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Getting started with GAIN ABS via the Idaho WITS/GAIN Interface

For all authorized users of the WITS/GAIN Interface
A companion training aid to "WITS Idaho Provider TIPS 2008"

- **Please go to page 9 of "Getting Started with the GAIN ABS" to begin your step by step guided navigation of the GAIN Assessments.**

- **It is highly recommended that you make a hard copy of this Document to keep by your computer as a ready reference when you have questions regarding functionality.**

Getting Help

A tiered response system has been put in place and will remain consistent through out implementation and continued support for users of the WITS/GAIN Interface Implementation.

- **Reference the appropriate WITS/GAIN User Guide(s).**
- **Contact your Agency's "WITS/GAIN Agency Administrator." The WITS/GAIN Agency Administrator(s) are trained in the WITS system and are available to assist you with troubleshooting. If you are unsure of the WITS/GAIN Agency Administrator for your agency contact your supervisor or Agency Director.**
- **If the WITS/GAIN Agency Administrator is unable to resolve your problem, he/she can contact the Idaho Statewide WITS/GAIN Administrator for assistance.**
- **If the Idaho Statewide WITS/GAIN Administrator is unable to resolve the problem, he/she will contact the WITS Vendor (FEI) helpdesk or the GAIN vendor (Chestnut Health Systems) helpdesk for additional support.**

Save this Website address to your Favorites, so that you may readily access the WITS/GAIN Website for ongoing updates:
http://www.healthandwelfare.idaho.gov/Medical/SubstanceUseDisorders/WITSGAIN/tabid/781/Default.aspx

Getting Started with GAIN ABS

A Step-by-Step Introduction

11/13/2008

Getting Started with GAIN ABS

GAIN ABS (Assessment Building System) is the new, web-based service that supports the GAIN family of assessment instruments. After several years in development and testing, it is now available for your use.

About This Guide

Getting Started with GAIN ABS is intended to help you quickly become productive with the GAIN ABS system.

In this guide you will learn how to:

- Log into GAIN ABS
- Select a client to work with (or add a new client)
- Conduct a new GAIN assessment or edit an existing assessment.
- Run GAIN reports (other than the GRRS)
- Generate a GRRS (GAIN Recommendation and Referral Summary) report after completing a GAIN-I assessment
- Use the text editing features of the GRRS
- Use the DSM-IV editing features of the GRRS
- Use the ASAM placement grid
- Print customized portions of the GRRS and other instruments

To get the most out of this guide, we recommend that you print it and work through it at your workstation, logging into GAIN ABS over the internet and practicing each of these operations. Please refer your question to your GAIN ABS Contact.

This lesson does NOT provide clinical information and does not replace GAIN Administration training or certification as a GAIN Administrator.

Please refer clinical questions to your GAIN Local Trainer. If you are a Local Trainer, refer clinical questions to GAINClinical@chestnut.org.

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Introduction

Before we get started, let's introduce a few basic concepts:

Your local GAIN ABS Contact

One of your colleagues has been selected to be your local GAIN ABS contact. Your GAIN ABS contact will be your first source of information about GAIN ABS and will:

- Provide you with your login name and temporary password
- Make sure your internet access policies will permit you to reach GAIN ABS
- Forward your questions regarding the GAIN ABS to the ABS Support team at ABSSupport@chestnut.org or (309) 451-7777.

Hardware considerations

Our goal is to make GAIN ABS work on almost any computer that has an Internet connection. We will continue to make upgrades as needed to meet this goal...

- *Screen resolution*: GAIN ABS is best viewed with a resolution of 1024 x 768 or higher.
- *Browsers*: Microsoft Internet Explorer 6 or later. Mozilla Firefox 2.0 or later also works. We are working on issues with the following browsers: Safari, Opera, MacIE, and Google Chrome.
- *Pop-ups*: If you have a pop-up blocker you will need to configure it to permit pop-ups from https://www.gainabs.org.

Using Keyboard and Mouse

GAIN ABS is best utilized with a keyboard and mouse. The single most widely used method will be interaction with the mouse for common clicking functionality. Keyboard navigation can also be used by pressing the "Tab" to guide the user through the assessment variables. In some cases, this can be shown with a dotted line surrounding the variable in question. ***Note***: *Some portions of the keyboard navigation and entry process may yield less than desirable results and is best served in minimal use.*

Creating sample clients

For test and training purposes, you will probably be creating client records, assessments and reports that don't represent real clients and that you will eventually want to delete. We encourage you to make it easy to identify these sample clients by beginning their Client Numbers with a "#" – for example, #23456.

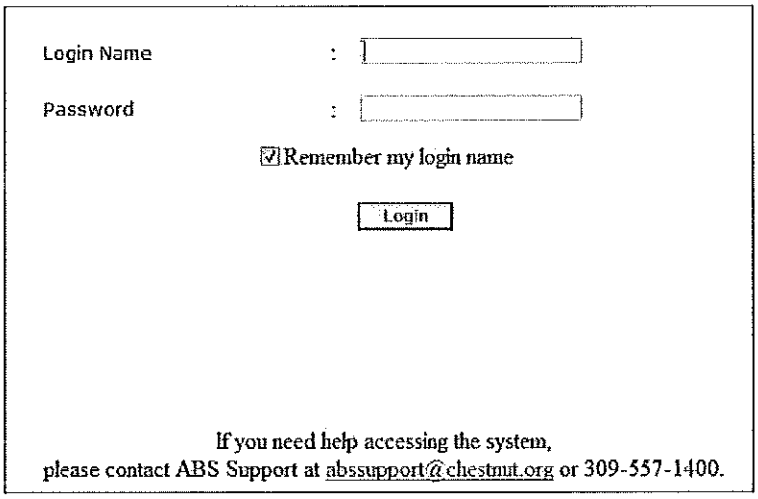
Security

Because the data that you will be entering into GAIN ABS includes personal information about your clients that must be protected from unauthorized disclosure (because of professional ethics regulations like HIPAA and 42 CFR Part 2), your connection to GAIN ABS over the internet is encrypted to reduce the possibility of anyone intercepting it. You'll notice that the GAIN ABS

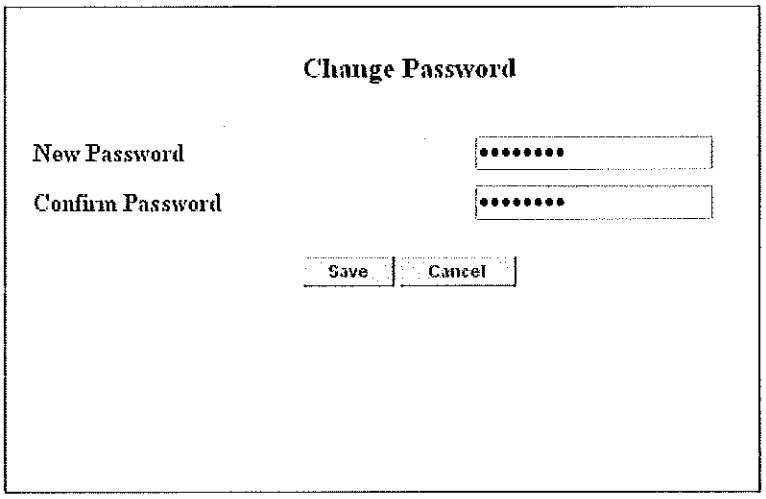
web address starts with "https" (HyperText Transfer Protocol – Secure) rather than the more common "http," which tells your browser to use SSL (Secure Sockets Layer) encryption. Be sure to include the "s" in https.

Logging In

Step 1: Go to the GAIN ABS login screen at https://www.gainabs.org/ and use the login name and password your local GAIN ABS contact gave you.



Step 2: The first time you log into the GAIN ABS, you will be prompted to create a new password.



Tip: *Your password must be 8 characters or longer and include at least one upper and one lowercase letter and at least one number or special character. To protect your account, you will be prompted to change your password every 90 days.*

GAIN ABS is a secure site that contains protected health information (PHI). Be sure to follow proper precautions for accessing and storing PHI as required by HIPAA or your organization's policies.

Do not share your password with anyone!

Logging In (continued)

Step 3: The first time you log into GAIN ABS, you will need to read and accept the **Disclaimer, Confidentiality, Acknowledgment & Copyright Notice**. Click **Accept** to acknowledge that you have read this page. If you do not wish to accept the disclaimer, click **Deny** and the system will log you off.

GAIN ABS

Disclaimer, Confidentiality, Acknowledgments & Copyright Notices

This is a standardized bio-psycho-social assessment designed to help clinicians gather information for diagnosis, placement, and treatment planning. As with any self-report, the GAIN is limited by the veracity of the individual respondent's answers; it should be collected by someone certified in GAIN administration, combined with other information and interpreted by clinical or other qualified personnel prior to taking any specific actions.

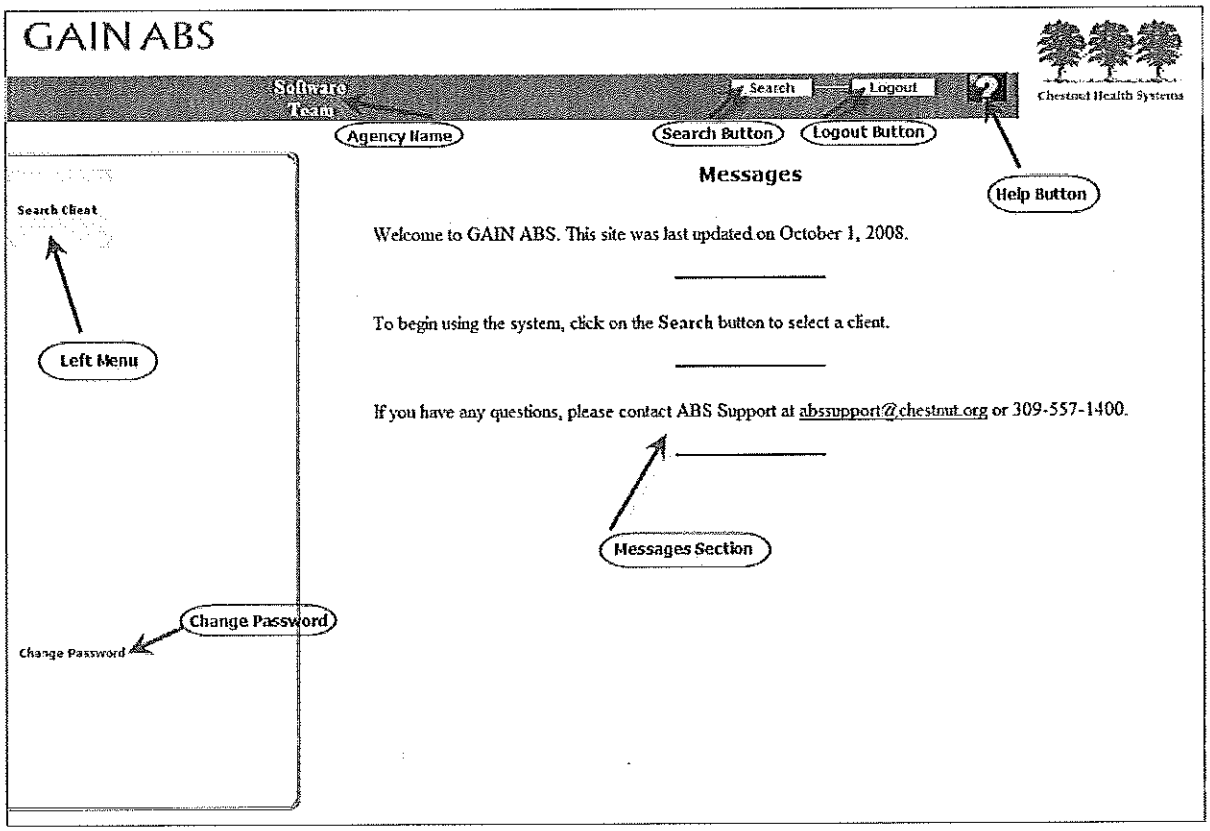
The information on this form must be handled in the strictest confidence and will not be released to unauthorized personnel. In accordance with the provisions of the Privacy Act of 1974 and the Health Insurance Portability and Accountability Act (HIPAA) of 1996, unauthorized disclosure can result in fines for each violation. All staff with access to the specific answers on this form must understand this restriction and agree to resist sharing specific answers without prior written consent.

The current version of this instrument was developed by Dr. Michael Dennis and others at Chestnut Health Systems. Its development was supported by grants and contracts from the Center for Substance Abuse Treatment, Interventions Foundation, National Institute on Alcohol Abuse and Alcoholism, and National Institute on Drug Abuse. It also incorporates several scales and questions based on the National Family Violence Survey, National Household Survey on Drug Abuse and work by the American Psychiatric Association and the American Society of Addiction Medicine, as well as input from many individuals fully acknowledged in the manual and on the website referred to below.

