previously arrested for a property crime. Include the following: burglary; larceny/theft; motor vehicle theft; arson; fraud; dealing in stolen property (receiving, transporting, possessing, and selling); possession of burglary tools; damage to property, smuggling, criminal trespass, and unauthorized entry.	

PREVIOUS ARRESTS - Continued

	Theft Indicates that the client has previously been arrested for stealing.	18
	Violent Crime Indicates if the client has been previously arrested for a violent crime. Include the following: murder and manslaughter; kidnapping; rape and other sexual assault; robbery; aggravated and simple assault; intimidation; extortion; coercion; illegal abortion; hit-and-run with bodily injury; and miscellaneous crimes against a person.	4
	Drug Crimes [*Inactive 11/15/01*]	11
	Not Collected [*Inactive 6/1/93*]	12
Business Rules	Required Field Cannot select any other values if None or Not Collected is selected.	
Tables	ARREST_TYPE_LUT PREVIOUS_ARREST	
Field Information	DASA Database (SQL) Name: Arrest_Type_ID Length: 2 Type: Tinyint, null (Look-up table only) Name: Arrest_Type_Desc Length: 75 Type: Varchar, null	
Data Element History	Inactivated Not Collected	6/1/93
	Inactivated Drug Crimes	11/15/01
	Added Criminal Trespass, Embezzlement, Forgery, Fraud, ID Theft, Theft (for Gambling milestones).	7/1/05
	Criminal Trespass, Embezzlement, Forgery, Fraud, ID Theft, Theft available for all milestones.	7/1/07

PREVIOUS EMERGENCY ROOM VISITS

Field Description	At assessment and admission indicates number of emergency room visits by the client in the previous year. At discharge indicates number of emergency room visits by the client since admission.		
Valid Entries	Valid number from 0 – 255.		
Business Rules	Required Field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Emergency_Room_Visits 3 Tinyint, null
Data Element History	---		

PREVIOUS HOSPITAL INPATIENT DAYS

Field Description	For assessment and admission indicates number of inpatient medical days in a general hospital by the client in the past year. For discharge, this indicates the number of inpatient medical days by the client since admission. Do not include days in hospital-based detoxification program.		
Valid Entries	Valid number from 0 – 366.		
Business Rules	Must be greater than or equal to Previous Inpatient Admissions. Required Field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Inpatient_Days 3 Integer, null
Data Element History	---		

PREVIOUS INPATIENT ADMISSIONS

Field Description	At assessment and admission indicates number of inpatient admissions in a general hospital by the client for medical reasons in the past year. At discharge indicates number of inpatient admissions by the client since admission to treatment. Do not include admissions into a hospital-based detoxification program.		
Valid Entries	Valid number from 0 – 255.		
Business Rules	Must be greater than 0 if Previous Hospital Inpatient Days is greater than 0. Required Field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Inpatient_Admissions 3 Tinyint, null
Data Element History	---		

PREVIOUS MENTAL TREATMENT

Field Description	For assessment and admission indicates if the client has received treatment for a mental/psychological issues in the last twelve months. Mental Health conditions are those described in the Diagnostic and Statistical Manual published by the American Psychiatric Association, but does not include the substance abuse. At discharge indicates if the client has received treatment for a mental/psychological issue since admission. If the client has received both outpatient and hospital based treatment for mental health issues choose "With Hospitalization."
Valid Entries	Choices / Description / Target Codes No/NA (default) — 1 Unknown — 2 With Hospitalization — 3 Include persons who received some portion of their treatment for a mental condition as an inpatient in a psychiatric or general hospital. With Outpatient Treatment — 4 Include persons who received treatment for a mental condition, but all treatment was on an outpatient basis. To be included, treatment should have consisted of at least four sessions with a mental health professional or administration of psychiatric medications for a minimum of 30 consecutive days. Not Collected [*Inactive 6/1/93*] — 5
Business Rules	Required Field
Tables	TREATMENT_MILESTONE MENTAL_TREATMENT_TYPE_LUT

PREVIOUS MENTAL TREATMENT - Continued

Field Information	DASA Database (SQL)	Name: Length: Type:	Prev_Mental_Treatment 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Mental_Treatment_Type_ID 1 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	Mental_Treatment_Type_Desc 50 Varchar, null
Data Element History	---		

PREVIOUS OUTPATIENT/CLINIC VISITS

Field Description	For assessment and admission indicates number of medical outpatient and/or clinical visits by the client in the past year. At discharge indicates number of medical outpatient and/or clinical visits by the client since admission.		
Valid Entries	Valid number from 0 – 255.		
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Outpatient_Visits 3 Tinyint, null
Data Element History	---		

PRIMARY LANGUAGE

Field Description	Indicates the primary speaking language of the client as used in the home if that language is not English.	
Valid Entries	Choices	Target Code
	American Sign Language	3
	Amharic	1
	Arabic	2
	Cambodian	7
	Cantonese	5
	Chinese	6
	Czech	8
	Dutch	9
	Farsi	10
	Finnish	11
	French	12
	German	13
	Greek	14
	Gujarati	15
	Hindi	17
	Hmong	16
	Hungarian	18
	Ilocano	19
	Indian (General)	20
	Italian	21
	Japanese	22
	Korean	23
	Lakota Sioux	25
	Laotian	24
	Malay	27
	Mandarin	29
	Marathi	30
	Mien	28
	Norwegian	31
	Other Language	32
	Polish	33

PRIMARY LANGUAGE - Continued

	Choices	Target Code
	Puyallup	34
	Romanian	35
	Russian	36
	Salish	38
	Samoan	37
	Spanish	39
	Tagalog	40
	Thai	41
	Tigrigna	42
	Ukrainian	43
	Unknown Language	44
	Vietnamese	45
	Yakama	46
	Braille [*Inactive 11/15/01*]	4
	Large Print English [*Inactive 11/15/01*]	26
	Not Collected [*Inactive 6/1/93*]	47
Business Rules	None	
Tables	LANGUAGE_LUT TREATMENT_MILESTONE	
Field Information	DASA Database (SQL)	Name: Language_ID Length: 2 Type: Tinyint, null Name: Language_Desc Length: 25 Type: Varchar, null
Data Element History	Inactivated Not Collected	6/1/93
	Inactivated Braille, this information is now stored as Uses_Braille in the TREATMENT_MILESTONE table	11/15/01
	Inactivated Large Print English, this information is now stored as Uses_Large_Type_English in the TREATMENT_MILESTONE table	11/15/01
	Removed requirement to use this field if the field English Speaking Skills was Interpretive Services Needed as the English Speaking Skills field was removed from the data set.	7/1/07

PST CODES

Field Description	Indicates the relative importance of the substance used in the order of seriousness of dependency as provided by the client and determined by the counselor.		
Valid Entries	Choices	Target Codes	
	Primary	1	
	Secondary	2	
	Tertiary	3	
Business Rules	Required Field Entered automatically by the system based on the which Substance Used fields are filled out (first is Primary, second is Secondary and third is Tertiary)		
Tables	SUBSTANCE_USED		
Field Information	DASA Database (SQL)	Name: Length: Type:	Relative_Importance 1 Tinyint, not null
Data Element History	---		

PSYCHOLOGICAL PROBLEMS

Field Description	Indicates how many days in the past thirty that the client reports having experienced psychological or emotional problems.		
Valid Entries	## from 0 through 30		
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Psych_prob_days 2 Tinyint, null
Data Element History	---		

PUBLIC ASSISTANCE TYPE

Field Description	Indicates the type of public assistance that the client is currently receiving. If the client has applied for, but not yet been approved for a particular type of public assistance then choose the "applicant" option.
Valid Entries	Choices — Target Codes ADATSA — 1 Applicant — 11 Disability Lifeline — 13 Disability Lifeline – Expedited (Presumptive Disability) — 14 Medical Assistance Only — 3 None — 4 Refugee Assistance — 12 Supplemental Security Income — 5 Temporary Assistance for Needy Families (TANF) — 7 General Assistance: Presumptive Disability [*Inactive 7/01/10]* — 9 General Assistance: Unemployable [*Inactive 7/01/10]* — 8 Aid to Families with Dependant Children [*Inactive 7/1/01*] — 2 General Assistance Pregnant [*Inactive 11/15/01*] — 6 Not Collected [*Inactive 6/1/93*] — 10
Business Rules	Must enter an option other than None if Primary Source of Income equals Public Assistance for assessments and admissions. The business rule is not enforced for change of funding screens or discharges Required Field
Tables	PUBLIC_ASSIST_LUT SERVICE_FUNDING TREATMENT_MILESTONE (Inactive)

PUBLIC ASSISTANCE TYPE - Continued

Field Information	DASA Database (SQL)	Name: Length: Type:	Public_Assistance_Program 2 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Public_Assist_ID 2 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Public_Assist_Desc 60 Varchar, null
Data Element History	Public Assistance was moved from the TREATMENT_MILESTONE table to the SERVICE_FUNDING table. Previous entries for Public Assistance were left in the TREATMENT_MILESTONE table for historical reasons.		6/27/05

QUADRANT PLACEMENT

Field Description	This field is used to document the level of mental health and chemical dependency related dysfunction exhibited by clients with co-occurring disorders.
Valid Entries	Choices / Description / Target Codes **No Placement** — 0 Client does not meet the criteria for co-occurring disorder. **Quadrant 1** — 1 **Less Severe Mental Disorder / Less Severe Substance Abuse** These Individuals often present with various combinations of symptoms of mild anxiety, depression, family conflict and a pattern of substance misuse and/or abuse, but not clear cut substance dependence. Locus of care: Primary health care setting, EAP, private practice counselors, clergy **Quadrant 2** — 2 **More Severe Mental Disorder / Less Severe Substance Abuse** These individuals present with a clearly defined, serious to persistent mental disorder (i.e. schizophrenia, major affective and mood disorders, serious PTSD, dissociative disorders and in some cases personality disorders) which is complicated by substance misuse and/or abuse, whether or not the patient sees substances as a problem. Locus of care: Mental health system

QUADRANT PLACEMENT - Continued

	Quadrant 3 **Less Severe Mental Disorder / More Severe Substance Abuse** 3 These patients present with a clear substance dependence (i.e. meets criteria for substance dependence according to DSM-IV) who have psychiatric symptomatology or complication (high emotional/behavioral conditions and complications, ASAM) but do not have a serious to persistent mental disorder. Locus of care: Substance abuse system **Quadrant 4** 4 **More Severe Mental Disorder / More Severe Substance Abuse** These patients present with clearly diagnosed severe to persistent mental disorders and who also meet DSM-IV criteria for substance dependence. Locus of care: State hospitals, jail/prisons, emergency rooms, mental health system **Not Collected** 5 Only appropriate for those milestones completed prior to 1/1/2007.		
Business Rules	Required field		
Tables	TREATMENT_MILESTONE QUADRANT_PLACEMENT_LUT		
Field Information	DASA Database (SQL) Lookup table only	Name: Length: Type: Name: Length: Type:	Quadrant_Placement_Id 1 Tinyint, not null Quadrant_Placement_Desc 70 Varchar, null
Data Element History	Element added		12/22/06

RACE/ETHNICITY

Field Description	Indicates the race ethnicities the client or staff most strongly identifies with at the time of application for services. Up to four selections may be chosen for a client.
Valid Entries	

Choices	Description	Target Codes
Asian Indian		8
Black or African American		2
	Persons having origins in any of the black racial groups of Sub-Saharan Africa.	
Cambodian		12
Chinese		3
Filipino		5
Guamanian		6
Hawaiian		7
Japanese		9
Korean		10
Laotian		11
Middle Eastern		24
Native American		13
	Persons having origins in any of the original people of North America who maintain cultural identification through tribal affiliation.	
Other Asian		23
Other Pacific Islander		22
Other Race		14
Refused to Answer		15
Samoan		16
Thai		17
Vietnamese		19
White or European American		20
	Persons having origins in any of the people of Europe, North Africa, or the Middle East.	

