

## **Minority AIDs Initiative - TCE Client Level Data - Program Specific Guidance**

1. MAI-TCE grantees should think “mental health, and/or substance abuse treatment client or consumer, or SA/HIV Prevention Intervention participant” wherever the guide mentions “consumer” depending upon the program/project context.
2. Everyone participates in TRAC.  
Every client, consumer and SA/HIV Prevention Intervention participant receiving treatment services or a SA/HIV intervention will be enrolled into TRAC with the NOMs Client Level Measures performance data instrument, which is referred to as the Services tool.
3. MAI-TCE grantees must indicate a programmatic focus for each TRAC enrollee in Section H at Baseline.  
The identified program focus will serve to link each consumer/client to the three MAI-TCE service areas (mental health (illness) treatment, substance abuse treatment and substance abuse prevention). *There is a concurrent option to identify additional programmatic focus / foci.*

Indicate a predominant programmatic focus as follows:

- For SA/HIV Prevention Intervention programs, grantees will select *Substance Abuse Prevention* as the predominant focus for SA/HIV Prevention Intervention participant.
- For mental health (illness) and substance abuse treatment(s) activity, grantees will select *one predominant programmatic focus*, either mental-health (illness) treatment or substance abuse treatment

Whether or not the MAI-TCE program/project has an integrated co-occurring (mental illness/substance abuse disorder) treatment approach or whether it has a distinct mental health or substance abuse treatment focus, grantees must indicate a predominant programmatic focus for each consumer/client at baseline.

4. Timing of Reassessment and Clinical Discharge Status:  
Mental health (illness) and/or substance abuse treatment consumers/clients will receive reassessments at 6-month intervals and discharge unless discharge is within 30 calendar days of reassessment. If a reassessment interview was conducted within 30 calendar days of a discharge, a separate clinical discharge interview is not required; however, an administrative clinical discharge must be completed. (Please refer to the Question-by-Question Instruction Guide for MAI-TCE, under the following section: Timeframe for

Interview Completion and Submission > Clinical Discharge > Requirements for Collecting Administrative Clinical Discharge Data.) For SA/HIV Prevention projects see item #5 below.

5. Timing of Evidence Based SA/HIV Prevention Interventions (In Section H, Substance Abuse Prevention marked as Predominant) – Discharge/Exit (J) and Services Received (K):

Selected populations for SA/HIV Prevention interventions tend to participate in programs of shorter duration than mental health (illness) and/or substance abuse treatment programs. A program of 6 months duration would be uncommon. For this reason, the following guidance is provided to report on the SA/HIV Prevention program activities, to reflect each participant’s experience accurately.

SECTION J – Clinical Discharge Status

Read Clinical Discharge Status as “SA/HIV Prevention Intervention ‘Exit’”.

The second interview point, or ‘reassessment’, will occur at ‘exit’ following the completion of the intervention. Mark the discharge status as appropriate and also check off/mark and fill in the field by ‘OTHER (specify): \_\_\_\_\_ with the following - either the words “Completed Intervention” or “Did Not Complete.”

SECTION K - Services Received

Continue from “J” to “K - Services Received”, and from the agency record complete, “EDUCATION SERVICES SESSIONS” as appropriate for

- 1.) Substance Abuse Education and
- 2.) HIV/AIDS Education

Continue and read “3.) Other Education Services (Specify)” as *Substance Abuse / HIV Prevention Evidence Based Interventions (EBI) or DEBI (as adapted) from NREPP or the CDC Database on Evidence Based Interventions, or other.* In the ‘fill-space’ enter: title of the EBI /or DEBI /or other, the number, duration, frequency of sessions; then enter the # of sessions completed by the participant in “Number of Sessions” \_\_\_\_\_.

SECTIONS OF SERVICES TOOL TO ADMINSTER AT DISCHARGE

PERTAINING TO PREVENTION PROGRAMS for Selected Populations- (These are marked at baseline in Section H, Question 1 with only “prevention focus” for both Programmatic Focus and Predominant Focus.

On discharge from Prevention Programs upon completion of the intervention, the number of questions an individual respondent is required to complete depends on the duration and focus of

the intervention received. The questions should be determined by the grantee program and person in charge of data collection at the organization **prior to implementation.**

In addition to Record Management, Section J (Clinical Discharge) and Section K (Services Received), the following table shows which other sections of the Services tool to administer based on the intervention duration:

INTERVENTION DURATION	QUESTIONS TO ADMINISTER FROM MAI-TCE SERVICES TOOL
Single Session Intervention	From Section H <ul style="list-style-type: none"> <li>• Administer 2 to 5 items from Questions H4-H14 on Attitudes &amp; Knowledge which relate to the intervention</li> </ul>
Multiple Session Brief Intervention (29 days or less duration)	From Section H <ul style="list-style-type: none"> <li>• Administer all Attitudes &amp; Knowledge Questions H4-H14</li> </ul>
Multiple Session Long Intervention (30 days or longer duration)	<ul style="list-style-type: none"> <li>• Administer all sections of the Services Tool, (as required for discharge)</li> </ul>

6. Mental health (illness) and/or substance abuse treatment may also report on SA/HIV Prevention “Services Received” in Section K EDUCATION SERVICES SESSIONS: Mental health (illness) and/or substance abuse treatment providers delivering SA/HIV Prevention interventions to consumers/clients enrolled in treatment services may also complete, “Education Services Sessions” in Section K (at 6 month reassessment/or discharge as appropriate) per #5 above.
  
7. “Services Received” in Section K - Peer Support Services-All Project Areas: In “other” describe relevant peer oriented activities such as serving as a member of a project advisory group, or working as a peer in the project, related area, or recovery initiatives.