Deny | Accept ← >Click<

Main Page

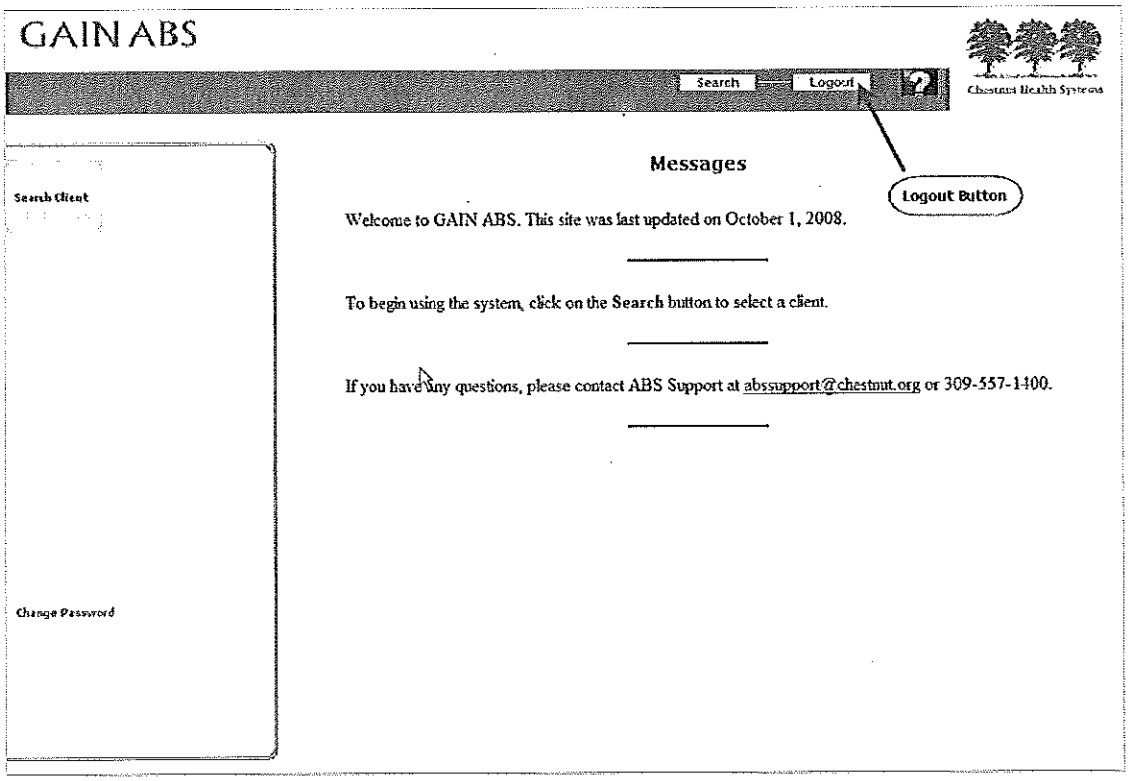
After you login and accept the Disclaimer, you will arrive at your Main page. Your Main page is your jumping-off point for activities in GAIN ABS. Your Main page has many features, some unique, some that you will find on many GAIN ABS pages. Let's take a look around.



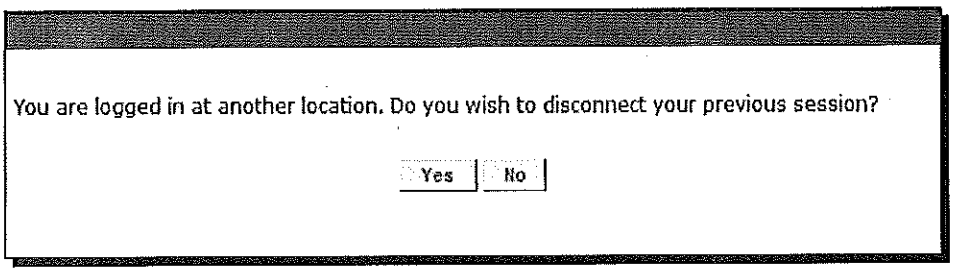
- Near the top of the page is the "**Top Menu**" which is easily identified as it is the green field and includes the **Agency Name** identifier, **Search**, and **Logout** buttons. We'll look at what functions they serve in a moment. In addition to these options, each page navigated upon includes a **Help** button.
- The **Messages** section will include helpful suggestions and important notices – it's always a good idea to check them over each time you log in.
- The **Left Menu** is available on several GAIN ABS screens and provides you with various kinds of functionality. Depending on your role you may have more than one item on your Main screen Left Menu.
- The **Agency Name** identifier is shown in yellow text and will been shown on each page navigated to (hereafter; for the purpose of this reference, the agency name will not be shown).
- Click **Change Password** to change your password.

Main Page: Logging Out

Important: Always use the logout button (rather than clicking the "x" in the upper-right hand corner of your browser) to exit the GAIN ABS system. This allows GAIN ABS to accurately record the end of your session and mark your account as offline. Clicking the logout button returns you to the main login screen.



If you close your browser while using GAIN ABS without first logging out, then try to log in at another location, you will receive the following message:



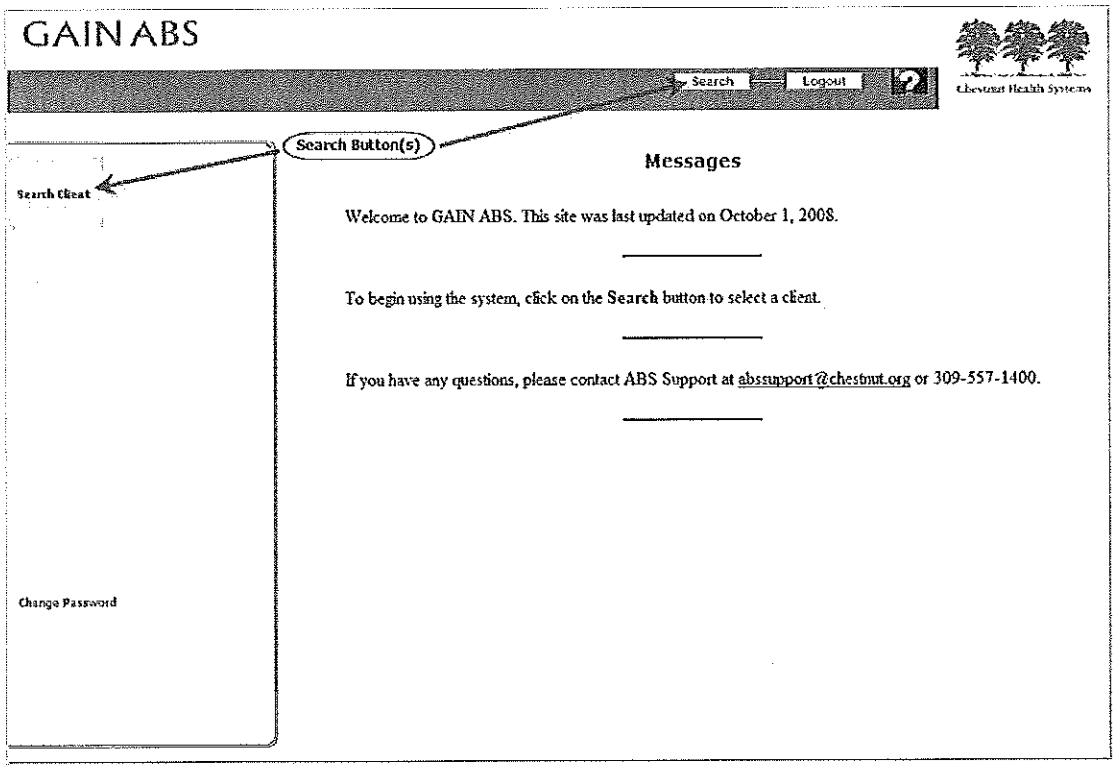
If you see this message, click **Yes** to log out of your previous session and start a new GAIN ABS session. If you click **No** you will not be logged in to a new session.

WARNING!!!

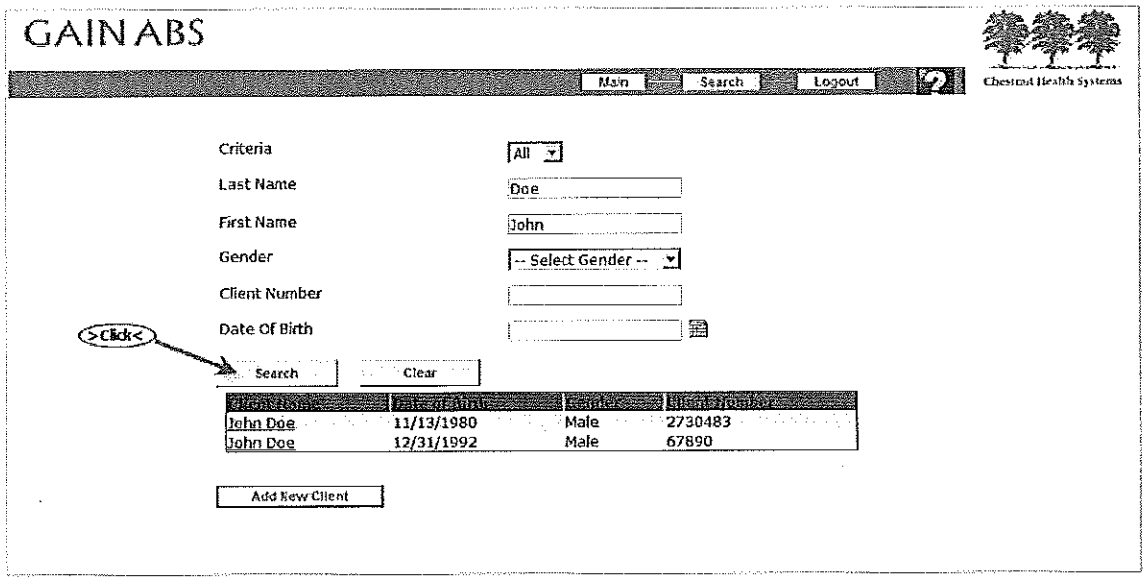
For security purposes, if your session is inactive for more than 20 minutes, GAIN ABS will automatically log you out.

Searching for a Client

Step 1: In order to correctly manage your agency, the user must first perform a search to ensure the client in question isn't already in the GAIN ABS system. This will aide in avoiding duplicate records. To continue, click the **Search** button in the top menu or the **Search Client** link on the left menu.

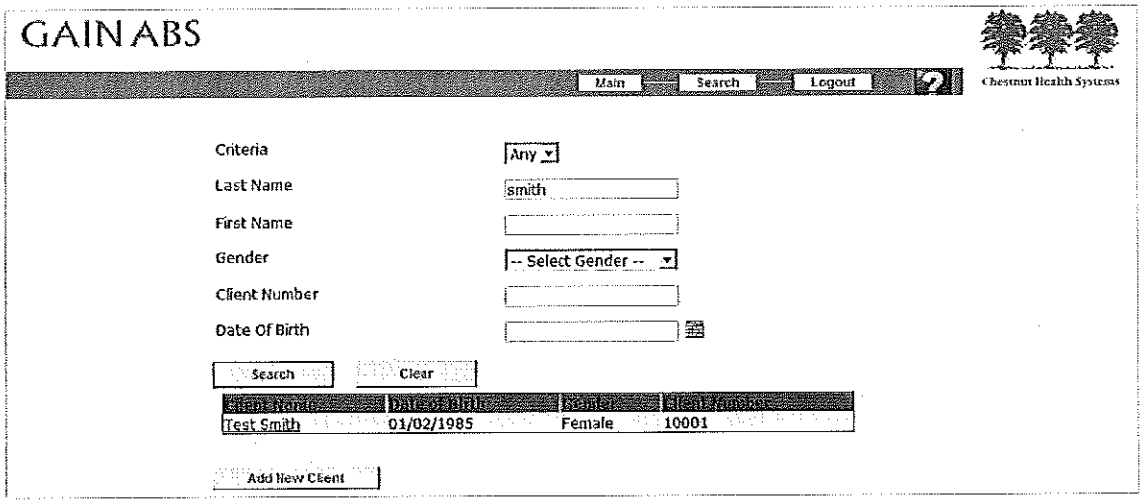


Step 2: Enter the client's last name, first name, client number, or date of birth. The more information you enter, the more accurate your search will be (If you leave all the fields blank, the search will return all accessible clients). When you have finished entering your search criteria, click the **Search** button.



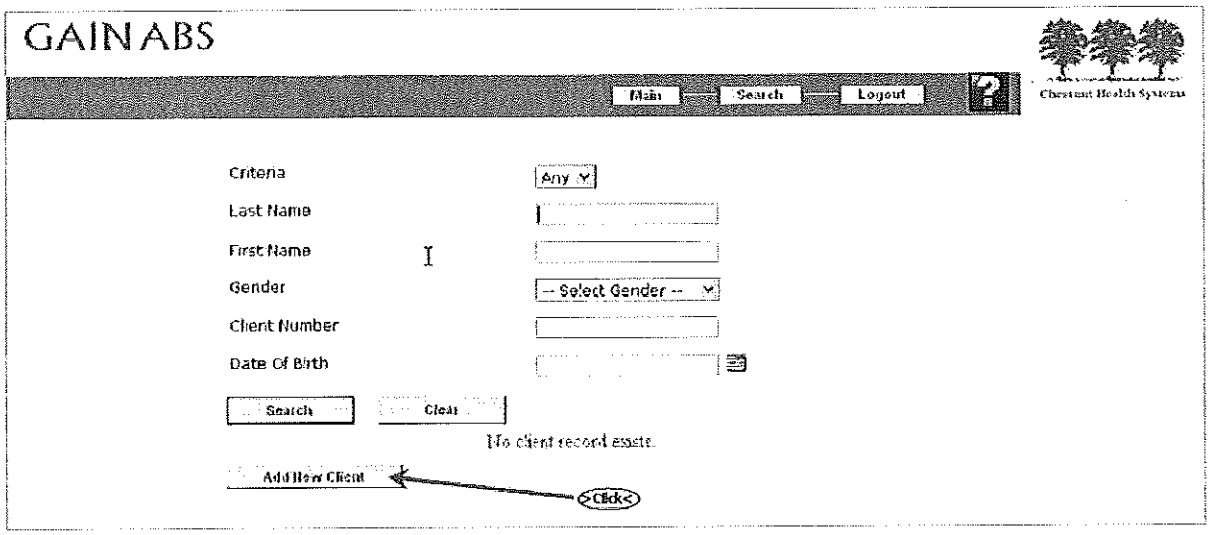
Searching for a Client (continued)

Step 3: Client information that matches your search will display. When the client you are looking for is found, click their name and go to their Client Record View (described in the Client Record View section).