RACE/ETHNICITY - Continued

	Aleut [*Inactive 11/15/01*]	18
	Eskimo/Alaska Native [*Inactive 11/15/01*]	4
	Not Collected [*Inactive 6/1/93*]	25
	Other Asian/Pacific Islander [*Inactive 11/15/01*]	1
	Unknown [*Inactive 11/15/01*]	21
Business Rules	Required Field For clients, up to four selections may be chosen. Inactive selections will not be displayed when creating a new client master record but will be displayed when editing a client master record.	
Tables	CLIENT_RACE FACILITY_STAFF_RACE RACE_LUT	
Field Information	DASA Database (SQL) Name: Race_ID Length: 2 Type: Tinyint, null (Lookup table only) Name: Race_Desc Length: 30 Type: Varchar, null	
Data Element History	Inactivated Not Collected	6/1/93
	Inactivated Aleut	11/15/01
	Inactivated Eskimo/Alaska Native	11/15/01
	Inactivated Other Asian/Pacific Islander	11/15/01
	Inactivated Unknown	11/15/01

REASON FOR TREATMENT INELIGIBILITY (ADATSA)

Field Description	Indicates the reason why the client is found ineligible for ADATSA funded treatment.
Valid Entries	Form Code / Choices / Target Code C — Not chemically dependent — 1 U — Not used in last 90 days — 2 L — Exhausted 180 day limit — 3 A — Not willing to accept treatment — 4 I — Not incapacitated — 5 E — Employed in last 30 days — 6 T — Not amenable to treatment — 7 M — Chose OST only — 8 Not Collected [*Inactive 6/1/93*] — 9
Business Rules	Must be selected if Assessment Type = ADATSA and ADATSA Treatment Eligibility = No Defaults to null if Assessment Type = ADATSA and ADATSA Treatment Eligibility = Yes Defaults to null if Assessment Type <> ADATSA
Tables	ASSESSMENT NONELIG_REASON_LUT
Field Information	DASA Database (SQL) — Name: Non_Eligibility_Reason; Length: 1; Type: Integer, null (Lookup table only) — Name: Nonelig_Reason_ID; Length: 1; Type: Integer, not null (Lookup table only) — Name: Nonelig_Reason_Desc; Length: 50; Type: Varchar, null
Data Element History	Inactivated Not Collected 6/1/93

RECOMMENDED CONTINUING TREATMENT MODALITY

Field Description	If recommending continued alcohol/drug treatment, indicate the treatment service type the client is referred to upon discharge.		
Valid Entries	Choices		Target Codes
	Detoxification		2
	Group Care Enhancement		4
	Housing Support Services		15
	Intensive Inpatient		5
	Intensive Outpatient		6
	Long-Term Residential		7
	Methadone/Opiate Substitution Treatment		11
	MICA Outpatient		9
	Outpatient		13
	Recovery House		14
Business Rules	Must be left blank ("- select one -") if Discharge Type equals Client Died. The list is taken from the list of all active modalities in the MODALITY_LUT (excluding assessments).		
Tables	DISCHARGE MODALITY_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Continuing_Modality_ID 2 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Modality_ID 2 Tinyint, not null
Data Element History	Transitional Housing renamed to Housing Support Services		8/26/06

REFERRING AGENCY

Field Description	Agency number of the referring agency See the Directory of Certified Chemical Dependency Assessment and Treatment Services in Washington State (the "Greenbook"). If an ADATSA Assessment was linked to this admission (by selecting the specific assessment from the Admission Setup screen) then this field will be updated with the agency number of the assessing agency.		
Valid Entries	#######		
Business Rules	Required field if an ADATSA Admission. Referring Agency number must be less than 700000. Defaults to ADATSA Assessment Center for ADATSA Admissions. Must be a valid agency.		
Tables	ADMISSION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Referring_Agency_Number 6 Character, null
Data Element History	---		

REFERRING ASSESSMENT DATE/TIME

Field Description	The date that the client was referred to this agency. If an ADATSA Assessment was linked to this admission (by selecting the specific assessment from the Admission Setup screen) then this field will be updated with the date/time of the ADATSA assessment.		
Valid Entries	Format: dd/mm/yyyy hh:mm		
Business Rules	Required if there is an entry in Referring Agency		
Tables	ADMISSION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Referring_Assessment_DateTime 16 Datetime, null
Data Element History	---		

REFERRING CSO

Field Description	Identifies the DSHS Community Service Office (CSO) that a client is referred from.	
Valid Entries	Choices	Target Codes
	Aberdeen	14
	Aberdeen HCS	94
	Alderwood	52
	Alderwood HCS	89
	Auburn	72
	Bellingham	37
	Bellingham HCS	87
	Belltown	47
	Bremerton	18
	Bremerton HCS	88
	Capitol Hill	45
	Chehalis	21
	Chehalis HCS	95
	Clarkston (Asotin co.)	2
	Clarkston HCS	86
	Colfax	38
	Columbia River	53
	Colville HCS	78
	Ellensburg	19
	Everett	31
	Everett HCS	92
	Federal Way	5
	Forks	64
	Friday Harbor	28
	Goldendale	62
	Kelso	8
	Kelso/Long Beach HCS	97
	Kennewick	3
	King Eastside	40
	King North	42

REFERRING CSO - Continued

	King South	43
	Lakewood	131
	Long Beach	71
	Long Beach HCS	100
	Mattawa	129
	Moses Lake	13
	Moses Lake HCS	81
	Mount Vernon	29
	Mt Vernon / Oak Harbor HCS	101
	Neah Outstation	99
	Newport	26
	NW WorkFirst	67
	Oak Harbor	15
	Okanogan	24
	Okanogan HCS	77
	Olympia	34
	Othello	1
	Pasco HCS	84
	Pasco-Franklin	11
	Pierce South	48
	Port Angeles	5
	Port Angeles HCS	93
	Port Townsend	16
	Port Townsend HCS	102
	Puyallup Valley	51
	Rainier	41
	Renton/Holgate	80
	Republic	10
	Shelton	23
	Shelton HCS	103

REFERRING CSO - Continued

	Skykomish HCS	90
	Skykomish Valley	68
	Smokey Point	65
	Smokey Point HCS	91
	South Bend	25
	South Bend / Kelso HCS	104
	Spokane Central	32
	Spokane HCS	57
	Spokane North	59
	Spokane Southwest	60
	Spokane Valley	58
	Stevenson	30
	Stevenson HCS	105
	Sunnyside	54
	Sunnyside HCS	83
	Tacoma HCS	66
	Tricounty	33
	Vancouver	6
	Vancouver HCS	98
	Walla Walla	36
	Walla Walla HCS	85
	Wapato	75
	Wenatchee	4
	Wenatchee HCS	79
	White Center	44
	White Salmon	20
	White Salmon HCS	106
	Yakima	39
	Yakima/Ellensburg HCS	82

REFERRING CSO - Continued

Business Rules	Required field if Assessment Type equals ADATSA. Required field if Referral Date is entered.		
Tables	ADMISSION ASSESSMENT COMMUNITY_SERVICE_OFFICE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Referring_CSO_ID 3 Int, null
	(Look-up table only)	Name: Length: Type:	CSO_ID 3 Int, not null
	(Look-up table only)	Name: Length: Type:	Service_Office_Name 35 Varchar, null

REFERRING CSO - Continued

Data Element History	Inactivated:		7/1/05
	Cathlamet	35	
	Clarkston Outstation	12	
	Davenport	22	
	Dayton	7	
	Elma	61	
	Grandview	70	
	King North/Lake City	74	
	Medical Elig Determ Sect	76	
	Olympia HCS	96	
	Pierce North	49	
	Renton/Holgate HCS	56	
	Toppenish	50	
	Wenatchee-Douglas	9	
	West Seattle	55	
	Yakima-Kittitas	69	
	Renamed:		7/1/05
	Old Name		Change
	Orchards	53	renamed "Columbia River"
	Renton/Holgate CSO	80	renamed - remove " CSO"
	Wenatchee- Chelan	4	renamed - remove " - Chelan"
	Ballard	42	renamed "King North"
	Pierce West	67	renamed "NW WorkFirst"
	Spokane East	58	renamed "Spokane Valley"
	Burien	44	renamed "White Center"
	Added Lakewood, 131		10/7/05

RELATIONSHIP PROBLEMS

Field Description	Indicates situations where there have been significant periods of time within the last thirty days in which the client has experienced serious problems getting along with various social contacts.
Valid Entries	Specific responses are given for each of the following individuals: Choices — Target Codes Brother/Sister — 3 Children — 5 Close Friends — 7 Co-Workers — 9 Father — 2 Mother — 1 Neighbors — 8 None — 11 Not Collected — 10 Other Significant Family Member — 6 Spouse/Sexual Partner — 4
Business Rules	None
Tables	RELATIONSHIP_PROBLEM PERSONAL_RELATIONSHIP_TYPE_LUT
Field Information	DASA Database (SQL) — Name: Personal_Relationship_Type_ID; Length: 4; Type: Integer, not null (Lookup table only) — Name: Personal_Relationship_Type_Desc; Length: 50; Type: Varchar, null
Data Element History	---

RESIDENCY

Field Description	Indicates the client's current primary residence at the time of assessment, admission or discharge.
Valid Entries	Choices / Description / Target Codes Controlled Environment — 15 This includes living situations where the client is not free to come and go without restriction. Examples of this might be house arrest, tracking anklets or a residence where the client has to sign in and out of. Drug Free Shared Housing/Transitional Housing — 1 Include persons living in a drug free, shared housing or transitional housing situation. Foster/Group Homes — 2 Include persons living in facilities that provide social or therapeutic services, foster emotional support, or group cohesion, in addition to housing, such as residential treatment programs, halfway houses, youth camps and fraternity houses. Do not include dormitory-like shelters for the homeless or facilities in which individuals are normally restricted from leaving because of illness or legal constraints. Homeless Shelter/Mission — 5 Include persons living in facilities specifically operated to provide emergency or temporary housing to homeless individuals or families. Include those facilities that are set up with common sleeping and/or eating areas for unrelated individuals. Also include shelters for runaways or abused women. Do not include persons living in housing for the homeless made up of living units that provide separate sleeping and eating facilities for the individual or family. Hospital/Other Institution — 3 Include persons who were confined to a general or psychiatric hospital; nursing home; orphanage; military barracks; or other facility in which the freedom to leave is generally restricted by illness or legal status.

RESIDENCY - Continued

	Jail/Prison	4
	Include any detention home or correctional agency providing 24-hour confinement of persons awaiting adjudication or who have been convicted of crimes.	
	No Stable Arrangement	16
	The client lives in a series of temporary places to stay, typically with family or friends, in which there is no permanent residence	
	On the Street	6
	Include persons who spent the major portion of the week sleeping on the street, or in places such as abandoned buildings, automobiles, parks, or other public areas.	
	Personal Residence	8
	Include individuals living in detached houses; duplexes; apartment buildings; mobile homes; residential hotels; or other quarters designed for long-term individual or family occupancy, regardless of whether the person is living alone, or with family, friends, or roommates. To be considered a personal residence, the living quarters must contain a sleeping area with an attached kitchen.	
	Single Room Occupancy	10
	Include persons who reside in a single room occupancy situation, such as a hotel.	
	Student Residence	17
	Include persons who live in a dormitory or other student residence.	
	Transient Quarters	11
	Include individuals or families living in detached houses; duplexes; apartment buildings; mobile homes or other quarters designed for long or short term temporary occupancy.	
	Work Release Training Center	13
	Client is on Department of Corrections Work Release (for DOC clients only)	

RESIDENCY - Continued

	Not Collected [*Inactive 6/1/93*]			14
	Other [*Inactive 11/15/01*]			7
	Pre-Release Center [*Inactive 11/15/01*]			9
	Unknown [*Inactive 11/15/01*]			12
Business Rules	Required Field			
Tables	TREATMENT_MILESTONE RESIDENCE_TYPE_LUT			
Field Information	DASA Database (SQL)	Name: Length: Type:	Residence_Type_ID 1 Tinyint, null	
	(Look-up table only)	Name: Length: Type:	Residence_Desc 45 Varchar, null	
Data Element History	Inactivated Not Collected			6/1/93
	Inactivated Other			11/15/01
	Inactivated Pre-Release Center			11/15/01
	Inactivated Unknown			11/15/01
	Inactivated Work Release Training Center			11/15/01
	Reactivated Work Release Training Center, effective 1/1/1975			12/26/06

RESIDENTIAL FLAG

Field Description	Indicates whether a particular modality is a residential modality. The data base administrator sets this up when a new modality is added to the look-up table.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	MODALITY_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Residential_Flag 1 Tinyint, Null
Data Element History	Changed the value of "No" from Null to 0		1/30/2005

RUNAWAY YOUTH

Field Description	Indicates how many times, if any, the client has run away from home in the last 12 months. Only applies to clients under 18 years of age.		
Valid Entries	Choices		Target Codes
	0 Times		1
	1 Time		2
	2 Times		3
	3 Times		4
	4 Times		5
	5 Times		6
	6-10 Times		7
	11-20 Times		8
	More than 20 times		9
	Not Applicable		10
	Not collected [*Inactive 6/1/93*]		11
Business Rules	None		
Tables	TREATMENT_MILESTONE RUNAWAY_COUNT_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Runaway_Count_ID 2 Tinyint, null Runaway_Count_Desc 50 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93

SCHOOL - EXPELLED

Field Description	How many schools has the client been expelled from in the last twelve months? Enter all expulsions regardless of different schools or school districts involved.		
Valid Entries	Valid number from 0 – 255.		
Business Rules	Required field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Explusion_Count 3 Tinyint, null
Data Element History	---		

SCHOOL - SUSPENSIONS

Field Description	How many times has the client been suspended from school in the last twelve months? Enter all suspensions regardless of different schools or school districts involved.		
Valid Entries	Valid number from 0 – 255.		
Business Rules	Required field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Suspension_Count 3 Tinyint, null
Data Element History	---		

SCHOOL STATUS

Field Description	Indicates if the client is currently enrolled in school.		
Valid Entries	Choices		Target Codes
	Dropped Out		6
	Expelled		5
	Full Time		2
	Not Enrolled		1
	Part Time		3
	Suspended		4
	Not collected (for old SAMS forms only) [*Inactive 11/15/01*]		7
Business Rules	Required Field		
Tables	TREATMENT_MILESTONE SCHOOL_STATUS_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	School_Status_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	School_Status_Desc 25 Varchar, null
Data Element History	Inactivated Not Collected		11/15/01