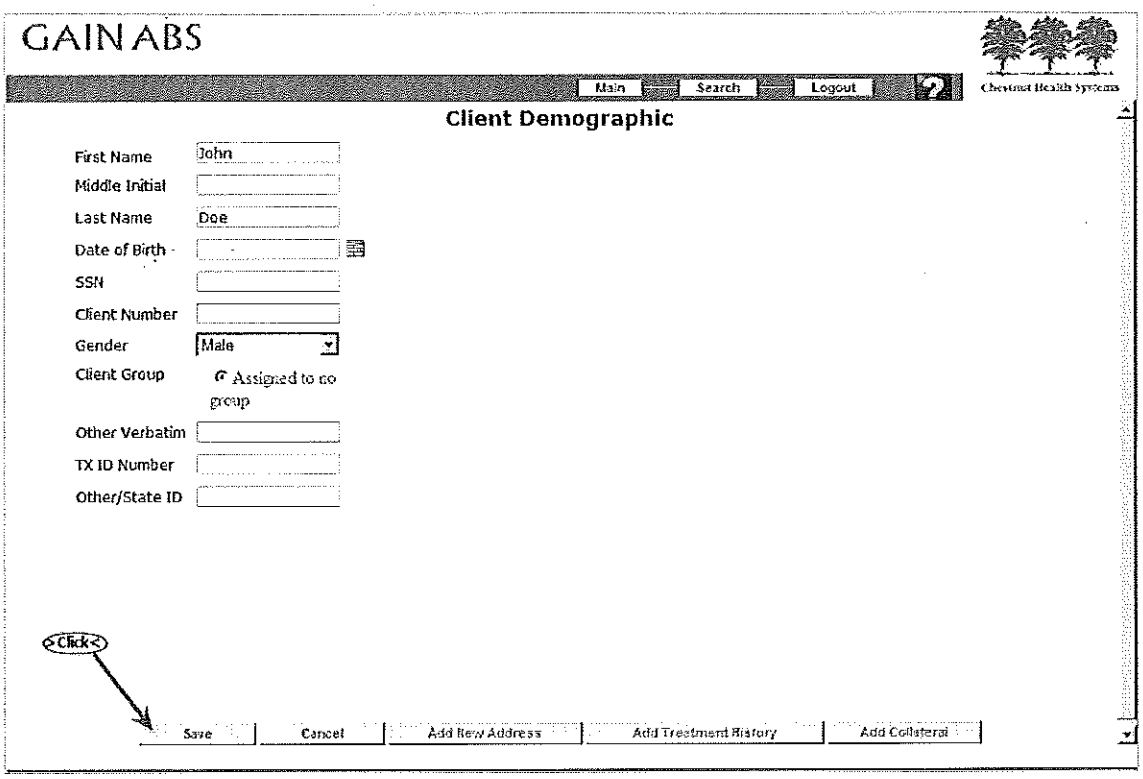


Creating a New Client Record

Step 1: If the client you want to work with is not found, you must create a new client record before you can proceed. If you have permission to create new clients, the Add New Client button will appear after you have conducted a search. To begin creating a new client record, click the Add New Client button to go to the Client Demographic Screen.

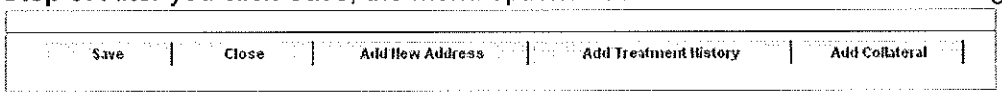


Step 2: On the Client Demographic Screen, enter the client's basic information. Enter at least the first name, last name, client number and gender, and click Save.



Creating a New Client Record (cont.)

Step 3: After you click Save, the menu options at the bottom of the screen change.

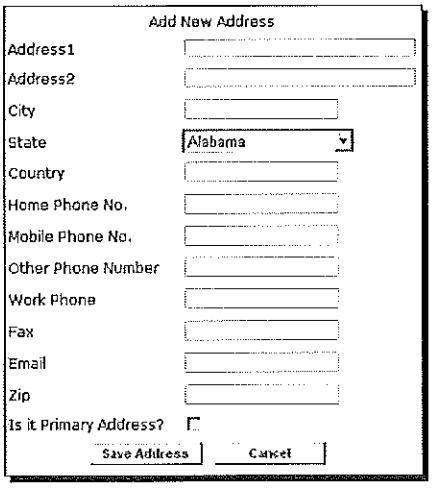


You may add additional address, treatment history or collateral contact information now or you can come back later.

If you choose to add additional information, click on the **Save** button when you are finished, then click Close to return to the Client Demographic screen.

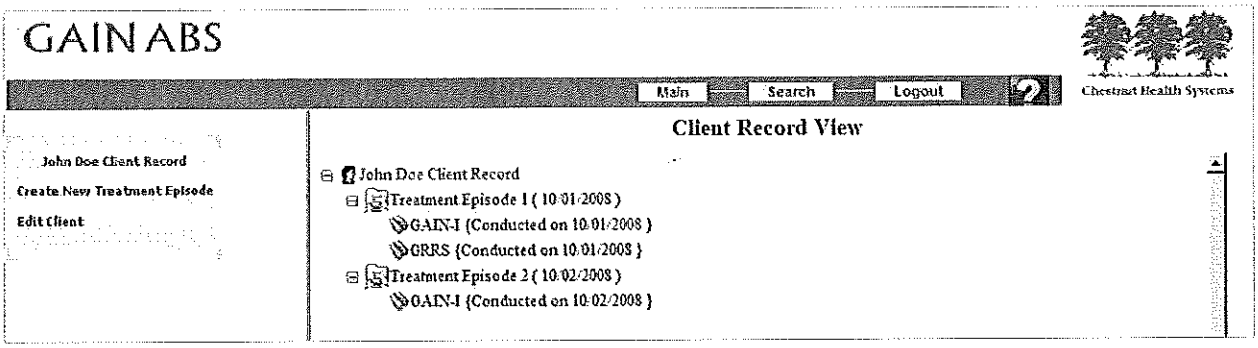
To return to the Client Demographic screen without saving, click the **Cancel** button.

From the Client Demographic screen, click **Close** to go to the client record view screen.



Creating a New Treatment Episode

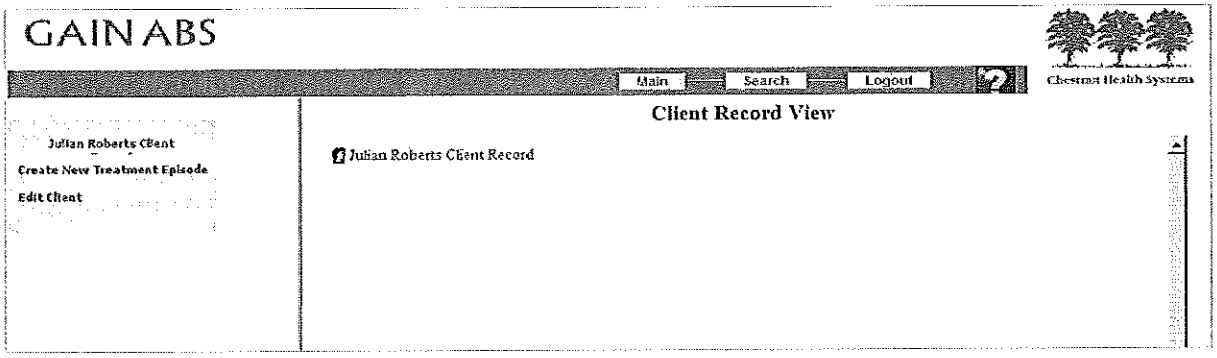
The client's history of treatment episodes displays in the **Client Record View** screen. From here, you can create new treatment episodes, add client records, and build reports.



The client's history of treatment is outlined on the right side of the screen, with assessments and major reports listed under each treatment episode. The left menu options will change depending on what you select in the outline.

For example, if you select the client name at the top of the tree ("John Doe Client Record" in this example) you have the option to either **Create New Treatment Episode** or **Edit Client** by switching to the Client Demographic screen.

Step 1: If you created a new client record in the last step, your **Client Record View** screen will look similar to the one below. If you selected an existing client, it may look more like the one above.

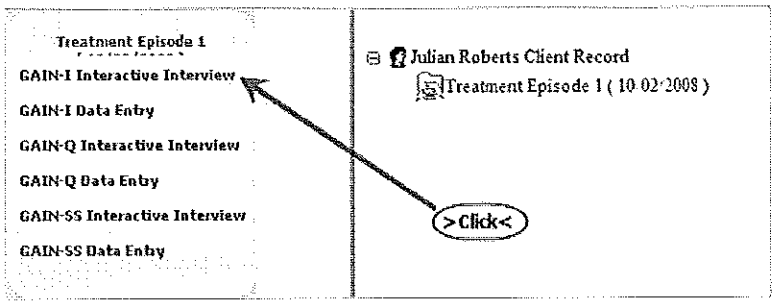


Step 2: A new treatment episode is created with the current date and is selected in the current record. After creating a new client, the options that display in the left menu include all the initial assessments that can be administered, including the GAIN-I and GAIN-Q, in both interactive and data entry mode. Each treatment episode can have only one GAIN-I or GAIN-Q because each is an intake interview, administered when a client enters a treatment episode.

A GAIN-Q cannot be added to a treatment episode that already contains a GAIN-I because the GAIN-Q should not be used for follow-up to a GAIN-I. However, a GAIN-I can be completed after a GAIN-Q, and each treatment episode can have any number of related GAIN M-90 or GAIN-QM follow-up interviews. These options appear in the left menu after the client has completed a GAIN-I or GAIN-Q.

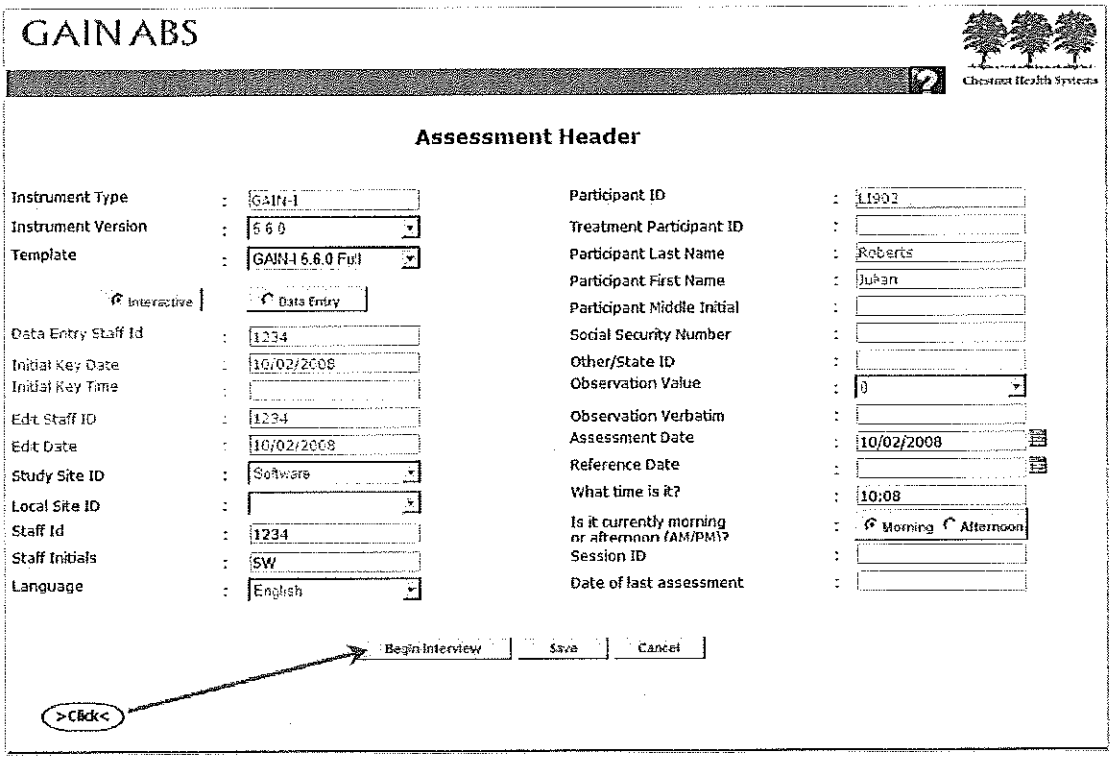
Conducting an Interactive Assessment

Step 1: With the new treatment episode selected, click the GAIN-I Interactive Interview option in the left menu.



Step 2: The Assessment Header screen contains information used to identify the client, the interviewer, and the date and time of the interview.

Most of the fields in the Assessment Header screen are prefilled and not editable. If you do not wish to conduct a full GAIN-I, select a different template. Be sure to check that the date and time are correct for your location.



To create an interview now and conduct it later, click Save to create the interview and return to the client record screen. If you don't want to create the new interview now you can click Cancel to return to the client record screen without creating the interview.

To continue, click Begin Interview.

Conducting an Interactive Assessment (cont.)

Step 3: Conducting an interactive interview in GAIN ABS consists of going to a screen, reading questions to the client, coding their responses and adding any notes of your own, and continuing to the next screen.

To begin, read the introduction to the client and respond to any questions, then click **OK**.

GAIN ABS

Chestnut Health Systems

Introduction

Purpose: This assessment is designed to help us track how you are doing before, during and after treatment or counseling. The information we collect will only be used for your treatment and to help us evaluate our own services.

Format: This initial assessment has questions about what you have done, what services you are using and what you currently want from the program, either directly or through referral. You will be able to say you do not know or refuse to answer any question that you do NOT want to answer.

Length: Depending on how much has been going on in your life, it will take about 1-2 hours to complete. You will be able to take a break if you need to.

Privacy: As with everything you do in treatment, your answers are private and your confidentiality is protected under the privacy act of 1974 and the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

Confidentiality: All research and clinical staff with access to your answers understand this restriction and have agreed to resist sharing your specific answers without your prior written consent. This includes giving information to family members, other individuals, other treatment agencies, social work agencies, criminal justice agencies and other agencies. (READ ONLY IF APPLICABLE: We have also obtained a certificate of confidentiality to prevent us from being forced to give any information to the court.) There are, however, two exceptions. First, we are mandated to report child abuse or if you are presently a danger to yourself or others. Second, officials from the federal government have the right to audit us to check to make sure we have protected your safety and accurately reported what we have done.

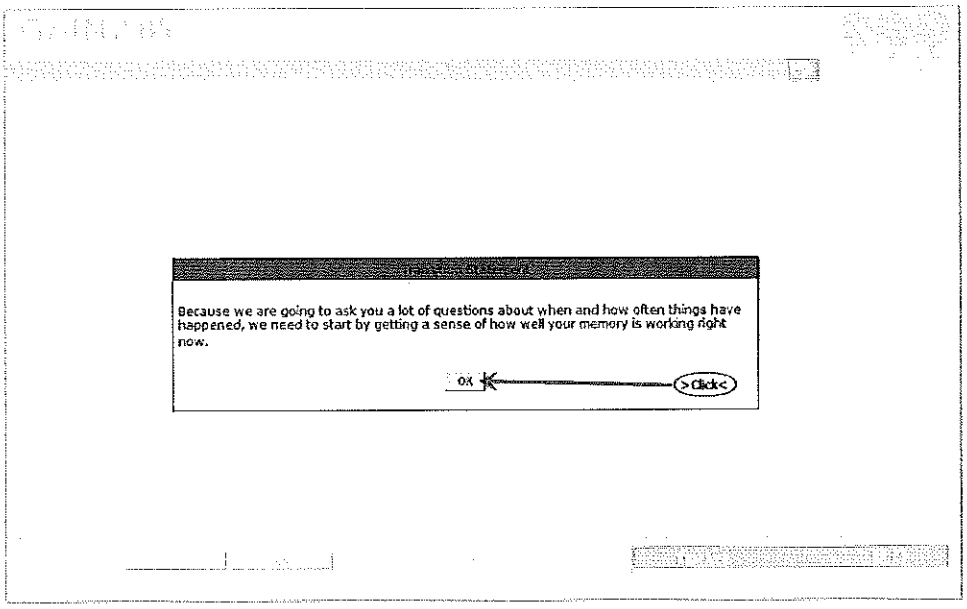
Any questions?

OK

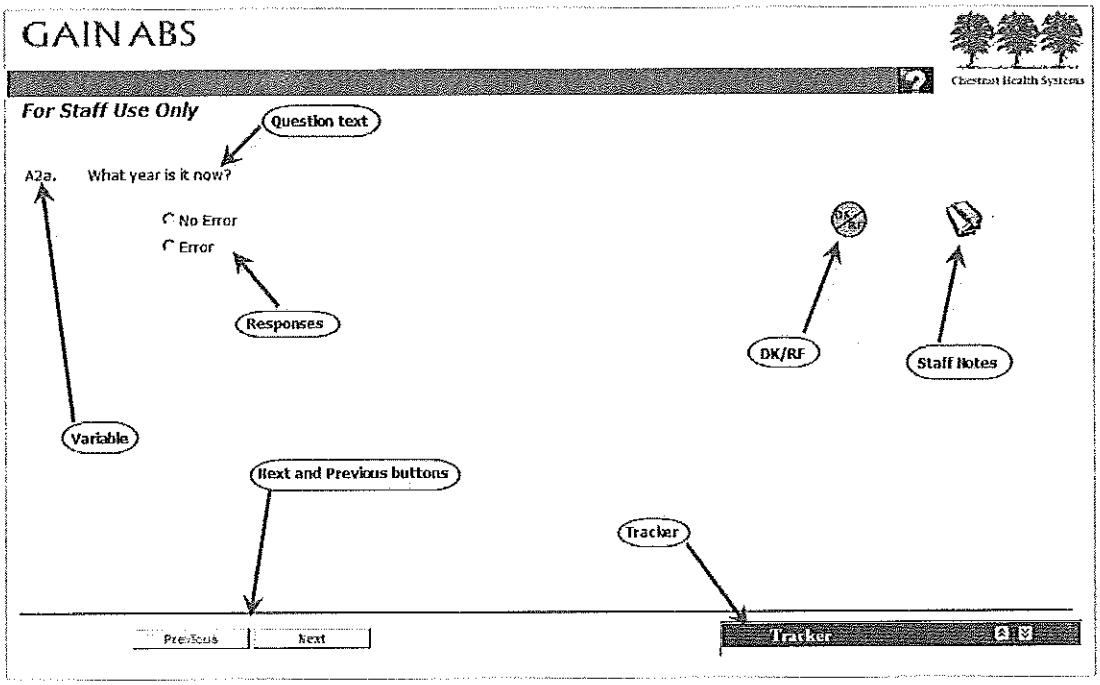
>Click<

Getting Around
Transition Statements

The first GAIN-I screen you will come to after the introduction contains a transition statement like the one below. You will see screens like this at the beginning of each new section and at several other places during the interview. Everything on the screen except the transition statement is grayed out. Read the statement to the client, then click **OK** to continue with the interview.



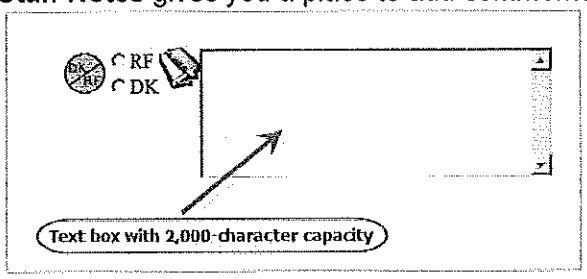
After you click **OK** on the transition statement, you see a typical GAIN ABS assessment page.



Continued on next

- The **variable** (sometimes referred to as item number) uniquely identifies each in the GAIN.
- The **question text** is what you read to the client.
- **Response options** are the options available for the client to respond. In GAIN ABS responses take the form of buttons, drop-down boxes, or verbatim text boxes.
- The **DK/RF** icon below records "don't know" and refused responses. These response options appear when you click the icon.

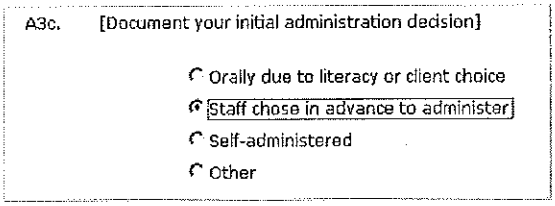
- **Staff Notes** gives you a place to add comments or observations.



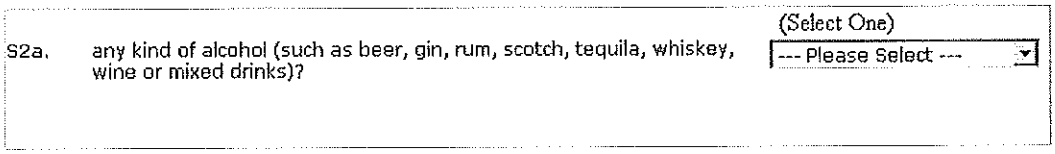
- The **Next** and **Previous** buttons allow you to move one screen at a time through the interview. Each screen features an item or series of items.
- The **Tracker** is a tool that follows your progress through the interview and gives you several navigation options.

Coding Responses

There are several ways to code your client's responses. When a radio-button is offered, select the desired response by clicking on the circle or the text label.



Drop-down list boxes: Click on the down arrow to view the list of response options displayed.



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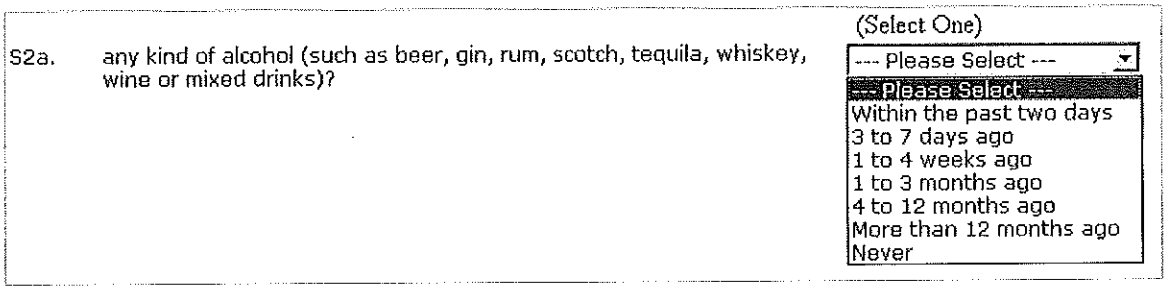
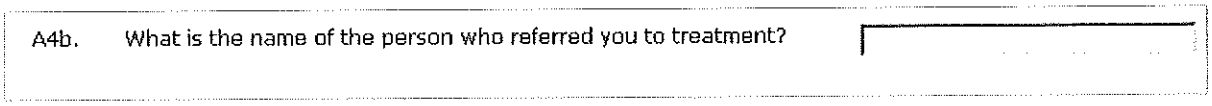
Then use your mouse to select the option you want to code.

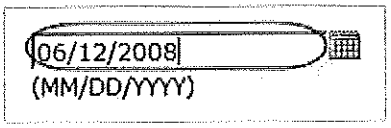


Coding Responses (cont.)

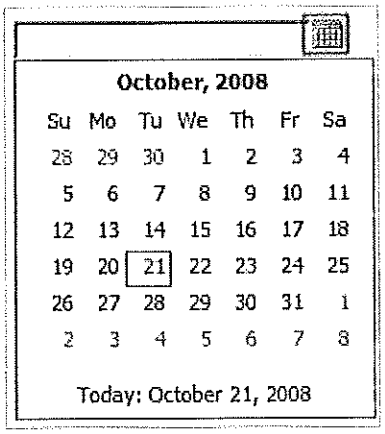
Verbatim responses: When a text box is offered, click on the text box and type the participant's response (verbatim response, number of days or times, etc.). Text boxes can also be used to enter dates, times and numbers. Items requiring a response in numbers, however, will accept only numeric characters, like "1" or "25" – letters (e.g., "one") will not be accepted.



When an item requires a date, you can either choose to type in the date or use the **calendar control to** the right of the text box.

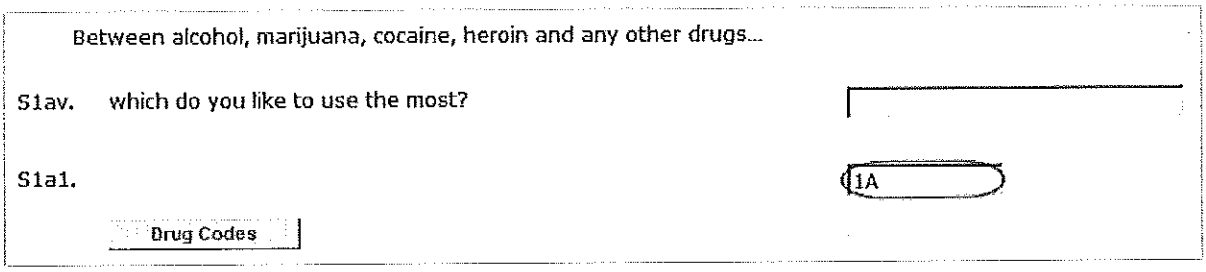


Calendar Control: When you hover your mouse over the calendar control, you will see instructions about how to navigate between months or years.

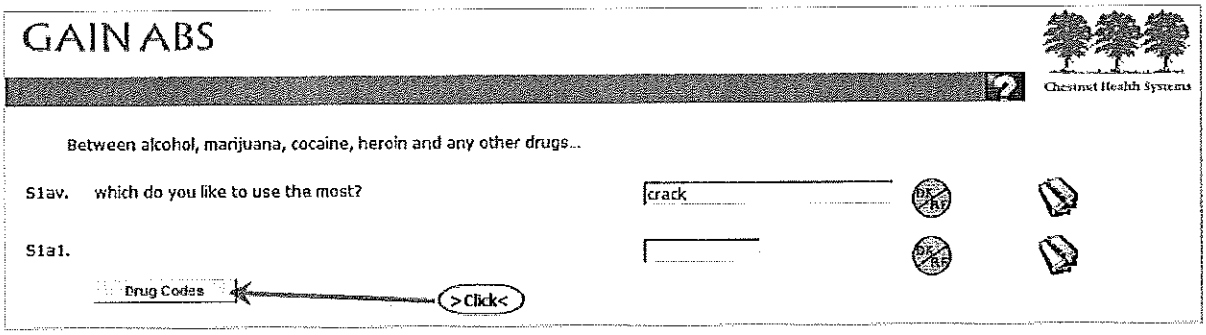


Coding Responses (cont.)