SDS SCORE

Field Description	Total number of “yes” answers for Substance Abuse Screen on GAIN SS.		
Valid Entries	0-5		
Business Rules	If a score is entered for the EDS, IDS or SDS subscales then all three must be entered.		
Tables	GAIN_SS		
Field Information	DASA Database (SQL)	Name: Length: Type:	SDS_Score 1 tinyint
Data Element History	Added data element		1/1/07

SELF-HELP GROUP ATTENDANCE

Field Description	Total number of times the client has attended a self-help program in the thirty days preceding the date of assessment, admission to and discharge from treatment services. Includes attendance at AA, NA, and other self-help/mutual support groups focused on recovery from substance abuse and dependence.		
Valid Entries	0-200, 199 = Uncollected,/ Unknown		
Business Rules	Required field		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Self_Help_Count 3 tinyint
Data Element History	Added data element		10/1/2010

SERVICE FUNDING DATE/TIME

Field Description	The date and time of the service funding. Represents assessment, or admission date/time or date/time of a change of funding.		
Valid Entries	Format: mm/dd/yyyy hh:mm AM/PM (12-hour format)		
Business Rules	Required Field		
Tables	SERVICE_FUNDING		
Field Information	DASA Database (SQL)	Name: Length: Type:	Service_Funding_DateTime 16 Datetime, not null
Data Element History	---		

SERVICE FUNDING TYPE

Field Description	This variable denotes whether a funding record is for an assessment or an admission.		
Valid Entries	Choices Assessment Admission	Target Codes 1 2	
Business Rules	This is a system variable		
Tables	SERVICE_FUNDING		
Field Information	DASA Database (SQL)	Name: Length: Type:	Service_Funding_Type 1 Tinyint, null
Data Element History	---		

SERVICE HOURS/MINUTES (SUPPORT)

Field Description	Indicates the number of service hours involved in the support activity. Agencies are required to report contracted non-treatment support activities.		
Valid Entries	## : ##		
Business Rules	Must be less than or equal to 12 hours. Required for Group Support Activities Either Service or Staff Hours/Minutes is required for Client Support Activity. An entry into one of the four unit of service fields in the Support Activities screen (Number of People/Students, Service Hours, Staff Hours or Other Quantity) is required.		
Tables	CLIENT_SUPPORT ACTIVITY FACILITY_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Service_Hours 4 Integer, null Service_Minutes 2 Tinyint, null
Data Element History	---		

SEXUAL ORIENTATION

Field Description	Select from the category the sexual orientation reported by the client. Sexual orientation - may be defined as the erotic and affection (or loving) attraction to another person, including erotic fantasy, erotic activity or behavior, and affection needs.
Valid Entries	

Choices	Description	Target Codes
Bisexual		3
	Term for women and men whose sexual/affect ional identity is oriented to members of both the same and opposite sex.	
Choosing not to disclose		6
	Generally this option may be used when an individual is uncomfortable or unwilling to disclose their sexual orientation.	
Gay/Lesbian		2
	Descriptive terms used to denote a same-sex orientation even though that interest may not be overtly expressed.	
Heterosexual		1
	Attraction to persons of the opposite sex	
Questioning		5
	Term generally used for adolescents who may be in the process of becoming more comfortable with their sexual orientation identification. Usually describes a youth who may be exploring identifying as gay/lesbian in a culture that generally assumes identification as heterosexual.	
Transgender		4
	Refers to individuals whose psychological gender, or how they perceive themselves, is not the same as their biological sexual identity. Some, but not all, of these individuals have their sex changed surgically to fit with their psychological identity.	
Not Collected [*Inactive 6/1/93*]		7

Business Rules	None

SEXUAL ORIENTATION - Continued

Tables	SEXUAL_ORIENTATION_LUT TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Sexual_Orientation_ID 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Sexual_Orientation_Desc 50 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93

SOCIAL SECURITY NUMBER

Field Description	Indicates the client's Social Security Number.		
Valid Entries	###-##-#### or #########		
Business Rules	Required Field for ADATSA clients Target system will add in dashes (“-“) if not added in by data entry operator.		
Tables	CLIENT_MASTER		
Field Information	DASA Database (SQL)	Name: Length: Type:	Client_Social_Security_Number 11 Varchar, null
Data Element History	---		

SOGS

Field Description	Reflects the client's score on the South Oaks Gambling Screen		
Valid Entries	0-20		
Business Rules	Required field if milestone type is Gambling or CD and Gambling		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	NODS 2 Integer, null
Data Element History	While officially available in the system as of July 2008, agencies have been using the NODS field to enter SOGS scores since approximately February 2008		7/1/2008

SOURCE OF INCOME

Field Description	Indicates the client's current primary source of income.		
Valid Entries	Choices		Target Codes
	Disability		2
	Family/Friend (most youth fall here)		3
	None		4
	Other		5
	Public Assistance		6
	Retirement Pension		7
	Supplemental Security Income (SSI)		11
	Unemployment Compensation		1
	Wages/Salary		9
	Not Collected [*Inactive 6/1/93*]		10
	Unknown [*Inactive 11/15/01*]		8
Business Rules	Required Field		
Tables	TREATMENT_MILESTONE PRIMARY_INCOME_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Primary_Income_Source 2 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Primary_Income_ID 2 Tinyint, not null
Data Element History	Inactivated Not Collected		6/1/93
	Inactivated Unknown		11/15/01

SPANISH/HISPANIC/LATINO

Field Description	Indicates the Hispanic origin of the client or staff. Hispanic denotes a place of origin or cultural affiliation rather than a race i.e. a person can be both white and Hispanic or black and Hispanic and so on.		
Valid Entries	Choices		Target Codes
	Cuban		1
	Mexican, Mexican-American, Chicano		2
	Not Spanish/Hispanic/Latino		3
	Other Spanish/Hispanic/Latino Origin		4
	Puerto Rican		5
	Refused to answer		6
	Unknown		7
	Not Collected [*Inactive 6/1/93*]		8
Business Rules	Required Field		
Tables	CLIENT_MASTER FACILITY_STAFF HISPANIC_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Client_Hispanic_Origin 1 Tinyint, null
	FACILITY_STAFF HISPANIC_LUT	Name: Length: Type:	Hispanic_ID 1 Tinyint, null
		Name: Length: Type:	Hispanic_Desc 40 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93

SPECIAL PROJECT- AGENCY

Field Description	Indicates a specific provider project or contract funds. Values assigned in consultation with DBHR staff.		
Valid Entries	Text and numeric		
Business Rules	None		
Tables	SERVICE_FUNDING SPECIAL_PROJECT_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Agency_Special_Project_ID 4 Integer, null
	(Look up table only)	Name: Length: Type:	Special_Project_ID 4 Integer, not null
	(Look up table only)	Name: Length: Type:	Special_Project_Desc 60 Varchar, null
Data Element History	---		

SPECIAL PROJECT- COUNTY

Field Description	Indicates a specific county project or contract funds. Values assigned under the direction of DBHR staff. DO NOT USE WITHOUT CONSULTING DBHR!		
Valid Entries	Text and numeric		
Business Rules	None		
Tables	SERVICE_FUNDING SPECIAL_PROJECT_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	County_Special_Project_ID 4 Integer, null
	(Look up table only)	Name: Length: Type:	Special_Project_ID 4 Integer, not null
	(Look up table only)	Name: Length: Type:	Special_Project_Desc 60 Varchar, null
Data Element History	---		

SPECIAL PROJECT- STATE

Field Description	Indicates a specific state project or contract funds. Values assigned under the direction of DBHR staff. DO NOT USE WITHOUT CONSULTING DBHR!		
Valid Entries	Text and numeric		
Business Rules	None		
Tables	SERVICE_FUNDING SPECIAL_PROJECT_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	State_Special_Project_ID 4 Integer, null
	(Look up table only)	Name: Length: Type:	Special_Project_ID 4 Integer, not null
	(Look up table only)	Name: Length: Type:	Special_Project_Desc 60 Varchar, null
Data Element History	---		

SPECIAL PROJECT TYPE

Field Description	Indicates the category of Special Project.		
Valid Entries	Choices	Target Codes	
	Agency	3	
	County	2	
	State	1	
Business Rules	Required Field		
Tables	SPECIAL_PROJECT_LUT SPECIAL_PROJECT_TYPE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Special_Proj_Type_ID 1 Tinyint, not null
Data Element History	---		

STAFF AND VOLUNTEER HOURS (SUPPORT)

Field Description	Indicates the number of staff hours for the support activity. The strategy for reporting these hours is determined by the provider's contract with county and/or DBHR office. If this is not a contracted service and the agency wishes to report it, the agency program staff will need to determine the reporting strategy. These fields were purposely designed to allow flexibility in reporting.		
Valid Entries	##### : ##		
Business Rules	An entry into one of the four unit of service fields in the Support Activities screen (Number of People/Students, Service Hours, Staff Hours or Other Quantity) is required.		
Tables	CLIENT_SUPPORT ACTIVITY FACILITY_SUPPORT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Staff_Hours 6 Integer, null Staff_Minutes 6 Integer, null
Data Element History	---		

STAFF ID - ADMISSION

Field Description	Name of staff member who completed the Admission.		
Valid Entries	Entries are selected from a listing of staff currently active or have an end date within 30 days of the current date.		
Business Rules	None		
Tables	ADMISSION FACILITY_STAFF		
Field Information	DASA Database ADMISSION FACILITY_STAFF	Name: Length: Type: Name: Length: Type:	Admission_Staff_ID 5 Varchar null Staff_ID 5 Varchar null
Data Element History	---		

STAFF ID - CASE MONITOR

Field Description	The field indicating the staff name of the client's Case Monitor.		
Valid Entries	Select the name of the case monitor.		
Business Rules	Required Field for ADATSA assessments Staff names are set up in the Agency Staff screen.		
Tables	FACILITY_STAFF ASSESSMENT		
Field Information	DASA Database ASSESSMENT FACILITY_STAFF	Name: Length: Type: Name: Length: Type:	Case_Monitor 5 Varchar, null Staff_ID 5 Varchar, not null
Data Element History	---		

STAFF ID - CLOSURE

Field Description	Name of staff member who closed the Assessment.		
Valid Entries	Name of staff member from drop down list.		
Business Rules	For Non-ADATSA Assessments the Closure_Staff_ID is set to the Staff ID in the Assessment. For ADATSA Assessments the Closure_Staff_ID is entered in the ADATSA Closure screen. Validated against Staff_ID in the FACILITY_STAFF file		
Tables	ASSESSMENT FACILITY_STAFF		
Field Information	DASA Database ASSESSMENT FACILITY_STAFF	Name: Length: Type: Name: Length: Type:	Closure_Staff_ID 5 Varchar, null Staff_ID 5 Varchar, not null
Data Element History	---		

STAFF ID - COUNSELOR

Field Description	Name of primary counselor who works with the client.		
Valid Entries	Name of staff member from drop down list.		
Business Rules	Only currently active counselors can be selected in the Admission add field. While processing an Admission Update only counselors active at the agency at the time of the admission or later can be selected. Validated against Staff_ID in the FACILITY_STAFF file		
Tables	ADMISSION FACILITY_STAFF		
Field Information	DASA Database ADMISSION FACILITY_STAFF	Name: Length: Type: Name: Length: Type:	Counselor_Staff_ID 5 Varchar, null Staff_ID 5 Varchar, not null
Data Element History	---		

STAFF IDENTIFICATION

Field Description	Indicates the ID of the staff (the initials or other identifying tag for the staff member). This Identifier may be up to five characters in length.		
Valid Entries	Alphanumeric characters only		
Business Rules	Required Field Only a TARGET Data Entry Operator can modify or add staff information. Once the Agency Staff record is saved the Staff Identification field may not be modified. The field may contain alphanumeric characters only. In other tables it is validated against Staff_ID in the FACILITY_STAFF file		
Tables	ASSESSMENT CLIENT_SUPPORT_ACTIVITY DISCHARGE FACILITY_STAFF FACILITY_STAFF_RACE FACILITY_SUPPORT_ACTIVITY TREATMENT_ACTIVITY		
Field Information	DASA Database (SQL)	Name: Length: Type:	Staff_ID 5 Varchar, not null
Data Element History	---		

STATE

Field Description	Indicates the two-letter abbreviation of the state where the client currently resides. If transient, use the state abbreviation where the agency is located.		
Valid Entries	From Java Script list.		
Business Rules	Defaults to WA Must be a valid state code Field is validated against a Java Script list.		
Tables	CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type:	State 2 Character, null
Data Element History	---		

STD TEST

Field Description	Indicate the number of times the client has been tested for sexually transmitted diseases (STD) in the last twelve months. This does not include tests specifically for HIV.		
Valid Entries	Valid number from 0 – 255.		
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	STD_Test_Count 3 Tinyint, null
Data Element History	---		

STREET ADDRESS

Field Description	Indicates the street address where the client currently resides.		
Valid Entries	Fill in up to 120 characters per each of the two lines		
Business Rules	Use the agency address for homeless clients.		
Tables	CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type:	Street_Address1 120 Varchar, null Street_Address2 120 Varchar, null
Data Element History	---		

SUBSTANCE

Field Description	Indicates the specific substance or substance category the client used or is using. If the substance used by the client is not on the list use the closest category match.
Valid Entries	

Form Codes	Choices	Description	Target Codes
1	Alcohol		4
2	Amphetamines		7
		includes Benzedrine, Dexedrine, Preludin, Ritalin, and any other amines and related drugs	
3	Barbiturates		5
		includes Phenobarbital, Seconal, Numbutal, etc.	
4	Benzodiazepines		17
		includes Diazepam, Flurazepam, Chlordiazeposice, Clorazepate, Lorazepam, Alprazolam, Oxazepam, Temazepam, Prazepam, Riazolam, Clonazepam and Halazepam	
5	Cocaine		8
6	Hallucinogens		10
		includes LSD, DMT, STP mescaline, psilocybin, peyote, etc	
7	Heroin		1
8	Inhalants		11
		Includes ether, glue, chloroform, nitrous oxide, gasoline, paint thinner, etc	
9	Major Tranquilizers		13
10	Marijuana - Cannabis		9
		Includes THC and any other cannabis preparations	
11	Methamphetamine		15
12	No substance abuse		20
13	Other		21
15	Other Opiates and Synthetics		3

SUBSTANCE - Continued

	14	Other sedatives or hypnotics includes chloral hydrate, Placidyl, Doriden, etc.	6
	16	Over the counter includes aspirin, cough syrup, Sominex and any other legally obtained, nonprescription medication.	12
	17	Oxy/Hydro Codone includes opiate like analgesic or pain killing medications like Vicodin or Oxycontin.	24
	18	PCP (Phencylidine)	14
	19	Prescribed Opiate Substitute	18
	20	Substance Unknown	22
	21	Tobacco products (this can not be primary)	19
		Non-Rx Methadone [*Inactive 11/15/01*]	2
		Not Collected [*Inactive 6/1/93*]	23
		Other Stimulants [*Inactive 11/15/01*]	15
Business Rules	An entry is required for all three Substance fields. A Substance (except for No Substance Abuse) cannot be selected more than once. Assessment - Primary Substance cannot be Tobacco, Unknown or Not Collected Admission or Discharge - Primary Substance cannot be No Substance, Tobacco, Unknown or Not Collected Cannot be changed at discharge.		
Tables	SUBSTANCE_LUT SUBSTANCE_USED		

SUBSTANCE - Continued

Field Information	DASA Database (SQL)	Name: Length: Type:	Substance_ID 2 Tinyint, null
	(Look-up table only)	Name: Length: Type:	Substance_Desc 35 Varchar, null
Data Element History	Inactivated Not Collected		6/1/93
	Inactivated Non-Rx Methadone		11/15/01
	Added Oxy/Hydo Codone		7/1/05

SUGGEST PUBLIC ASSISTANCE

Field Description	Indicates whether the counselor suggested that the client apply for DSHS public assistance.		
Valid Entries	Choices Yes No (default)	Target Codes 1 0	
Business Rules	None		
Tables	ASSESSMENT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Suggest_Public_Assistance 1 Tinyint, null
Data Element History	---		

SUICIDE ATTEMPT

Field Description	Has the client tried to commit suicide within the last twelve months? This field is for gambling milestones.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Suicide 1 Tinyint, null
Data Element History	Created		10/3/05

TARGET REPORTING MONITOR

Field Description	**For DBHR use only.** Indicates who has primary responsibility for monitoring TARGET reporting and determines which agencies are included for the "Review of Data Quality - Report #1" (which reports both Delinquent Cases and % of Discharge Records Updated at Discharge).
Valid Entries	Choices — Description — Target Codes Non-ADATSA Assessment Only — A DOC - Dept. of Corrections — C Group Care Program Manager - Modality of GC only — G Regional Administrator & County Coordinator. — J (Use "J" for County Contracted facilities, and County sub-contracted facilities - Modality of "DX", "IO", "MO", "MT", or "OP" even if the facility also provides some residential services.) Private Pay — P Regional Administrator & Residential Services Manager — R (Use "R" if the facility provides only residential services: i.e. Modality of "DD", "EC", "II", "LT", "MR", or "RH" only.) Treatment Accountability for Safer Communities (TASC) Manager — S TH Program Manager - Modality of TH only — T EVEREST reporting (Prevention) — U
Business Rules	Required Field - will default to J
Tables	TARGET_REPORTING TARGET_REPORTING_LUT
Field Information	DASA Database (SQL) Name: TARGET_Reporting_Monitor Length: 1 Type: Character, null
Data Element History	---

TELEPHONE NUMBER

Field Description	Indicates the client's current home phone number or where a message can be left.		
Valid Entries	(###) ###-#### (#####)		
Business Rules	Area code needs to be three numbers in length Phone number needs to be 7 numbers long or 7 numbers with a dash after the third number. Extension can be up to 4 numbers in length.		
Tables	CLIENT_PHONE		
Field Information	DASA Database (SQL)	Name: Length: Type: Name: Length: Type: Name: Length: Type:	Area_Code 3 Character, null Phone_Number 8 Character, null Phone_Extension 4 Character, null
Data Element History	---		

TITLE XIX FUNDED

Field Description	Indicates whether the service is being funded under the Title XIX contract.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	Required Field Title XIX Funded cannot = Yes if Title XIX Status of the Modality/Contract/Funding = 3 (Forbidden) Title XIX Funded must = Yes if Title XIX Status of the Modality/Contract/Funding = 1 (Required) Default to value in Agency Defaults record.
Tables	SERVICE_FUNDING AGENCY_PREFERENCES
Field Information	DASA Database (SQL) Name: Title_XIX Length: 1 Type: Tinyint. null
Data Element History	---

TITLE XIX STATUS

Field Description	Indicates whether the particular Modality / Contract / Fund Source can be funded under the Title XIX contract. This is entered by DBHR staff from the Offered Services screen.		
Valid Entries	Choices	Target Codes	
	Required	1	
	Permitted	2	
	Forbidden	3	
Business Rules	Required Field.		
Tables	MODALITY_CONTRACT_FUNDING TITLE_XIX_STATUS_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Title_XIX_Status_ID 1 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	Title_XIX_Status_Desc 25 Varchar, not null
Data Element History	---		

TOBACCO USE – CURRENT

Field Description	Indicates if the client currently uses tobacco products and if so, of what type.
Valid Entries	Choices / Target Codes Both 3 Chew 2 None 0 Smoke 1
Business Rules	None
Tables	TREATMENT_MILESTONE TOBACCO_PRODUCT_TYPE_LUT
Field Information	DASA Database (SQL) — Name: Currently_Use_Tobacco; Length: 1; Type: Tinyint, null Lookup Table — Name: Tobacco_Product_Type_ID; Length: 1; Type: Tinyint, not null Name: Tobacco_Product_Type_Desc; Length: 50; Type: Varchar, null
Data Element History	Data element added 7/1/2007 This element replaces the question, “Currently smoke cigarettes”. 7/1/2007 The data element, Smoke_Cigarettes, has been inactivated. Previous entries in this field have been transferred to Currently_Use_Tobacco Smoke_Cigarettes / Currently_Use_Tobacco / Value Yes / Smoke / 1 No / None / 0

TOBACCO USE – TRIED TO QUIT

Field Description	Indicates if the client has previously tried to quit using tobacco products.
Valid Entries	Choices / Target Codes No 0 Yes 1
Business Rules	None
Tables	TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Tried_To_Quit_Tobacco Length: 1 Type: Tinyint, null
Data Element History	Data element added 7/1/2007 This element replaces the question, "Ever tried to quit smoking". 7/1/2007 The data element, Tried_To_Quit_Smoking, has been inactivated. Previous entries in this field have been transferred to Tried_To_Quit_Tobacco Tried_To_Quit_Smoking / Tried_To_Quit_Tobacco / Value Yes / Yes / 1 No / No / 0

TOBACCO USE – WANT TO QUIT

Field Description	Indicates if the client wants to quit using tobacco products now.
Valid Entries	Choices — Target Codes No — 0 Yes — 1
Business Rules	None
Tables	TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Want_To_Quit_Tobacco Length: 1 Type: Tinyint, null
Data Element History	Data element added — 7/1/2007 This element replaces the question, "Want to quit smoking now". — 7/1/2007 The data element, Want_To_Quit_Smoking, has been inactivated. Previous entries in this field have been transferred to Want_To_Quit_Tobacco Want_To_Quit_Smoking — Want_To_Quit_Tobacco — Value Yes — Yes — 1 No — No — 0

TRAUMATIC HEAD INJURY

Field Description	Indicates if the client ever had a traumatic head injury that resulted in loss of consciousness.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Traumatic_Head_Injury 1 Tinyint, null
Data Element History	---		

TREATMENT NEEDS

Field Description	Six questions indicating how strongly the client reports needing treatment or counseling for each of the following issues: Alcohol Problems Drug Problems Family Issues Legal Issues Medical Problems Psychological Problems		
Valid Entries	Use the Addiction Severity Index Patient Rating Scale: 0 - Not at all 1 - Slightly 2 - Moderately 3 - Considerably 4 – Extremely		
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Alcohol_problem_tx_need Drug_problem_tx_need Family_trouble_tx_need Legal_trouble_tx_need Medical_trouble_tx_need Psych_problem_tx_need 1 Int, null
Data Element History	---		

TREATMENT PRIORITY (ADATSA)

Field Description	Indicates which priority population, if any, the client is in.
Valid Entries	Choices — Target Codes No Priority/Not Applicable (default) — 1 Child Protective Services — 2 IV Drug User — 3 Pregnant — 4 Children in Home — 5 Not Collected [*Inactive 6/1/93*] — 6
Business Rules	Required Field Can only be accessed or modified if Assessment Type is ADATSA Injection Drug User Client must have injected drugs (Ever Used Needles to Inject Drugs must equal Yes). Pregnant/Postpartum Defaults to Pregnant if there is an entry in Client must be pregnant or postpartum (Pregnancy Status = 1, 2, 3, or P) for Treatment Priority to equal Pregnant. Children In Home Client must have children at home (the number of Your Children Living With You must be greater than zero).
Tables	ASSESSMENT ASSESSMENT_PRIORITY_LUT
Field Information	DASA Database (SQL) — Name: Assessment_Priority_ID; Length: 1; Type: Tinyint, null (Look-up table only) — Name: Assessment_Priority_Desc; Length: 30; Type: Varchar; null
Data Element History	Inactivated Not Collected — 6/1/93

TRIBAL CODE

Field Description	Indicates a client's tribal affiliation. If the client is affiliated with a tribe that is not officially federally recognized then choose number 561, "Not from a Federally recognized tribe". If the client does not know what tribe they are affiliated with then indicate that they are "Other race" in race\ethnicity rather than "Native American". If you would like an electronic version of this list (for ease in searching) the most recent listing of the Tribal Codes can be found at the DBHR website at: http://www.dshs.wa.gov/dbhr/daT2KMain.shtml#dbhr
Valid Entries	1 Absentee-Shawnee Tribe of Indians of Oklahoma 2 Agdaagux Tribe of King Cove 3 Agua Caliente Band of Cahuilla Indians of the Agua Caliente Indian Reservation, California 4 Ak Chin Indian Community of the Maricopa (Ak Chin) Indian Reservation, Arizona 5 Akiachak Native Community 6 Akiak Native Community 7 Alabama-Coushatta Tribes of Texas 8 Alabama-Quassarte Tribal Town, Oklahoma 9 Alatna Village 10 Algaaciq Native Village (St. Mary's) 11 Allakaket Village 12 Alturas Indian Rancheria, California 13 Angoon Community Association 14 Anvik Village 15 Apache Tribe of Oklahoma 16 Arapahoe Tribe of the Wind River Reservation, Wyoming 17 Arctic Village (See Native Village of Venetie Tribal Government) 18 Aroostook Band of Micmac Indians of Maine 19 Asa'carsarmiut Tribe (formerly Native Village of Mountain Village) 20 Assiniboine and Sioux Tribes of the Fort Peck Indian Reservation, Montana 21 Atqasuk Village (Atkasook)

TRIBAL CODE - Continued

	22	Augustine Band of Cahuilla Mission Indians of the Augustine Reservation, California
	23	Bad River Band of the Lake Superior Tribe of Chippewa Indians of the Bad River Reservation, Wisconsin
	24	Bay Mills Indian Community of the Sault Ste. Marie Band of Chippewa Indians,
	25	Bay Mills Reservation, Michigan
	26	Bear River Band of the Rohnerville Rancheria, California
	27	Beaver Village
	28	Berry Creek Rancheria of Maidu Indians of California
	29	Big Lagoon Rancheria, California
	30	Big Pine Band of Owens Valley Paiute Shoshone Indians of the Big Pine Reservation, California
	31	Big Sandy Rancheria of Mono Indians of California
	32	Big Valley Band of Pomo Indians of the Big Valley Rancheria, California
	33	Birch Creek Tribe (formerly listed as Birch Creek Village)
	34	Blackfeet Tribe of the Blackfeet Indian Reservation of Montana
	35	Blue Lake Rancheria, California
	36	Bridgeport Paiute Indian Colony of California
	37	Buena Vista Rancheria of Me-Wuk Indians of California
	38	Burns Paiute Tribe of the Burns Paiute Indian Colony of Oregon
	39	Cabazon Band of Cahuilla Mission Indians of the Cabazon Reservation, California
	40	Cachil DeHe Band of Wintun Indians of the Colusa Indian Community of the Colusa Rancheria, California
	41	Caddo Indian Tribe of Oklahoma
	42	Cahto Indian Tribe of the Laytonville Rancheria, California
	43	Cahuilla Band of Mission Indians of the Cahuilla Reservation, California
	44	Campo Band of Diegueno Mission Indians of the Campo Indian Reservation, California