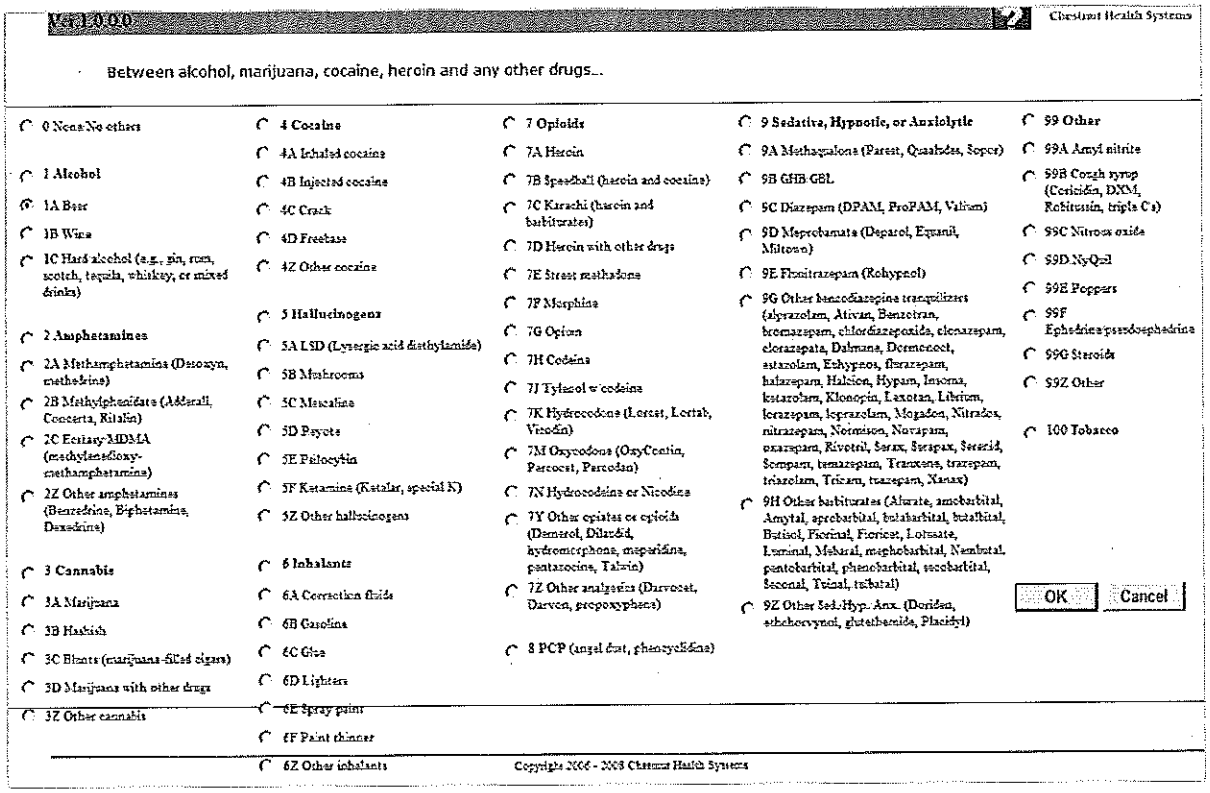
In the example for S1a1 below, you are asked to enter the drug code for the client's preferred substance. You may respond by typing the code into the text box (e.g., "1A" for beer)



or clicking on the **Drug Codes** button to look it up. A new window that lists all of the substances and their corresponding codes will open. Select the appropriate code and click **OK** to return to the original screen. The code you selected will be entered for you in the text box.

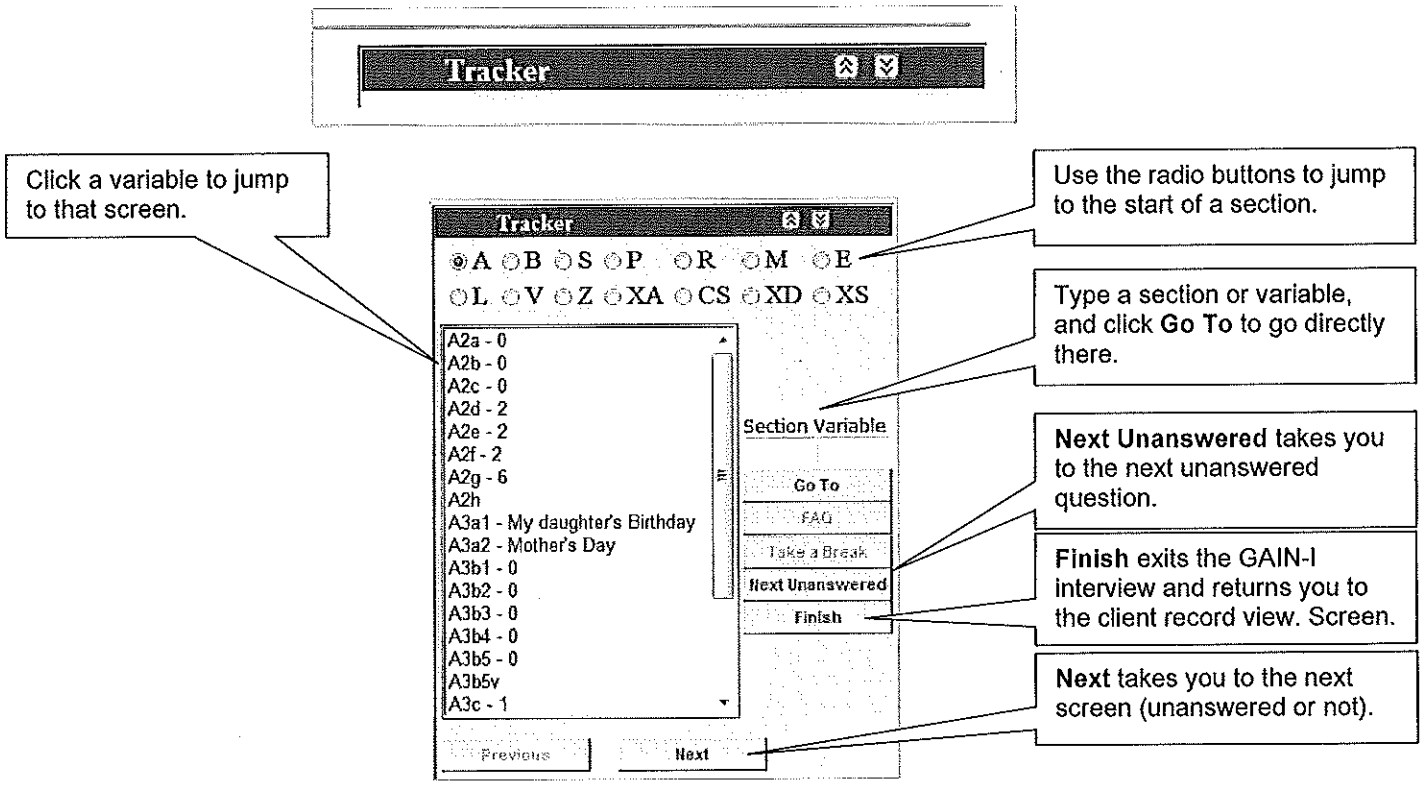


The **Drug Codes** box shown below



The Tracker

The Tracker is a device that displays items and responses and gives you several useful navigation options. You can move the tracker around the screen by clicking and dragging it. To open it, click the up arrows ; to close it, click the down arrows . If you prefer to use the keyboard, click CTRL+T.



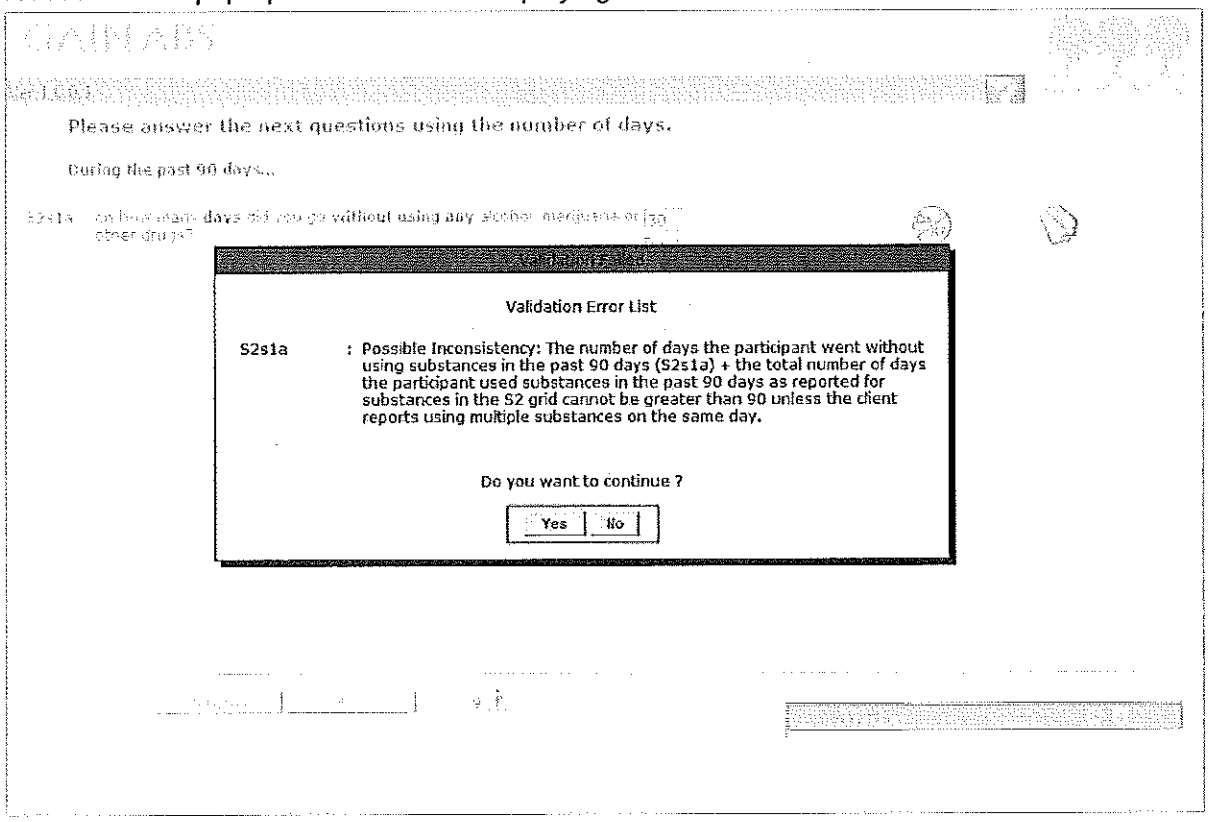
Inconsistencies and Validation Errors

GAIN ABS tracks hundreds of relationships between responses to help you identify possible inconsistencies. For example, if you code S2c1 as "0", (During the past 90 days, on how many days have you used marijuana, hashish or THC?), GAIN ABS will check the response for S2c (When was the last time, if ever, you used Marijuana?). If S2c was coded "Past 90 days..." a possible inconsistency exists and will be flagged and included in the Validity Report.

If a possible inconsistency is identified, a small icon like this ⚠ appears to the right of the **Next** button at the bottom of your screen, with a count of the number of inconsistencies just to its left:

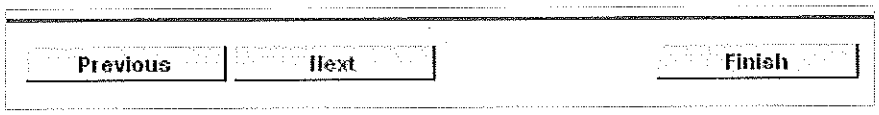
When an inconsistency occurs during the interview, the validation window will pop up with an explanation of the inconsistency and you will be asked, "Do you want to continue?" If you want to resolve the inconsistency, click No and you will return to the screen to clarify and edit the client's responses. After you make the change and click Next, the inconsistency will be marked "resolved" and that particular validation error will not pop up again.

If you do not want to resolve the inconsistency, click Yes and you will be taken to the next screen. It may be a good idea to make a staff note if you have an explanation for responses that seem inconsistent but aren't. If your clinical judgment is that you should let the existing values stand, you can go to the next set of questions. The inconsistency will be marked "Overridden" and that particular validation error pop-up window will not display again.

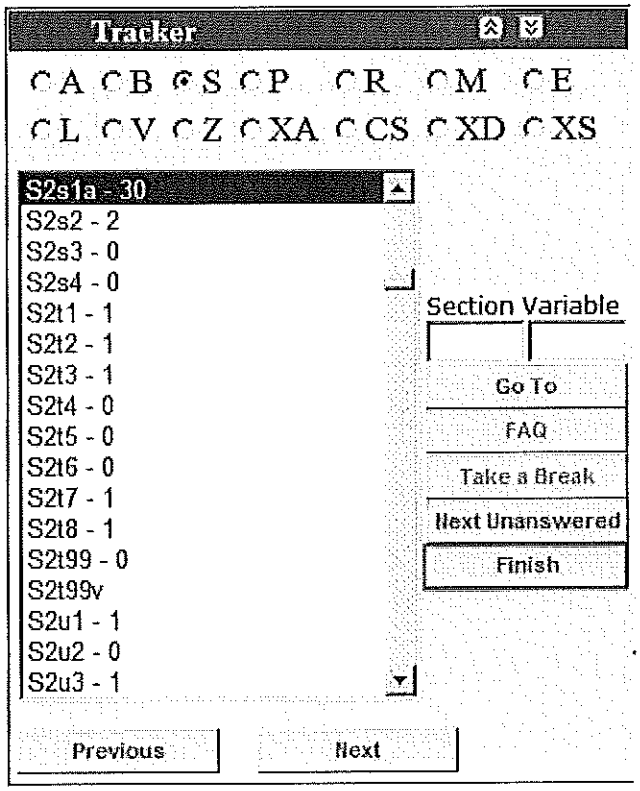


Finishing

After the last question in an interview, a **Finish** button will appear to the right of the Previous and Next buttons. Clicking on the Finish button will return you to the client's client record view screen.



To exit the interview before it is complete, click the **Finish** button on the tracker.