TRIBAL CODE - Continued

	45	Capitan Grande Band of Diegueno Mission Indians of California: Barona Group of Capitan Grande Band of Mission Indians of the Barona Reservation, California, Viejas (Baron Long) Group of Capitan Grande Band of Mission Indians of the Viejas Reservation, Cali
	46	Catawba Indian Nation (aka Catawba Tribe of South Carolina)
	47	Cayuga Nation of New York
	48	Cedarville Rancheria, California
	49	Central Council of the Tlingit & Haida Indian Tribes
	50	Chalkyitsik Village
	51	Chemehuevi Indian Tribe of the Chemehuevi Reservation, California
	52	Cher-Ae Heights Indian Community of the Trinidad Rancheria, California
	53	Cherokee Nation, Oklahoma
	54	Chevak Native Village
	55	Cheyenne River Sioux Tribe of the Cheyenne River Reservation, South Dakota
	56	Cheyenne-Arapaho Tribes of Oklahoma
	57	Chickaloon Native Village
	58	Chickasaw Nation, Oklahoma
	59	Chicken Ranch Rancheria of Me-Wuk Indians of California
	60	Chignik Lake Village
	61	Chilkat Indian Village (Klukwan)
	62	Chilkoot Indian Association (Haines)
	63	Chinik Eskimo Community (Golovin)
	64	Chippewa-Cree Indians of the Rocky Boy's Reservation, Montana
	65	Chitimacha Tribe of Louisiana
	66	Choctaw Nation of Oklahoma
	67	Chuloonawick Native Village
	68	Circle Native Community
	69	Citizen Potawatomi Nation, Oklahoma

TRIBAL CODE - Continued

	70	Cloverdale Rancheria of Pomo Indians of California
	71	Cocopah Tribe of Arizona
	72	Coeur D'Alene Tribe of the Coeur D'Alene Reservation, Idaho
	73	Cold Springs Rancheria of Mono Indians of California
	74	Colorado River Indian Tribes of the Colorado River Indian Reservation, Arizona and California
	75	Comanche Indian Tribe, Oklahoma
	76	Confederated Salish & Kootenai Tribes of the Flathead Reservation, Montana
	77	Confederated Tribes and Bands of the Yakama Indian Nation of the Yakama Reservation, Washington
	78	Confederated Tribes of the Chehalis Reservation, Washington
	79	Confederated Tribes of the Colville Reservation, Washington
	80	Confederated Tribes of the Coos, Lower Umpqua and Siuslaw Indians of Oregon
	81	Confederated Tribes of the Goshute Reservation, Nevada and Utah
	82	Confederated Tribes of the Grand Ronde Community of Oregon
	83	Confederated Tribes of the Siletz Reservation, Oregon
	84	Confederated Tribes of the Umatilla Reservation, Oregon
	85	Confederated Tribes of the Warm Springs Reservation of Oregon
	86	Coquille Tribe of Oregon
	87	Cortina Indian Rancheria of Wintun Indians of California
	88	Coushatta Tribe of Louisiana
	89	Cow Creek Band of Umpqua Indians of Oregon
	90	Coyote Valley Band of Pomo Indians of California
	91	Craig Community Association
	92	Crow Creek Sioux Tribe of the Crow Creek Reservation, South Dakota
	93	Crow Tribe of Montana

TRIBAL CODE - Continued

	94	Curyung Tribal Council (formerly Native Village of Dillingham)
	95	Cuyapaipe Community of Diegueno Mission Indians of the Cuyapaipe Reservation, California
	96	Death Valley Timbi-Sha Shoshone Band of California
	97	Delaware Nation, Oklahoma (formerly Delaware Tribe of Western Oklahoma)
	98	Delaware Tribe of Indians, Oklahoma
	99	Douglas Indian Association
	100	Dry Creek Rancheria of Pomo Indians of California
	101	Duckwater Shoshone Tribe of the Duckwater Reservation, Nevada
	102	Eastern Band of Cherokee Indians of North Carolina
	103	Eastern Shawnee Tribe of Oklahoma
	104	Egegik Village
	105	Eklutna Native Village
	106	Ekwok Village
	107	Elem Indian Colony of Pomo Indians of the Sulphur Bank Rancheria, California
	108	Elk Valley Rancheria, California
	109	Ely Shoshone Tribe of Nevada
	110	Emmonak Village
	111	Enterprise Rancheria of Maidu Indians of California
	112	Evansville Village (aka Bettles Field)
	113	Flandreau Santee Sioux Tribe of South Dakota
	114	Forest County Potawatomi Community of Wisconsin Potawatomi Indians, Wisconsin
	115	Fort Belknap Indian Community of the Fort Belknap Reservation of Montana
	116	Fort Bidwell Indian Community of the Fort Bidwell Reservation of California
	117	Fort Independence Indian Community of Paiute Indians of the Fort Independence Reservation, California
	118	Fort McDermitt Paiute and Shoshone Tribes of the Fort McDermitt Indian Reservation, Nevada and Oregon

TRIBAL CODE - Continued

	119	Fort McDowell Mohave-Apache Community of the Fort McDowell Indian Reservation, Arizona
	120	Fort Mojave Indian Tribe of Arizona, California & Nevada
	121	Fort Sill Apache Tribe of Oklahoma
	122	Galena Village (aka Louden Village)
	123	Gila River Indian Community of the Gila River Indian Reservation, Arizona
	124	Grand Traverse Band of Ottawa & Chippewa Indians of Michigan
	125	Greenville Rancheria of Maidu Indians of California
	126	Grindstone Indian Rancheria of Wintun-Wailaki Indians of California
	127	Guidiville Rancheria of California
	128	Gulkana Village
	129	Hannahville Indian Community of Wisconsin Potawatomie Indians of Michigan
	130	Havasupai Tribe of the Havasupai Reservation, Arizona
	131	Healy Lake Village
	132	Ho-Chunk Nation of Wisconsin (formerly known as the Wisconsin Winnebago Tribe)
	133	Hoh Indian Tribe of the Hoh Indian Reservation, Washington
	134	Holy Cross Village
	135	Hoonah Indian Association
	136	Hoopa Valley Tribe, California
	137	Hopi Tribe of Arizona
	138	Hopland Band of Pomo Indians of the Hopland Rancheria, California
	139	Houlton Band of Maliseet Indians of Maine
	140	Hualapai Indian Tribe of the Hualapai Indian Reservation, Arizona
	141	Hughes Village
	142	Huron Potawatomi, Inc., Michigan
	143	Huslia Village
	144	Hydaburg Cooperative Association

TRIBAL CODE - Continued

	145	Igiugig Village
	146	Inaja Band of Diegueno Mission Indians of the Inaja and Cosmit Reservation, California
	147	Inupiat Community of the Arctic Slope
	148	Ione Band of Miwok Indians of California
	149	Iowa Tribe of Kansas and Nebraska
	150	Iowa Tribe of Oklahoma
	151	Iqurmuit Traditional Council (formerly Native Village of Russian Mission)
	152	Ivanoff Bay Village
	153	Jackson Rancheria of Me-Wuk Indians of California
	154	Jamestown S'Klallam Tribe of Washington
	155	Jamul Indian Village of California
	156	Jena Band of Choctaw Indians, Louisiana
	157	Jicarilla Apache Tribe of the Jicarilla Apache Indian Reservation, New Mexico
	158	Kaguyak Village
	159	Kaibab Band of Paiute Indians of the Kaibab Indian Reservation, Arizona
	160	Kaktovik Village (aka Barter Island)
	161	Kalispel Indian Community of the Kalispel Reservation, Washington
	162	Karuk Tribe of California
	163	Kashia Band of Pomo Indians of the Stewarts Point Rancheria, California
	164	Kaw Nation, Oklahoma
	165	Kenaitze Indian Tribe
	166	Ketchikan Indian Corporation
	167	Keweenaw Bay Indian Community of L'Anse and Ontonagon Bands of Chippewa Indians of the L'Anse Reservation, Michigan
	168	Kialegee Tribal Town, Oklahoma
	169	Kickapoo Traditional Tribe of Texas
	170	Kickapoo Tribe of Indians of the Kickapoo Reservation in Kansas

TRIBAL CODE - Continued

	171	Kickapoo Tribe of Oklahoma
	172	King Island Native Community
	173	Kiowa Indian Tribe of Oklahoma
	174	Klamath Indian Tribe of Oregon
	175	Klawock Cooperative Association
	176	Knik Tribe
	177	Kokhanok Village
	178	Kootenai Tribe of Idaho
	179	Koyukuk Native Village
	180	La Jolla Band of Luiseno Mission Indians of the La Jolla Reservation, California
	181	La Posta Band of Diegueno Mission Indians of the La Posta Indian Reservation, California
	182	Lac Courte Oreilles Band of Lake Superior Chippewa Indians of the Lac Courte Oreilles Reservation of Wisconsin
	183	Lac du Flambeau Band of Lake Superior Chippewa Indians of the Lac du Flambeau Reservation of Wisconsin
	184	Lac Vieux Desert Band of Lake Superior Chippewa Indians of Michigan
	185	Las Vegas Tribe of Paiute Indians of the Las Vegas Indian Colony, Nevada
	186	Lesnoi Village (aka Woody Island)
	187	Levelock Village
	188	Lime Village
	189	Little River Band of Ottawa Indians of Michigan
	190	Little Traverse Bay Bands of Odawa Indians of Michigan
	191	Los Coyotes Band of Cahuilla Mission Indians of the Los Coyotes Reservation, California
	192	Lovelock Paiute Tribe of the Lovelock Indian Colony, Nevada
	193	Lower Brule Sioux Tribe of the Lower Brule Reservation, South Dakota
	194	Lower Elwha Tribal Community of the Lower Elwha Reservation, Washington

TRIBAL CODE - Continued

	195	Lower Sioux Indian Community of Minnesota Mdewakanton Sioux Indians of the Lower Sioux Reservation in Minnesota
	196	Lummi Tribe of the Lummi Reservation, Washington
	197	Lytton Rancheria of California
	198	Makah Indian Tribe of the Makah Indian Reservation, Washington
	199	Manchester Band of Pomo Indians of the Manchester-Point Arena Rancheria, California
	200	Manley Hot Springs Village
	201	Manokotak Village
	202	Manzanita Band of Diegueno Mission Indians of the Manzanita Reservation, California
	203	Mashantucket Pequot Tribe of Connecticut
	204	Match-e-be-nash-she-wish Band of Pottawatomi Indians of Michigan
	205	McGrath Native Village
	206	Mechoopda Indian Tribe of Chico Rancheria, California
	207	Menominee Indian Tribe of Wisconsin
	208	Mentasta Traditional Council (formerly Mentasta Lake Village)
	209	Mesa Grande Band of Diegueno Mission Indians of the Mesa Grande Reservation, California
	210	Mescalero Apache Tribe of the Mescalero Reservation, New Mexico
	211	Metlakatla Indian Community, Annette Island Reserve
	212	Miami Tribe of Oklahoma
	213	Miccosukee Tribe of Indians of Florida
	214	Middletown Rancheria of Pomo Indians of California
	215	Minnesota Chippewa Tribe, Minnesota (Six component reservations: Bois Forte Band (Nett Lake); Fond du Lac Band; Grand Portage Band; Leech Lake Band; Mille Lacs Band; White Earth Band)
	216	Mississippi Band of Choctaw Indians, Mississippi
	217	Moapa Band of Paiute Indians of the Moapa River Indian Reservation, Nevada

TRIBAL CODE - Continued

	218	Modoc Tribe of Oklahoma
	219	Mohegan Indian Tribe of Connecticut
	220	Mooretown Rancheria of Maidu Indians of California
	221	Morongo Band of Cahuilla Mission Indians of the Morongo Reservation, California
	222	Muckleshoot Indian Tribe of the Muckleshoot Reservation, Washington
	223	Muscogee (Creek) Nation, Oklahoma
	224	Naknek Native Village
	225	Narragansett Indian Tribe of Rhode Island
	226	Native Village of Akhiok
	227	Native Village of Akutan
	228	Native Village of Aleknagik
	229	Native Village of Ambler
	230	Native Village of Atka
	231	Native Village of Barrow Inupiat Traditional Government (formerly Native Village of Barrow)
	232	Native Village of Belkofski
	233	Native Village of Brevig Mission
	234	Native Village of Buckland
	235	Native Village of Cantwell
	236	Native Village of Chanega (aka Chenega)
	237	Native Village of Chignik
	238	Native Village of Chignik Lagoon
	239	Native Village of Chistochina
	240	Native Village of Chitina
	241	Native Village of Chuathbaluk (Russian Mission, Kuskokwim)
	242	Native Village of Council
	243	Native Village of Deering
	244	Native Village of Diomede (aka Inalik)
	245	Native Village of Eagle
	246	Native Village of Eek

TRIBAL CODE - Continued

	247	Native Village of Ekuk
	248	Native Village of Elim
	249	Native Village of Eyak (Cordova)
	250	Native Village of False Pass
	251	Native Village of Fort Yukon
	252	Native Village of Gakona
	253	Native Village of Gambell
	254	Native Village of Georgetown
	255	Native Village of Goodnews Bay
	256	Native Village of Hamilton
	257	Native Village of Hooper Bay
	258	Native Village of Kanatak
	259	Native Village of Karluk
	260	Native Village of Kasigluk
	261	Native Village of Kiana
	262	Native Village of Kipnuk
	263	Native Village of Kivalina
	264	Native Village of Kluti Kaah (aka Copper Center)
	265	Native Village of Kobuk
	266	Native Village of Kongiganak
	267	Native Village of Kotzebue
	268	Native Village of Koyuk
	269	Native Village of Kwigillingok
	270	Native Village of Kwinhagak (aka Quinhagak)
	271	Native Village of Larsen Bay
	272	Native Village of Marshall (aka Fortuna Ledge)
	273	Native Village of Mary's Igloo
	274	Native Village of Mekoryuk
	275	Native Village of Minto
	276	Native Village of Nanwalek (aka English Bay)
	277	Native Village of Napaimute
	278	Native Village of Napakiak
	279	Native Village of Napaskiak

TRIBAL CODE - Continued

	280	Native Village of Nelson Lagoon
	281	Native Village of Nightmute
	282	Native Village of Nikolski
	283	Native Village of Noatak
	284	Native Village of Nuiqsut (aka Nooiksut)
	285	Native Village of Nunapitchuk
	286	Native Village of Ouzinkie
	287	Native Village of Paimiut
	288	Native Village of Perryville
	289	Native Village of Pilot Point
	290	Native Village of Pitka's Point
	291	Native Village of Point Hope
	292	Native Village of Point Lay
	293	Native Village of Port Graham
	294	Native Village of Port Heiden
	295	Native Village of Port Lions
	296	Native Village of Ruby
	297	Native Village of Saint Michael
	298	Native Village of Savoonga
	299	Native Village of Scammon Bay
	300	Native Village of Selawik
	301	Native Village of Shaktoolik
	302	Native Village of Sheldon's Point
	303	Native Village of Shishmaref
	304	Native Village of Shungnak
	305	Native Village of Stevens
	306	Native Village of Tanacross
	307	Native Village of Tanana
	308	Native Village of Tatitlek
	309	Native Village of Tazlina
	310	Native Village of Teller
	311	Native Village of Tetlin
	312	Native Village of Tuntutuliak

TRIBAL CODE - Continued

	313	Native Village of Tununak
	314	Native Village of Tyonek
	315	Native Village of Unalakleet
	316	Native Village of Unga
	317	Native Village of Venetie Tribal Government (Arctic Village and Village of Venetie)
	318	Native Village of Wales
	319	Native Village of White Mountain
	320	Navajo Nation, Arizona, New Mexico & Utah
	321	Nenana Native Association
	322	New Koliganek Village Council (formerly Koliganek Village)
	323	New Stuyahok Village
	324	Newhalen Village
	325	Newtok Village
	326	Nez Perce Tribe of Idaho
	327	Nikolai Village
	328	Ninilchik Village
	329	Nisqually Indian Tribe of the Nisqually Reservation, Washington
	330	Nome Eskimo Community
	331	Nondalton Village
	332	Nooksack Indian Tribe of Washington
	333	Noorvik Native Community
	334	Northern Cheyenne Tribe of the Northern Cheyenne Indian Reservation, Montana
	335	Northfork Rancheria of Mono Indians of California
	336	Northway Village
	337	Northwestern Band of Shoshoni Nation of Utah (Washakie)
	338	Nulato Village
	339	Nunakauyarmiut Tribe (formerly Native Village of Toksook Bay)
	340	Oglala Sioux Tribe of the Pine Ridge Reservation, South Dakota
	341	Omaha Tribe of Nebraska

TRIBAL CODE - Continued

	342	Oneida Nation of New York
	343	Oneida Tribe of Wisconsin
	344	Onondaga Nation of New York
	345	Organized Village of Grayling (aka Holikachuk)
	346	Organized Village of Kake
	347	Organized Village of Kasaan
	348	Organized Village of Kwethluk
	349	Organized Village of Saxman
	350	Orutsararmuit Native Village (aka Bethel)
	351	Osage Tribe, Oklahoma
	352	Oscarville Traditional Village
	353	Otoe-Missouria Tribe of Indians, Oklahoma
	354	Ottawa Tribe of Oklahoma
	355	Paiute Indian Tribe of Utah
	356	Paiute-Shoshone Indians of the Bishop Community of the Bishop Colony, California
	357	Paiute-Shoshone Indians of the Lone Pine Community of the Lone Pine Reservation, California
	358	Paiute-Shoshone Tribe of the Fallon Reservation and Colony, Nevada
	359	Pala Band of Luiseno Mission Indians of the Pala Reservation, California
	360	Pascua Yaqui Tribe of Arizona
	361	Paskenta Band of Nomlaki Indians of California
	362	Passamaquoddy Tribe of Maine
	363	Pauloff Harbor Village
	364	Pauma Band of Luiseno Mission Indians of the Pauma & Yuima Reservation, California
	365	Pawnee Nation of Oklahoma
	366	Pechanga Band of Luiseno Mission Indians of the Pechanga Reservation, California
	367	Pedro Bay Village
	368	Penobscot Tribe of Maine
	369	Peoria Tribe of Indians of Oklahoma

TRIBAL CODE - Continued

	370	Petersburg Indian Association
	371	Picayune Rancheria of Chukchansi Indians of California
	372	Pilot Station Traditional Village
	373	Pinoleville Rancheria of Pomo Indians of California
	374	Pit River Tribe, California (includes Big Bend, Lookout, Montgomery Creek & Roaring Creek Rancherias & XL Ranch)
	375	Platinum Traditional Village
	376	Poarch Band of Creek Indians of Alabama
	377	Pokagon Band of Potawatomi Indians of Michigan
	378	Ponca Tribe of Indians of Oklahoma
	379	Ponca Tribe of Nebraska
	380	Port Gamble Indian Community of the Port Gamble Reservation, Washington
	381	Portage Creek Village (aka Ohgsenakale)
	382	Potter Valley Rancheria of Pomo Indians of California
	383	Prairie Band of Potawatomi Indians, Kansas
	384	Prairie Island Indian Community of Minnesota Mdewakanton Sioux Indians of the Prairie Island Reservation, Minnesota
	385	Pribilof Islands Aleut Communities of St. Paul & St. George Islands
	386	Pueblo of Acoma, New Mexico
	387	Pueblo of Cochiti, New Mexico
	388	Pueblo of Isleta, New Mexico
	389	Pueblo of Jemez, New Mexico
	390	Pueblo of Laguna, New Mexico
	391	Pueblo of Nambe, New Mexico
	392	Pueblo of Picuris, New Mexico
	393	Pueblo of Pojoaque, New Mexico
	394	Pueblo of San Felipe, New Mexico
	395	Pueblo of San Ildefonso, New Mexico
	396	Pueblo of San Juan, New Mexico
	397	Pueblo of Sandia, New Mexico
	398	Pueblo of Santa Ana, New Mexico

TRIBAL CODE - Continued

	399	Pueblo of Santa Clara, New Mexico
	400	Pueblo of Santo Domingo, New Mexico
	401	Pueblo of Taos, New Mexico
	402	Pueblo of Tesuque, New Mexico
	403	Pueblo of Zia, New Mexico
	404	Puyallup Tribe of the Puyallup Reservation, Washington
	405	Pyramid Lake Paiute Tribe of the Pyramid Lake Reservation, Nevada
	406	Qagan Tayagungin Tribe of Sand Point Village
	407	Qawalangin Tribe of Unalaska
	408	Quapaw Tribe of Indians, Oklahoma
	409	Quartz Valley Indian Community of the Quartz Valley Reservation of California
	410	Quechan Tribe of the Fort Yuma Indian Reservation, California & Arizona
	411	Quileute Tribe of the Quileute Reservation, Washington
	412	Quinault Tribe of the Quinault Reservation, Washington
	413	Ramona Band or Village of Cahuilla Mission Indians of California
	414	Rampart Village
	415	Red Cliff Band of Lake Superior Chippewa Indians of Wisconsin
	416	Red Lake Band of Chippewa Indians of the Red Lake Reservation, Minnesota
	417	Redding Rancheria, California
	418	Redwood Valley Rancheria of Pomo Indians of California
	419	Reno-Sparks Indian Colony, Nevada
	420	Resighini Rancheria, California (formerly known as the Coast Indian Community of Yurok Indians of the Resighini Rancheria)
	421	Rincon Band of Luiseno Mission Indians of the Rincon Reservation, California
	422	Robinson Rancheria of Pomo Indians of California
	423	Rosebud Sioux Tribe of the Rosebud Indian Reservation, South Dakota

TRIBAL CODE - Continued

	424	Round Valley Indian Tribes of the Round Valley Reservation, California (formerly known as the Covelo Indian Community)
	425	Rumsey Indian Rancheria of Wintun Indians of California
	426	Sac & Fox Nation of Missouri in Kansas and Nebraska
	427	Sac & Fox Nation, Oklahoma
	428	Sac & Fox Tribe of the Mississippi in Iowa
	429	Saginaw Chippewa Indian Tribe of Michigan, Isabella Reservation
	430	Saint George Island(See Pribilof Islands Aleut Communities of St. Paul & St. George Islands)
	431	Saint Paul Island (See Pribilof Islands Aleut Communities of St. Paul & St. George Islands)
	432	Salt River Pima-Maricopa Indian Community of the Salt River Reservation, Arizona
	433	Samish Indian Tribe, Washington
	434	San Carlos Apache Tribe of the San Carlos Reservation, Arizona
	435	San Juan Southern Paiute Tribe of Arizona
	436	San Manual Band of Serrano Mission Indians of the San Manual Reservation, California
	437	San Pasqual Band of Diegueno Mission Indians of California
	438	Santa Rosa Band of Cahuilla Mission Indians of the Santa Rosa Reservation, California
	439	Santa Rosa Indian Community of the Santa Rosa Rancheria, California
	440	Santa Ynez Band of Chumash Mission Indians of the Santa Ynez Reservation, California
	441	Santa Ysabel Band of Diegueno Mission Indians of the Santa Ysabel Reservation, California
	442	Santee Sioux Tribe of the Santee Reservation of Nebraska
	443	Sauk-Suiattle Indian Tribe of Washington
	444	Sault Ste. Marie Tribe of Chippewa Indians of Michigan
	445	Scotts Valley Band of Pomo Indians of California
	446	Seldovia Village Tribe

TRIBAL CODE - Continued

	447	Seminole Nation of Oklahoma
	448	Seminole Tribe of Florida, Dania, Big Cypress, Brighton, Hollywood & Tampa Reservations
	449	Seneca Nation of New York
	450	Seneca-Cayuga Tribe of Oklahoma
	451	Shageluk Native Village
	452	Shakopee Mdewakanton Sioux Community of Minnesota (Prior Lake)
	453	Sheep Ranch Rancheria of Me-Wuk Indians of California
	454	Sherwood Valley Rancheria of Pomo Indians of California
	455	Shingle Springs Band of Miwok Indians, Shingle Springs Rancheria (Verona Tract), California
	456	Shoalwater Bay Tribe of the Shoalwater Bay Indian Reservation, Washington
	457	Shoshone Tribe of the Wind River Reservation, Wyoming
	458	Shoshone-Bannock Tribes of the Fort Hall Reservation of Idaho
	459	Shoshone-Paiute Tribes of the Duck Valley Reservation, Nevada
	460	Sisseton-Wahpeton Sioux Tribe of the Lake Traverse Reservation, South Dakota
	461	Sitka Tribe of Alaska
	462	Skagway Village
	463	Skokomish Indian Tribe of the Skokomish Reservation, Washington
	464	Skull Valley Band of Goshute Indians of Utah
	465	Smith River Rancheria, California
	466	Snoqualmie Tribe, Washington
	467	Soboba Band of Luiseno Mission Indians of the Soboba Reservation, California
	468	Sokaogon Chippewa Community of the Mole Lake Band of Chippewa Indians, Wisconsin
	469	South Naknek Village
	470	Southern Ute Indian Tribe of the Southern Ute Reservation, Colorado