GAIN ABS Reports – Overview

After you conduct a GAIN interview using GAIN ABS, several reports will become available to you in the left menu of the Client Record View. When you click on an interview, the reports are available in the left menu of the client record view. The reports available for each type of interview are:

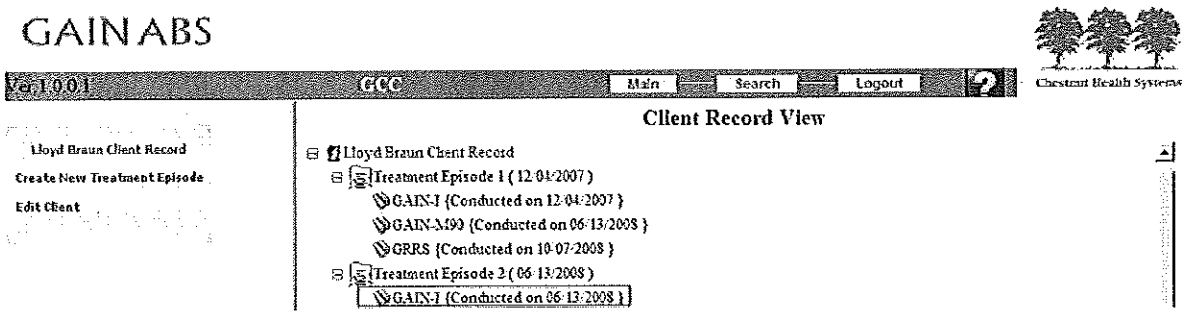
GAIN Interview Type	Available Reports
GAIN-I	Validity Report Personal Feedback Report (PFR) GRRS Report GPRA Report Full Assessment Report
GAIN-M90	Full Assessment Report Validity Report GPRA Report
GAIN-Q	Full Assessment Report Personal Feedback Report (PFR) QRRS Report
GAIN-QM	Full Assessment Report
TxSI	Full Assessment Report

Generating GAIN ABS Reports

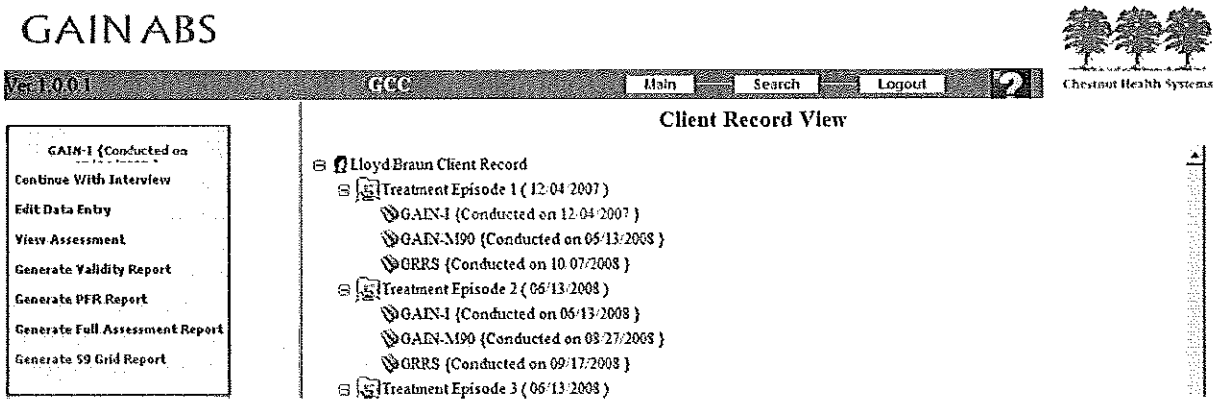
The basic instructions for creating ABS reports are similar for all report types. Some types of reports require additional options before printing, so please refer to the individual reports sections for specific information about each type of report.

Note: Your pop-up blocker must be disabled in order to generate reports!

Step 1: In the Client Record View, select the desired interview. For this demo, we will use the GAIN-I conducted on 6/13/2008.



Step 2: The left menu expands so you can view all the available reports and other activities that are availble for the selected interview. We will discuss the different types of reports and unique characteristics later.



Generating GAIN ABS Reports (cont.)

Step 3: After a few moments, ABS will generate the selected report in a new window. Some reports display in an ABS-specific format and can be exported and saved in a new format; others display as Adobe Acrobat (.pdf) files.

You will use one of the toolbars shown below to save, print, or export the file. The type of toolbar that displays with the report depends on the report type requested.

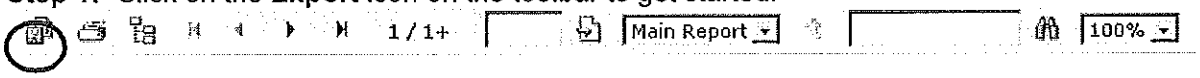
ABS Toolbar

Adobe Acrobat Toolbar

Printing/Saving GAIN ABS Reports

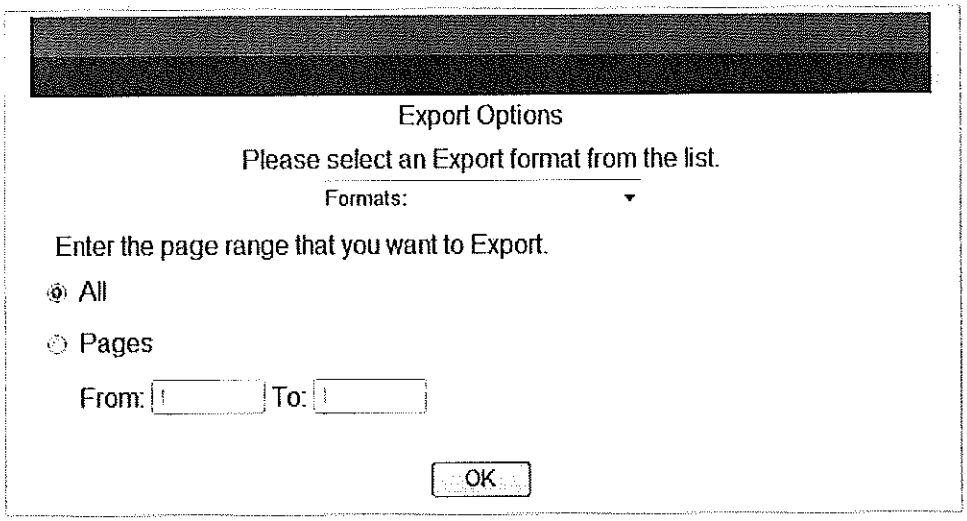
To save a report to a different format, export it to that format and use the tools appropriate to that format to save it.

Step 1: Click on the **Export** icon on the toolbar to get started.

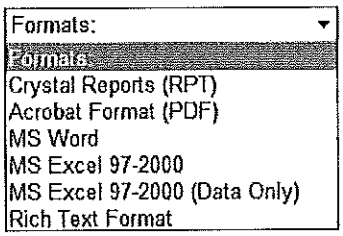


Continued on next page...

Step 2: A window will open to permit you to select the export format and which pages to export.



Step 3: Click on the **Formats** list to display the export format options:



- To save an unedited copy of report, select the Acrobat Format (PDF) option.
- To save a copy of the report and edit it later, select the MS Word or one of the MS Excel options if you have Microsoft Office installed, or the Rich Text Format option to edit with a non-Microsoft word processor.

After selecting the **Export Format** and the **Page range**, click **OK** to continue.

Step 4: The report displays with the appropriate editing menu or toolbar, depending on the format that you selected. Edit and save your report, then close the window containing the report to return to the Client Record View.

> **Note:** Be sure to observe your local guidelines for protecting your client's privacy when printing or saving PHI.

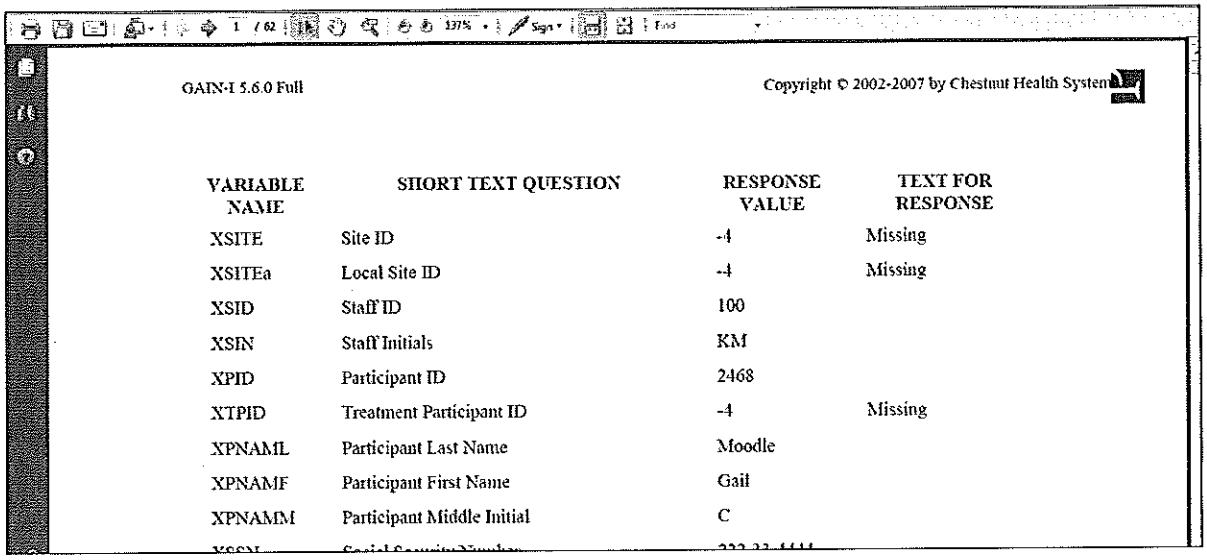
Descriptions of the different types of reports and additional instructions begin on the next page.

Full Assessment Report

When you select the **Full Assessment Report** for any completed or in-progress GAIN interview, a listing of every question and its answer is generated and displayed. The four-column report format is the same for every member of the GAIN family of instruments:

- **Variable Name** lists the GAIN variables in the order in which they are asked
- **Short Text Question** gives an abbreviated version of the question text – for the complete text as it was read to the client, see a paper copy of the instrument in question
- **Response Value** is exactly how the client response is coded
- **Text For Response** interprets these codes, where appropriate. For example, a code of "1" will commonly mean "yes" but can have other meanings, like "male" or "1+ years ago." The "Text For Response" column explains what the response value stands for.

  Note: The "Missing" entry may refer to an optional value or a required question that wasn't answered.



GAIN-I 5.6.0 Full

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VARIABLE NAME	SHORT TEXT QUESTION	RESPONSE VALUE	TEXT FOR RESPONSE
XSITE	Site ID	-4	Missing
XSITEa	Local Site ID	-4	Missing
XSID	Staff ID	100	
XSIN	Staff Initials	KM	
XPID	Participant ID	2468	
XTPID	Treatment Participant ID	-4	Missing
XPNAML	Participant Last Name	Moodle	
XPNAMF	Participant First Name	Gail	
XPNAMM	Participant Middle Initial	C	

Printing/Saving the Full Assessment Report

Follow the instructions in the **Generating GAIN ABS Reports** section (p.26) to select and create the Full Assessment Report.

The Full Assessment Report will display in a new window as an Adobe Acrobat file (.pdf). Use the Acrobat toolbar to save or print the report.

Personal Feedback Report (PFR)

When you select the **PFR** (Personal Feedback Report) option for a GAIN-I/Q interview, a report designed to support Motivational Enhancement Therapy/Cognitive Behavioral Therapy (MET/CBT) or other motivational strategies is generated and displayed.

1 / 5 Main Report 100% BusinessObjects

Therapist: Karen Marsh
Client: Gail Moodle

GAIN-I Personalized Feedback Report (GI-PFR)

This report summarizes some of the information that you gave us in your interview on 5/12/2008.

We want to give you an opportunity to review what you've told us and make any changes or additions. As you and I work together in reviewing and discussing this specific personal information, we can help you develop strategies for dealing with alcohol or other drugs that fit your individual needs.

Extent of Use :

You reported that your favorite substance to use was "crack" and that you needed treatment for "crack" marijuana" and "alcohol". You told us that you first used alcohol or other drugs at age 11. You told us that in the past year, you had used:

- Alcohol
- Marijuana
- Crack, rock or freebase cocaine
- Other forms of cocaine
- Anti-anxiety drugs or tranquilizers

You have been in substance treatment 1 time(s) before.

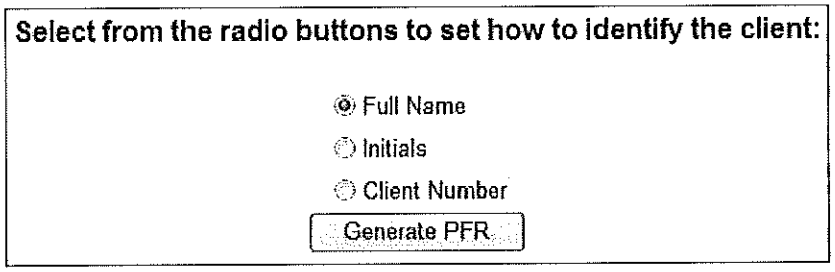
You reported that in the past 90 days you used the following substance(s):

- alcohol on 45 day(s), with the heaviest drinking episode being about as much as 16 drink(s) over a 10 hour period. This means that only 7% of adults your age used this much or more.
- marijuana on 80 day(s), with the heaviest use being about as much as 6 joint(s) over a 10 hour period. This means that only 2% of adults your age used this much or more.
- crack, rock or freebase cocaine on 76 day(s), with the heaviest use being about as much as 5 rock(s) over a 16 hour period. This means that less than one percent of adults your age used this much or more.

You reported that in the past week you had not tried to quit using alcohol or other drugs.

Printing/Saving the PFR

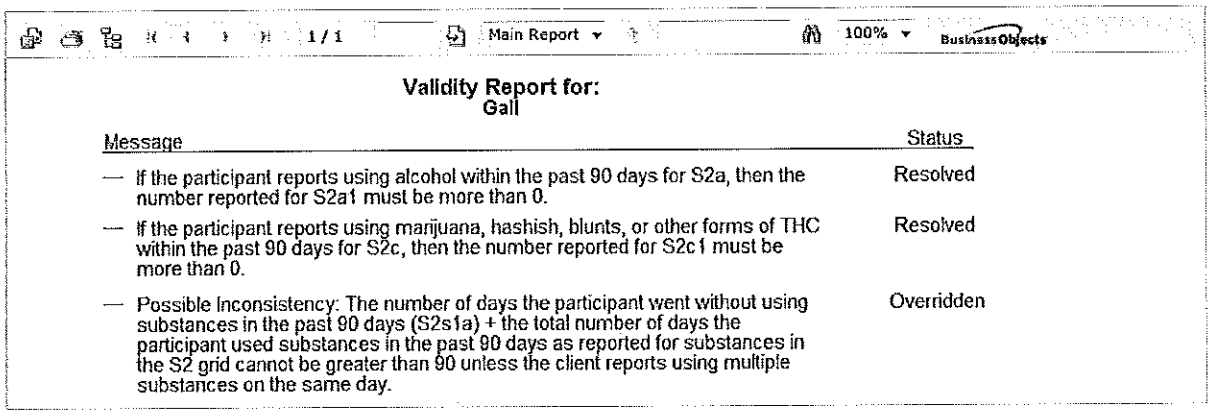
The PFR requires one additional step before it can be printed. Follow the instructions in the **Generating Reports** section. After completing step 2, you will need to select how you want to identify the client, and then click Generate PFR.