TRIBAL CODE - Continued

	471	Spirit Lake Tribe, North Dakota (formerly known as the Devils Lake Sioux Tribe)
	472	Spokane Tribe of the Spokane Reservation, Washington
	473	Squaxin Island Tribe of the Squaxin Island Reservation, Washington
	474	St. Croix Chippewa Indians of Wisconsin, St. Croix Reservation
	475	St. Regis Band of Mohawk Indians of New York
	476	Standing Rock Sioux Tribe of North & South Dakota
	477	Stebbins Community Association
	478	Stillaguamish Tribe of Washington
	479	Stockbridge-Munsee Community of Mohican Indians of Wisconsin
	480	Summit Lake Paiute Tribe of Nevada
	481	Suquamish Indian Tribe of the Port Madison Reservation, Washington
	482	Susanville Indian Rancheria, California
	483	Swinomish Indians of the Swinomish Reservation, Washington
	484	Sycuan Band of Diegueno Mission Indians of California
	485	Table Bluff Reservation - Wiyot Tribe, California
	486	Table Mountain Rancheria of California
	487	Takotna Village
	488	Te-Moak Tribes of Western Shoshone Indians of Nevada (Four constituent bands: Battle Mountain Band; Elko Band; South Fork Band and Wells Band)
	489	Telida Village
	490	Thlopthlocco Tribal Town, Oklahoma
	491	Three Affiliated Tribes of the Fort Berthold Reservation, North Dakota
	492	Tohono O'odham Nation of Arizona
	493	Tonawanda Band of Seneca Indians of New York
	494	Tonkawa Tribe of Indians of Oklahoma
	495	Tonto Apache Tribe of Arizona

TRIBAL CODE - Continued

	496	Torres-Martinez Band of Cahuilla Mission Indians of California
	497	Traditional Village of Togiak
	498	Tulalip Tribes of the Tulalip Reservation, Washington
	499	Tule River Indian Tribe of the Tule River Reservation, California
	500	Tuluksak Native Community
	501	Tunica-Biloxi Indian Tribe of Louisiana
	502	Tuolumne Band of Me-Wuk Indians of the Tuolumne Rancheria of California
	503	Turtle Mountain Band of Chippewa Indians of North Dakota
	504	Tuscarora Nation of New York
	505	Twenty-Nine Palms Band of Luiseno Mission Indians of California
	506	Twin Hills Village
	507	Ugashik Village
	508	Umkumiute Native Village
	509	United Auburn Indian Community of the Auburn Rancheria of California
	510	United Keetoowah Band of Cherokee Indians of Oklahoma
	511	Upper Lake Band of Pomo Indians of Upper Lake Rancheria of California
	512	Upper Sioux Indian Community of the Upper Sioux Reservation, Minnesota
	513	Upper Skagit Indian Tribe of Washington
	514	Ute Indian Tribe of the Uintah & Ouray Reservation, Utah
	515	Ute Mountain Tribe of the Ute Mountain Reservation, Colorado, New Mexico & Utah
	516	Utu Utu Gwaitu Paiute Tribe of the Benton Paiute Reservation, California
	517	Village of Afognak
	518	Village of Alakanuk
	519	Village of Anaktuvuk Pass
	520	Village of Aniak
	521	Village of Atmautluak

TRIBAL CODE - Continued

	522	Village of Bill Moore's Slough
	523	Village of Chefornak
	524	Village of Clark's Point
	525	Village of Crooked Creek
	526	Village of Dot Lake
	527	Village of Iliamna
	528	Village of Kalskag
	529	Village of Kaltag
	530	Village of Kotlik
	531	Village of Lower Kalskag
	532	Village of Ohogamiut
	533	Village of Old Harbor
	534	Village of Red Devil
	535	Village of Salamatoff
	536	Village of Sleetmute
	537	Village of Solomon
	538	Village of Stony River
	539	Village of Venetie (See Native Village of Venetie Tribal Government)
	540	Village of Wainwright
	541	Walker River Paiute Tribe of the Walker River Reservation, Nevada
	542	Wampanoag Tribe of Gay Head (Aquinnah) of Massachusetts
	543	Washoe Tribe of Nevada & California (Carson Colony, Dresslerville Colony, Woodfords Community, Stewart Community, & Washoe Ranches)
	544	White Mountain Apache Tribe of the Fort Apache Reservation, Arizona
	545	Wichita and Affiliated Tribes (Wichita, Keechi, Waco & Tawakonie), Oklahoma
	546	Winnebago Tribe of Nebraska
	547	Winnemucca Indian Colony of Nevada
	548	Wrangell Cooperative Association

TRIBAL CODE - Continued

	549 Wyandotte Tribe of Oklahoma 550 Yakutat Tlingit Tribe 551 Yankton Sioux Tribe of South Dakota 552 Yavapai-Apache Nation of the Camp Verde Indian Reservation, Arizona 553 Yavapai-Prescott Tribe of the Yavapai Reservation, Arizona 554 Yerington Paiute Tribe of the Yerington Colony & Campbell Ranch, Nevada 555 Yomba Shoshone Tribe of the Yomba Reservation, Nevada 556 Ysleta Del Sur Pueblo of Texas 557 Yupiit of Andreafski 558 Yurok Tribe of the Yurok Reservation, California 559 Zuni Tribe of the Zuni Reservation, New Mexico 560 Cowlitz Indian Tribe 561 Not from a Federally recognized tribe
Business Rules	Required field if Native American is selected as one of the client's Race/Ethnicity choices. Up to two tribal affiliations may be selected.
Tables	CLIENT_TRIBE TRIBE_LUT
Field Information	DASA Database (SQL) — Name: Tribe_ID; Length: 3; Type: Int, null (Look-up table only) — Name: Tribe_Desc; Length: 300; Type: Varchar, null
Data Element History	Added 560: Cowlitz Indian Tribe 1/1/02 Added 561: Not from a Federally recognized tribe 7/1/07

TROUBLED BY

Field Description	Six questions indicating how troubled the client reports feeling in the past thirty days about each of the following issues: Alcohol Problems Drug Problems Family Issues Legal Issues Medical Problems Psychological Problems		
Valid Entries	Use Addiction Severity Index Patient Rating Scale: 0 - Not at all 1 - Slightly 2 - Moderately 3 - Considerably 4 – Extremely		
Business Rules	None		
Tables	ASI_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Alcohol_Problem Drug_problem Family_trouble Legal_trouble Medical_Trouble Psych_Problem 1 Int, null
Data Element History	---		

USES DETOX SHORT FORM

Field Description	Indicates if the agency is authorized to use the Detox Short Form to enter milestone records for their clients with a Detoxification modality. To request authorization to use the Detox Short Form please contact DBHR.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	AGENCY_PREFERENCES		
Field Information	DASA Database (SQL)	Name: Length: Type:	Uses_Short_Detox_Form 1 Tinyint, null
Data Element History	Changed value of "No" from Null to 0		1/30/2005

VALID

Field Description	Indicates if a data field in the table is an approved value or combination of values in the case of the MODALITY_CONTRACT_FUNDING table. The database administrator manages this field.
Valid Entries	Choices — Target Codes Yes — Y No — N
Business Rules	None
Tables	MODALITY_CONTRACT_FUNDING OFFERED_SERVICE SPECIAL_PROJECT_LUT
Field Information	DASA Database (SQL) Name: Valid Length: 1 Type: Char, null
Data Element History	---

VETERAN

Field Description	Indicates if the client has ever served as an active member in the U.S. military.		
Valid Entries	Choices	Target Codes	
	Yes	1	
	No	0	
	Refused	2	
Business Rules	Required field		
Tables	TREATMENT_MILESTONE YES_NO_REFUSED_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Veteran 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Yes_No_Refused_ID 1 Tinyint, not null
		Name: Length: Type:	Yes_No_Refused_Desc 20 Varchar, not null
Data Element History	Changed wording of question from “Are you eligible for veterans’ benefits?” to “Are you a military veteran?”		11/1/01
	Changed wording of question from “Are you a military veteran?” to “Have you ever served on active duty in the U.S. Military?”		12/1/08
	Field became required for all milestones		12/1/08
	Added choice for “Refused”		12/1/08

WA DRIVER'S LICENSE NUMBER

Field Description	The client's Washington State driver's license number.		
Valid Entries	XXXXXXXXXXXXXXXXXXXX		
Business Rules	None		
Tables	CLIENT_MASTER		
Field Information	DASA Database (SQL)	Name: Length: Type:	Drivers_License 20 Varchar, null
Data Element History	---		

YEARS OF EDUCATION

Field Description	Indicates the years of education completed by the client.		
Valid Entries	## 0 through 30		
Business Rules	Required Field. If Academic/Training Achievement equals Undergraduate or Post Graduate Degree then Years of Education must be greater than or equal to 10. Warning message if Academic/Training Achievement equals Undergraduate or Post Graduate Degree and Years of Education is between 10 and 13 (inclusive).		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Years_Of_Education 2 Tinyint, null
Data Element History	---		

ZIP CODE

Field Description	The zip code of the area where the client currently resides. Use the zip code of the agency if the client is transient, resides outside of the United States or if the zip code is unknown.		
Valid Entries	##### - #### or #####		
Business Rules	Required field Defaults to the value entered in the Agency Default screen, if one is present		
Tables	CLIENT_ADDRESS		
Field Information	DASA Database (SQL)	Name: Length: Type:	Zip_Code 10 Varchar, null
Data Element History	---		

APPENDICES

Appendix A: Inactive Data Elements

AUTHORIZED DAYS OF SERVICE (ADATSA)

Field Description	Indicates the total number of days for which the client is authorized for ADATSA treatment. The maximum number of days is limited to 180 days within any two-year period.
Valid Entries	###
Business Rules	This is a calculated value for display purposes based on case plan planned dates. Authorized Days = Planned End Date – Planned Start Date. If Planned End Date = Planned Start Date Then Authorized Days = 1 day
Tables	N/A
Field Information	N/A
Data Element History	Inactive 2/1/03

BRAILLE

Field Description	Indicates if the client reads Braille.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	None
Tables	TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Uses_Braille Length: 1 Type: Tinyint, null
Data Element History	Inactivated 7/1/07

CASE PLAN BEGIN DATE (ADATSA)

Field Description	Indicates the date the ADATSA treatment is planned to begin.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Required Field Must be greater than 01/01/1999. Must be greater than Assessment Date/Time plus duration		
Tables	CASE_PLAN		
Field Information	DASA Database (SQL)	Name: Length: Type:	Plan_Start_Date 16 Datetime, null
Data Element History	Inactivated the use of case plans		2/1/03

CASE PLAN END DATE (ADATSA)

Field Description	Indicates the date the ADATSA treatment is planned to end.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Required Field Must be greater than 01/01/1989. Must be greater than the case plan start date. Must be less than interval start date plus 2 years.		
Tables	CASE_PLAN		
Field Information	DASA Database (SQL)	Name: Length: Type:	Plan_End_Date 16 Datetime, null
Data Element History	Inactivated the use of case plans		2/1/03

CASE PLAN NUMBER

Field Description	The sequential number assigned to the ADATSA case plan. This field is filled in by the TARGET system and is not an entry field.		
Valid Entries	#		
Business Rules	Required Field		
Tables	CASE_PLAN		
Field Information	DASA Database (SQL)	Name: Length: Type:	Case_Plan_Sequence 1 Tinyint, not null
Data Element History	Inactivated the use of case plans		2/1/03

CLIENT IDENTIFIER, OLD (Inactive)

Field Description	The Client Identifier was created automatically by the old TARGET system when a client Master is established. This field is a unique client identifier containing: first five characters of the last name (use blanks to fill if the last name is less than 5 characters), first character of the first name, first character of the middle name (blank if no middle name), six characters of the birth date (YYMMDD) and one character for a tiebreaker (determined by the database). Use alphabetic characters and blanks only.		
Valid Entries	None – historical information only		
Business Rules	None		
Tables	CLIENT_MASTER CROSSWALK		
Field Information	DASA Database (SQL) CROSSWALK	Name: Length: Type: Name: Length: Type:	Client_Identifier 16 Uniqueidentifier, not null Client_ID 16 Uniqueidentifier, not null
Data Element History	Inactivated. Current system uses a random 36 character hexadecimal string.		11/15/01

CO-OCCURRING DISORDER

Field Description	Mark the appropriate response **if** your agency has a **co-occurring disorder contract** and is providing mental health and chemical dependency services to this client.		
Valid Entries	Choices Yes No	Target Code 1 0	
Business Rules	None		
Tables	SERVICE_FUNDING		
Field Information	DASA Database (SQL)	Name: Length: Type:	Co_occurring_disorder 1 Tinyint, null
Data Element History	Inactivated data element		7/1/07

CURRENTLY SMOKE CIGARETTES

Field Description	Indicates if the client currently smokes tobacco cigarettes.		
Valid Entries	Choices	Target Code	
	Yes	1	
	No	0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name:	Smoke_Cigarettes
		Length:	1
		Type:	Tinyint, null
Data Element History	Inactive		7/1/07
	Previous entries in this field have been transferred to Currently_Use_Tobacco		

DISALLOWED (ADATSA)

Field Description	Indicates if the client is allowed an exception to the 180 days treatment limits. Select No if the exception is to be processed. Select Yes if the exception will not be processed.
Valid Entries	Choices — Target Codes Yes — 1 No (default) — 0
Business Rules	Required Field. DBHR use only.
Tables	ADATSA_EXCEPTION
Field Information	DASA Database (SQL) Name: Disallowed Length: 1 Type: Tinyint, null
Data Element History	Inactive 2/1/03

DISPLAYS ON ATR

Field Description	Indicates which ATR Support Activity types are displayed in a Client Support Activity.
Valid Entries	The Target database administrator updates this field. Choices — Target Codes Yes — 1 No — 0
Business Rules	None
Tables	SUPPORT_ACTIVITY_TYPE_LUT
Field Information	DASA Database (SQL) Name: Displays_On_ATR_Rate Length: 1 Type: Tinyint, null
Data Element History	ATR types are no longer displayed as this data is collected through the ATR Services screen 4/25/05

DRUG OF CHOICE

Field Description	Clinical note that indicates the client's drug of choice. This may or may not be the same as one of the drugs listed as primary, secondary or tertiary.
Valid Entries	Not collected in TARGET
Business Rules	N/A
Tables	N/A
Field Information	N/A
Data Element History	Inactivated 7/1/07

EMERGENCY TELEPHONE NUMBER

Field Description	Indicates an emergency contact number for the client.
Valid Entries	Not entered into the TARGET database.
Business Rules	None
Tables	N/A
Field Information	N/A
Data Element History	Inactivated 7/1/07

ENGLISH READING ABILITY

Field Description	Indicates the English reading skills of the client.		
Valid Entries	Choices		Target Codes
	Functional (default)		2
	read and understand meaning of English text		
	Interpretive Services Needed		1
	Unknown		3
	Limited [*Inactive 11/15/01*]		4
Business Rules	None		
Tables	TREATMENT_MILESTONE ENGLISH_ABILITY_LUT		
Field Information	DASA Database TREATMENT_MILESTONE	Name: Length: Type:	English_Reading_Ability 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	English_Ability_ID 1 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	English_Ability_Desc 35 Varchar, null
Data Element History	Inactivated Limited		11/15/01
	Inactivated data element		7/1/07

ENGLISH SPEAKING ABILITY

Field Description	Indicates the English speaking skills of the client.		
Valid Entries	Choices		Target Codes
	Functional (default)		2
	Interpretive Services Needed		1
	Unknown		3
	Limited [*Inactive 11/15/01*]		4
Business Rules	None		
Tables	TREATMENT_MILESTONE ENGLISH_ABILITY_LUT		
Field Information	DASA Database TREATMENT_MILESTONE	Name: Length: Type:	English_Reading_Ability 1 Tinyint, null
	(Look-up table only)	Name: Length: Type:	English_Ability_ID 1 Tinyint, not null
	(Look-up table only)	Name: Length: Type:	English_Ability_Desc 35 Varchar, null
Data Element History	Inactivated Limited		11/15/01
	Inactivated data element		7/1/07

EVER TRIED TO QUIT SMOKING

Field Description	Indicates if the client has ever tried to quit smoking tobacco cigarettes. Choose "No" if the client has never smoked.
Valid Entries	Choices — Target Codes Yes — 1 No — 0
Business Rules	None
Tables	TREATMENT_MILESTONE
Field Information	DASA Database (SQL) Name: Tried_To_Quit_Smoking Length: 1 Type: Tinyint, null
Data Element History	Inactive 7/1/07 Previous entries in this field have been transferred to Tried_To_Quit_Tobacco

EXCEPTION DAYS (ADATSA)

Field Description	The total number of days that have been applied to the client's allowable ADATSA days through the ADATSA Exception.
Valid Entries	This is a calculated field
Business Rules	This number is calculated by subtracting the Exception_Start_Date from the Exception_End_Date. The resulting amount equals the Exception Days. Exception Days is added to the total number of available ADATSA days to determine how many days of ADATSA treatment the client can have.
Tables	N/A
Field Information	N/A
Data Element History	Inactive 2/1/03

EXCEPTION END DATE (ADATSA)

Field Description	The ending date for which the exception has been granted or approved within the established ADATSA interval.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Needs to be less than the Interval Start Date plus 2 years. For DBHR Staff only		
Tables	ADATSA_EXCEPTION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Exception_End_Date 10 Datetime, null
Data Element History	Inactive		2/1/03

EXCEPTION NOTE (ADATSA)

Field Description	Indicates any special comment notes accompanying the exception of the 180 day limit of ADATSA treatment.		
Valid Entries	Enter comments.		
Business Rules	For DBHR staff only.		
Tables			
Field Information	DASA Database (SQL)	Name: Length: Type:	Exception_Note 70 Varchar, null
Data Element History	Inactive		2/1/03

EXCEPTION START DATE (ADATSA)

Field Description	The start date for which the exception has been granted or approved within the established ADATSA interval.		
Valid Entries	Format: mm/dd/yyyy		
Business Rules	Needs to be greater than the Interval Start Date. For DBHR staff only.		
Tables	ADATSA_EXCEPTION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Exception_Start_Date 10 Datetime, not null
Data Element History	Inactive		2/1/03

EXCEPTION TYPE (ADATSA)

Field Description	Indicates the reason for the extension of the 180 day treatment limitations. (Not an entry field in the Provider System.)		
Valid Entries	Choices	Target Codes	
	180 Day	2	
	Other	3	
	Residential	4	
	Waiver	5	
	Outpatient [Inactive 11/15/01]	1	
Business Rules	Required Field For DBHR staff only.		
Tables	ADATSA_EXCEPTION ADATSA_EXCEPTION_TYPE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Exception_Type_ID 1 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Exception_Type_Desc 35 Varchar, null
Data Element History	Inactive		2/1/03

FEE STATUS

Field Description	Indicates the portion of treatment fees the client or their insurance will pay.
Valid Entries	<u>Choices</u> / <u>Description</u> / <u>Target Codes</u> No Fee — Full payment made by public funds/client pays nothing — 1 Full Fee — Full payment made by client and/or their insurance — 2 Partial Fee — Partial payment made by public funds and partial ($2.00 or more) payment from other funds — 3
Business Rules	Required field for admissions
Tables	AGENCY_PREFERENCES PRIVATE_FEE_STATUS_LUT SERVICE_FUNDING
Field Information	DASA Database (SQL) — Name: Private_Fee_Status_ID; Length: 1; Type: Tinyint, null (Look-up table only) — Name: Private_Fee_Status_Desc; Length: 30; Type: Varchar, null
Data Element History	Stopped collecting this information for assessments — 3/1/03 Inactivated data element — 7/1/07

INTERVAL END DATE (ADATSA)

Field Description	Each eligible client is allowed 180 days of ADATSA funded treatment in a two year period. The Interval End Date defines the end of the two year period. A new two year period may begin after the current interval has expired.		
Valid Entries	This is calculated by the TARGET 2000 system.		
Business Rules	This is calculated based on the client's Interval Start Date plus 2 years.		
Tables	INTERVAL_INFO		
Field Information	DASA Database (SQL)	Name: Length: Type:	Current_Interval_End_Date 16 Datetime, null
Data Element History	Inactive		2/1/03

INTERVAL START DATE (ADATSA)

Field Description	Each eligible client is allowed 180 days of ADATSA funded treatment in a two year period. The Interval Start Date defines the beginning of the two year period.		
Valid Entries	This is calculated by the TARGET 2000 system.		
Business Rules	This is established based on the client's first planned admission for an ADATSA case plan. The Interval Start Date is modified by the actual admission date for an ADATSA case plan to reflect the earliest admission for a case plan.		
Tables	INTERVAL_INFO ADATSA_EXECPTION		
Field Information	DASA Database (SQL) ADATSA_EXECPTION	Name: Length: Type: Name: Length: Type:	Current_Interval_Start_Date 16 Datetime, not null Interval_Start_Date 16 Datetime, not null
Data Element History	Inactive		2/1/03

LARGE PRINT ENGLISH

Field Description	Indicates if the client needs large print in order to read.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Uses_Large_Type_English 1 Tinyint, null
Data Element History	Inactive		7/1/07

NEXT OF KIN

Field Description	Name and relationship of closest familial relation to client.
Valid Entries	Not Collected in TARGET.
Business Rules	None
Tables	N/A
Field Information	N/A
Data Element History	Inactivated 7/1/07

NODS SCORE

Field Description	The NODS score for this client. The NODS instrument uses two scores, one for the client's current situation and one for the past twelve months. Please enter the score for the last twelve months into this field. The NODS instrument is an assessment tool from the National Opinion Research Center (NORC) that was developed to identify and assess problem gambling. NODS stands for NORC DSM Screen for Gambling Problems. This field is for gambling milestones.		
Valid Entries	A number from 0 through 11		
Business Rules	Required if assessment or admission type is Gambling. At discharge it is required if the admission type was Gambling or CD and Gambling.		
Tables	GAMBLING_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	NODS 4 Int, null
Data Element History	Created		10/3/05
	Effective approximately February 2008 agencies started using this field to record the SOGS score for a client rather than the NODS score.		
	Inactivated		7/1/2008

NO SHOW

Field Description	Indicates if the client did not show up at the planned treatment agency to begin his or her ADATSA treatment.
Valid Entries	The "No Show" box is checked to indicate that the client did not show up for treatment. Choices — Target Codes Yes — 1 No — 0
Business Rules	This can only be modified by the agency that did the ADATSA Assessment for this client.
Tables	CASE_PLAN
Field Information	DASA Database (SQL) Name: No_Show_Flag Length: 1 Type: Tinyint, null
Data Element History	Changed value of "No" from Null to 0 — 1/30/05 Inactive — 2/1/03

PLANNED AGENCY NUMBER (ADATSA)

Field Description	Indicates the agency number in the case plan where the ADATSA client is planned to enter treatment.		
Valid Entries	######		
Business Rules	Required Field		
Tables	CASE_PLAN		
Field Information	DASA Database (SQL)	Name: Length: Type:	Planned_Agency_Number 6 Character, null
Data Element History	Inactive		2/1/03

PLANNED MODALITY (ADATSA)

Field Description	Indicates the modality of the case plan.		
Valid Entries	Valid entries may be picked from the list of Modalities in the MODALITY_LUT.		
Business Rules	Required Field The Planned Modality must be one that is active for the Planned Agency as of the case plan start date.		
Tables	CASE_PLAN MODALITY_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	Planned_Modality 2 Tinyint, null
	(Lookup table only)	Name: Length: Type:	Modality_ID 2 Tinyint, null
Data Element History	Inactive		2/1/03

POLY SUBSTANCE USE

Field Description	Indicates that the client takes three or more drugs at a time (not including Tobacco products) in a more or less random pattern. This field is used to reflect a pattern of usage that involves a relatively random combination of drugs. Clients that fit in this category will often choose to take whatever drugs are available regardless of effect. A client's use of multiple drugs does not necessarily qualify them in this category. Note: This definition is somewhat different than the definitions of Poly Substance Use and Poly Substance Abuse as found in the DSM.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Polysubstance_Use 1 Tinyint, null
Data Element History	Inactivated data element		7/1/07

REFERRING CASE PLAN NUMBER (ADATSA)

Field Description	Identifies a number corresponding to the ADATSA treatment plan. This is generated by the TARGET system.		
Valid Entries	#		
Business Rules	None		
Tables	ADMISSION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Referring_Case_Plan_Sequence 1 Tinyint, null
Data Element History	Inactive		2/1/03

SCHOOL TYPE

Field Description			
Valid Entries	Choices		Target Codes
	Academic		2
	Not in School/NA		1
	Other/Alternative		4
	Vocational/Technical		3
Business Rules	Required Field Must equal Not in School if School Status equals Not Enrolled. Cannot equal Not in School if School Status equals Part Time or Full Time.		
Tables	TREATMENT_MILESTONE SCHOOL_TYPE_LUT		
Field Information	DASA Database (SQL)	Name: Length: Type:	School_Type_ID 1 Tinyint, null
	(Look-up table)	Name: Length: Type:	School_Type_Desc 35 Varchar, null
Data Element History	Inactivated data element		7/1/07

STATUTORY MAX

Field Description	This is the date that Department of Corrections supervision ends.		
Valid Entries	mm/dd/yyyy		
Business Rules	Required if a DOC Consent Date is entered.		
Tables	DEPARTAMENTAL_COLLABORATION		
Field Information	DASA Database (SQL)	Name: Length: Type:	Statutory_Max 8 datetime, null
Data Element History	Added Inactivated		7/1/05 3/27/06

USER DEFINED OPTION

Field Description	This field is for users to enter a lookup option for a drug choice which is not one of the currently defined choices or for which special tracking is directed by appropriate authority such as county or state funding agencies to track substances not reflected in the substance choices. An example might be to add a choice for a new drug or for a client issue that is not drug related such as anorexia or a gambling addiction.		
Valid Entries	Text		
Business Rules	None		
Tables	USER_DEFINED_OPTION_LUT TREATMENT_MILESTONE		
Field Information	DASA Database (SQL) (Look-up table only)	Name: Length: Type: Name: Length: Type:	User_Def_Option_ID 3 Tinyint, null User_Def_Option_Desc 100 Varchar, null
Data Element History	Inactivated data element		7/1/07

WANT TO QUIT SMOKING NOW

Field Description	Indicates if the client is interested in quitting smoking cigarettes.		
Valid Entries	Choices Yes No	Target Codes 1 0	
Business Rules	None		
Tables	TREATMENT_MILESTONE		
Field Information	DASA Database (SQL)	Name: Length: Type:	Want_To_Quit_Smoking 1 Tinyint, null
Data Element History	Inactive Previous entries in this field have been transferred to Want_To_Quit_Tobacco		7/1/07