Step 3: The PFR displays in a new window. Use the toolbar to print an unedited version, or follow the instructions in the **Printing and Saving Reports** section to export and save it to another format.

Validity Report

When you select the **Validity Report** for a GAIN-I or GAIN-M90 interview, the system generates a list of any inconsistencies or validity errors that were identified from the interview.



1 / 1 Main Report 100% BusinessObjects

Validity Report for:
Gail

Message	Status
— If the participant reports using alcohol within the past 90 days for S2a, then the number reported for S2a1 must be more than 0.	Resolved
— If the participant reports using marijuana, hashish, blunts, or other forms of THC within the past 90 days for S2c, then the number reported for S2c1 must be more than 0.	Resolved
— Possible Inconsistency: The number of days the participant went without using substances in the past 90 days (S2s1a) + the total number of days the participant used substances in the past 90 days as reported for substances in the S2 grid cannot be greater than 90 unless the client reports using multiple substances on the same day.	Overridden

Each message includes a status:

Resolved: the user has changed one or more of the items to eliminate the inconsistency.

Overridden: the user has chosen to continue the interview, leaving inconsistent items unchanged.

Hit: there is a possible inconsistency that was not resolved during the interview.

As you are reviewing the possible inconsistencies that are listed as hits, you may find some actual inconsistencies that you want to correct. If you exit the Validity Report and edit the interview to resolve the inconsistency, the status for that possible inconsistency will change to resolved.

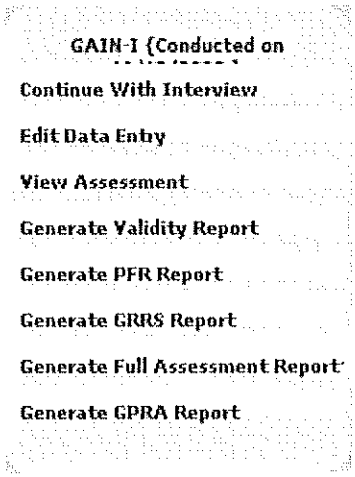
Printing/Saving the Validity Report

Follow the instructions in the **Generating Reports** section to select and create the Validity Report.

The Validity Report will display in a new window. Use the toolbar to print an unedited version, or follow the instructions in the **Printing and Saving Reports** section to export and save it to another format.

When you are finished, close the report and return to the Client Record View screen.

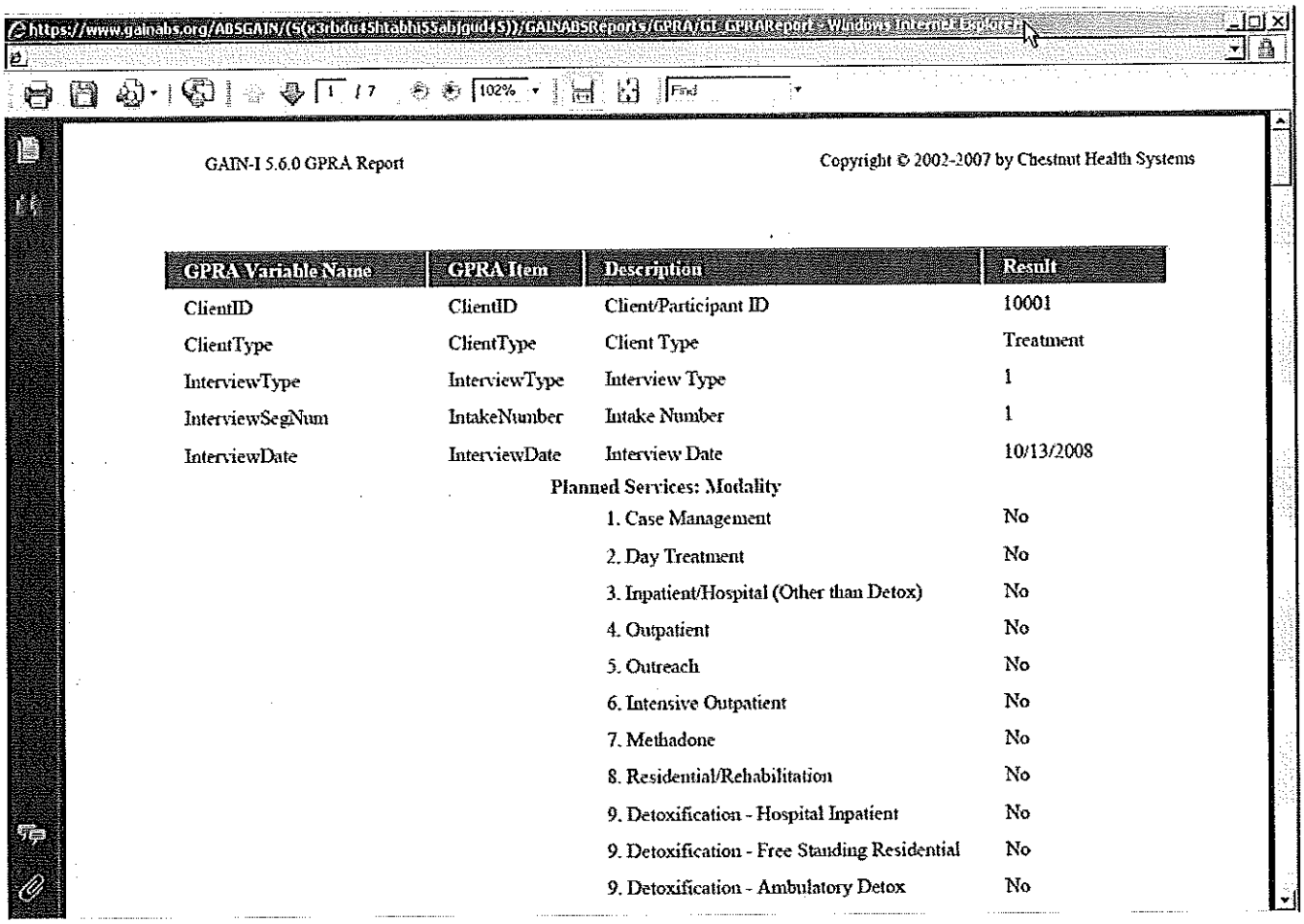
GPRA Report



If you are part of a CSAT-funded program, you may be required to collect Government Performance Results Act of 1993 (**GPRA**) data and enter it into CSAT's GPRA web site. GAIN ABS simplifies this process by:

1. Embedding the GPRA questions into the CSAT versions of the GAIN-I and GAIN-M90 assessments.

Continued on next page...



GAIN-I 5.6.0 GPRA Report

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GPRA Variable Name	GPRA Item	Description	Result
ClientID	ClientID	Client/Participant ID	10001
ClientType	ClientType	Client Type	Treatment
InterviewType	InterviewType	Interview Type	1
InterviewSegNum	IntakeNumber	Intake Number	1
InterviewDate	InterviewDate	Interview Date	10/13/2008
		Planned Services: Modality	
		1. Case Management	No
		2. Day Treatment	No
		3. Inpatient/Hospital (Other than Detox)	No
		4. Outpatient	No
		5. Outreach	No
		6. Intensive Outpatient	No
		7. Methadone	No
		8. Residential/Rehabilitation	No
		9. Detoxification - Hospital Inpatient	No
		9. Detoxification - Free Standing Residential	No
		9. Detoxification - Ambulatory Detox	No

2. Producing a **GPRA Report** that can be printed and used as a guide when you enter data into the CSAT GPRA website.

Printing/Saving the GPRA Report

Follow the instructions in the **Generating Reports** section to select and create the GPRA Report.

The GPRA Report will display in a new window with the Adobe Acrobat Reader toolbar. Use the toolbar to print an unedited version, or follow the instructions in the **Printing and Saving Reports** section to export and save it to another format.

When you are finished, close the report and return to the Client Record View screen.

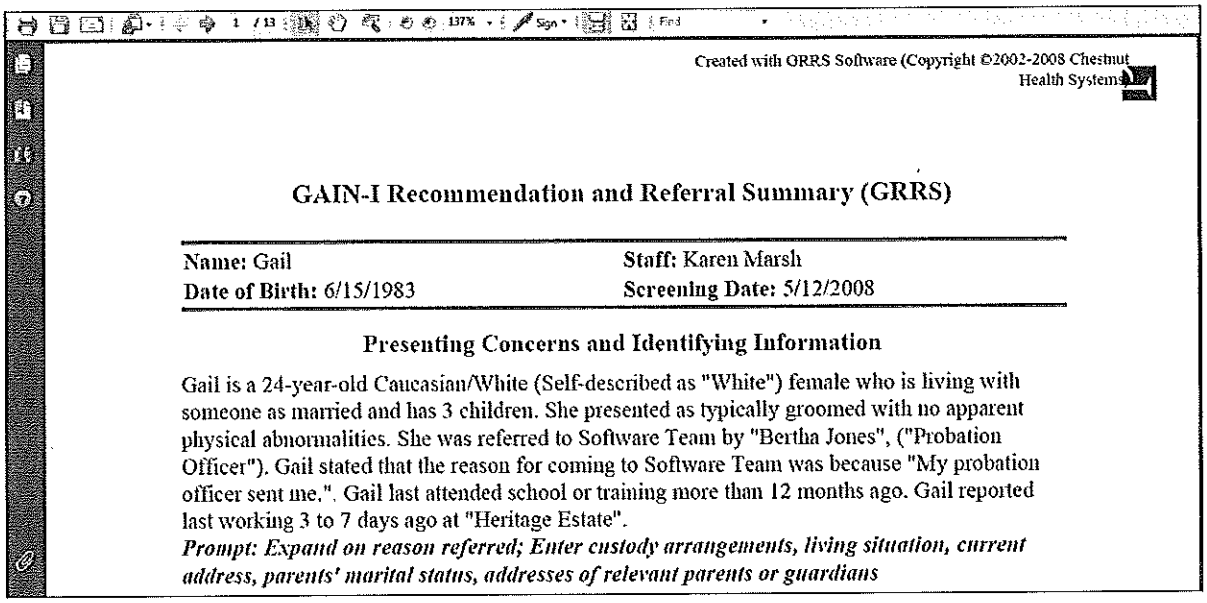
GRRS Report

When you select the **GRRS Report** for a GAIN-I interview, the system generates a biopsychosocial summary of the interview. This summary can be used for supporting diagnostic impressions, treatment plans, and placement decisions.

The GRRS Report is organized into several sections, beginning with the client's identifying information and general client background:

- Presenting Concerns and Identifying Information
- DSM-IV/ICD-9 Diagnostic Impression
- Evaluation Procedure
- Substance Use Diagnosis and Treatment History (ASAM criteria A)
- Level of Care and Service Needs (ASAM 6-dimension criteria B)
- Summary Recommendation

Please see the **GAIN Manual** for more detailed information about interpreting the GRRS Report.



Created with GRRS Software (Copyright ©2002-2008 Chestnut Health Systems)

GAIN-I Recommendation and Referral Summary (GRRS)

Name: Gail	**Staff:** Karen Marsh
Date of Birth: 6/15/1983	**Screening Date:** 5/12/2008

Presenting Concerns and Identifying Information

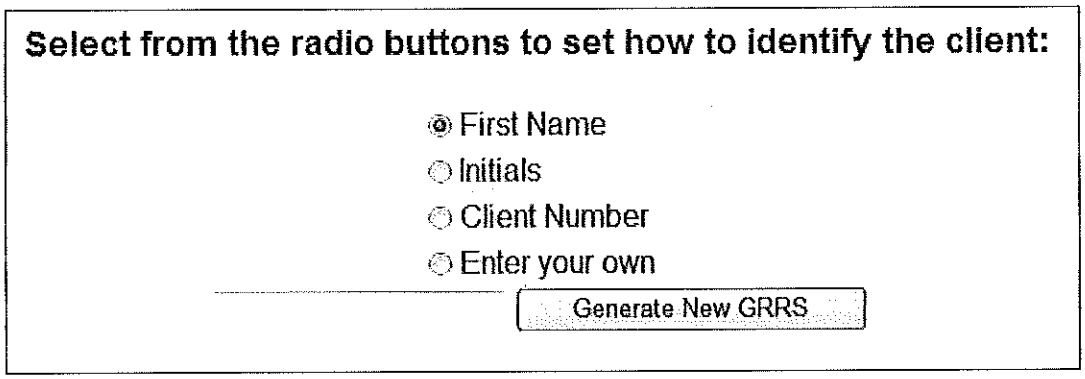
Gail is a 24-year-old Caucasian/White (Self-described as "White") female who is living with someone as married and has 3 children. She presented as typically groomed with no apparent physical abnormalities. She was referred to Software Team by "Bertha Jones", ("Probation Officer"). Gail stated that the reason for coming to Software Team was because "My probation officer sent me.". Gail last attended school or training more than 12 months ago. Gail reported last working 3 to 7 days ago at "Heritage Estate".

Prompt: Expand on reason referred; Enter custody arrangements, living situation, current address, parents' marital status, addresses of relevant parents or guardians

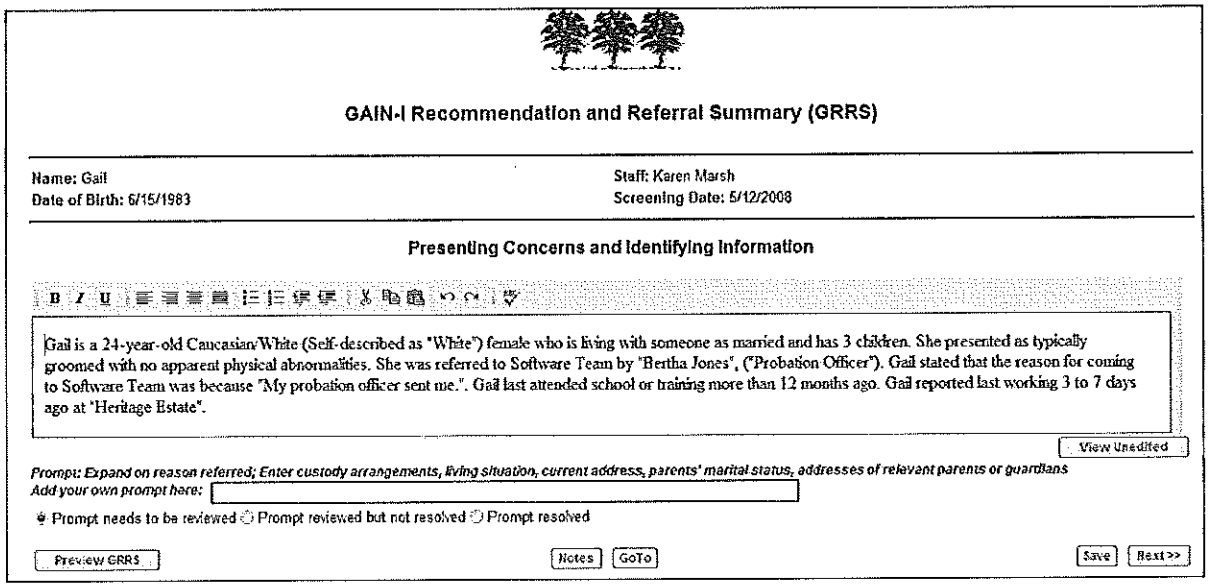
GRRS Report (cont.)

Follow the instructions in the **Generating Reports** section to select and create the GRRS Report. The GRRS Report requires on additional step before it can be printed. Follow the instructions in the Generating Reports section.

Next, select how you want to identify the client, then click Generate New GRRS.



The GRRS Report will display with the text for the Presenting Concerns and Identifying Information section in a text box with an editing tool-bar.

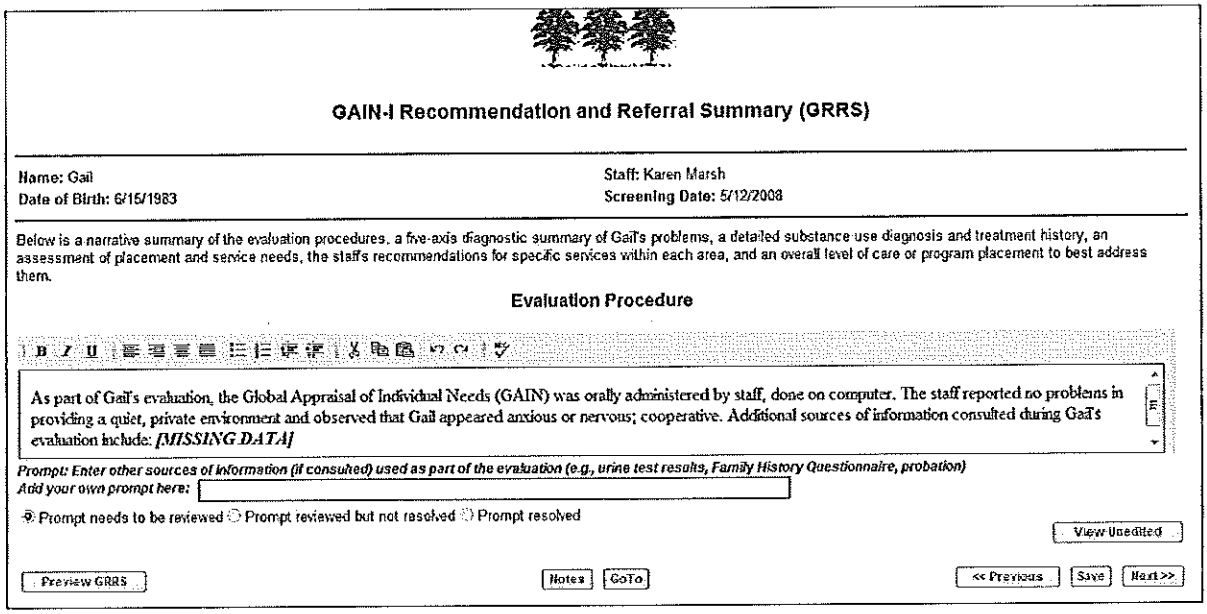


After the GRRS Report displays there are three steps to completing a printed or electronic copy:

1. Move from screen to screen, reviewing and editing the contents or appearance of the generated GRRS Report and responding to each prompt.
2. Select which sections of the GRRS Report to print or save.
3. Print or save the GRRS Report.

Navigating the GRRS Report

At the bottom of each GRRS Report screen are several navigation buttons.

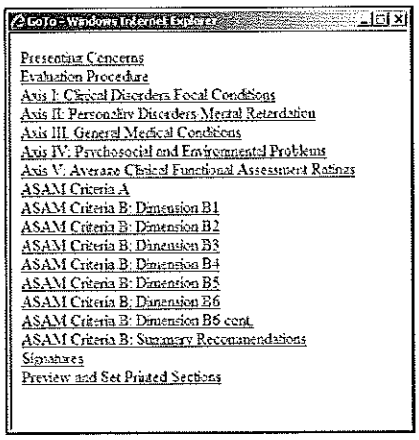


Next and Previous – these buttons let you page through the report review/edit process one screen at a time.

Save – any editing that you do is automatically saved when you click on the Next or Previous buttons. The Save button saves your changes before you leave a screen if you want to ensure that your progress is saved.

GoTo – jump to any of the editing screens or to the final screen where you can preview the report and make decisions about which pages to print.

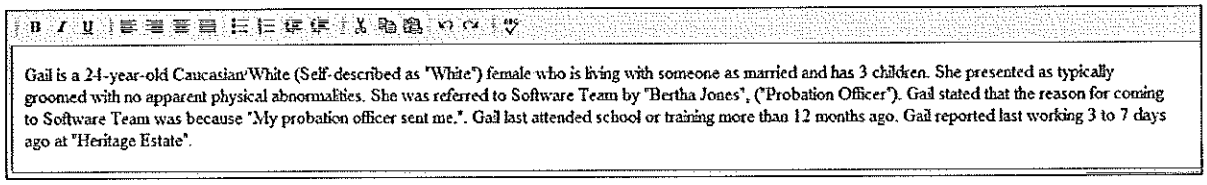
When you click on the GoTo button another window will open. Click the page you want to jump to or click on the Close button to return to the current screen.



Editing the GRRS Report: Overview

Most of the text of the GRRS Report is displayed in an editing and formatting box like you see with the Presenting Concerns and Identifying Information section.

Step 1: Review the contents of the document and note any changes you want to make.

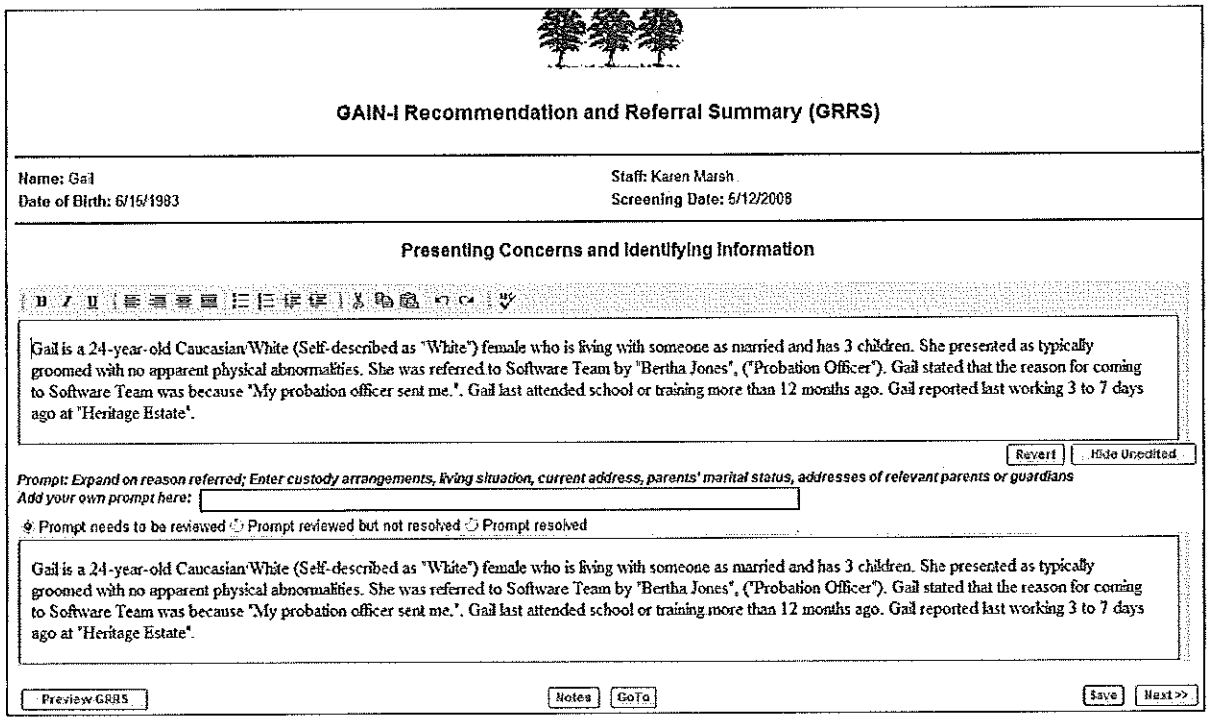


Step 2: Make desired changes in the text boxes. The editing and formatting toolbar at the top of the text box can be used just like the ones in word processing software like Microsoft Word.

1 – Character formatting - bold, italic, underline
2 – Paragraph formatting - alignment, bullets, numbering, indent
3 – Cut, copy, paste
4 – Undo, redo
5 – Spelling – online dictionary includes all terms used in all GAIN instruments

Editing the GRRS Report: Overview (cont.)

Step 3: After you've edited a section, you can compare your new copy with an unedited version by clicking on the **View Unedited** button. When you click on the **View Unedited** button, a second text box will appear below the editing and formatting box with the original text for that section.



To restore some text that you've deleted, copy and paste the unedited text into the text box: highlight the unedited text that you want to copy, then hold down the Ctrl key while you press C. Next, move the cursor to the place in your edited text that you want to insert the copied text, and hold down the Ctrl key while you press V.

When you are finished with the original text, you can hide its window by clicking on the **Hide Unedited** button.

To undo all your edits and return your edited text to its original state, click the **Revert** button.

Editing the GRRS Report: Prompts

As you work through your review of the GRRS report, you will notice that underneath the text to be edited is one or more prompts with suggestions about items to review, enhancements to make or collateral information to add. There is also a box for adding your own prompts (such as specific information to add from collateral sources). Each prompt can be marked "needs to be reviewed," "reviewed but not resolved," or "resolved."

Prompt: Expand on reason referred; Enter custody arrangements, living situation, current address, parents' marital status, addresses of relevant parents or guardians
Add your own prompt here:
◉ Prompt needs to be reviewed ○ Prompt reviewed but not resolved ○ Prompt resolved

Step 1: As you begin to review the contents of each editing and formatting box, check the prompt and consider its suggestions as you make decisions about any changes or additions you want to make to the report.

> **Note:** You may find that you are unable to complete your review of a section in one editing session.
>
> You can leave notes to yourself or to others by typing them into the **Add your own prompt here** text box. The text will be added to the prompt when you click on the Save button or when you move to another screen by clicking on the Next or Previous buttons.

Step 2: Before you move on to the next section, decide whether to change the prompt status:

1. If you haven't decided whether to respond to any of the prompt's suggestions, leave it as "Prompt needs to be reviewed."
2. If you haven't finished responding to the suggestions, particularly if you've added a prompt of your own, change its status to "Prompt reviewed but not resolved."

Prompt: Expand on reason referred; Enter custody arrangements, living situation, current address, parents' marital status, addresses of relevant parents or guardians
Add your own prompt here:
○ Prompt needs to be reviewed ◉ Prompt reviewed but not resolved ○ Prompt resolved

3. When you're satisfied that you're finished with the prompt, change its status to "Prompt resolved." This will remove the prompt's text from the final copy of your report.

○ Prompt needs to be reviewed ○ Prompt reviewed but not resolved ◉ Prompt resolved

Editing the GRRS Report: Staff Notes

At the bottom of each GRRS Report screen there is a Notes button that gives you access to any staff notes that are included with the GAIN-I interview.

Step 1: To view the staff notes click on the Notes button at the bottom of each GRRS Report screen. Additional Staff Notes will be displayed in a new window. Each note is labeled with the GAIN-I variable from the item in the GAIN where the note was created.

If you want to include the text of a note in the GRRS Report, you can copy and paste it as described in the editing section.

Additional Staff Notes to Incorporate or Delete

	Variable	Note
Used/Reviewed	E1d	Staying with mother to avoid being homeless
Used/Reviewed	E2d	No drinking at mother's house
Used/Reviewed	E2e	No drugs at mother's house

Step 2: To help you keep track of which notes you have already incorporated, each staff note has a Used/Reviewed button associated with it.

When you click on a note's Used/Reviewed button, that note is highlighted.

Additional Staff Notes to Incorporate or Delete

	Variable	Note
Used/Reviewed	E1d	Staying with mother to avoid being homeless
Used/Reviewed	E2d	No drinking at mother's house
Used/Reviewed	E2e	No drugs at mother's house

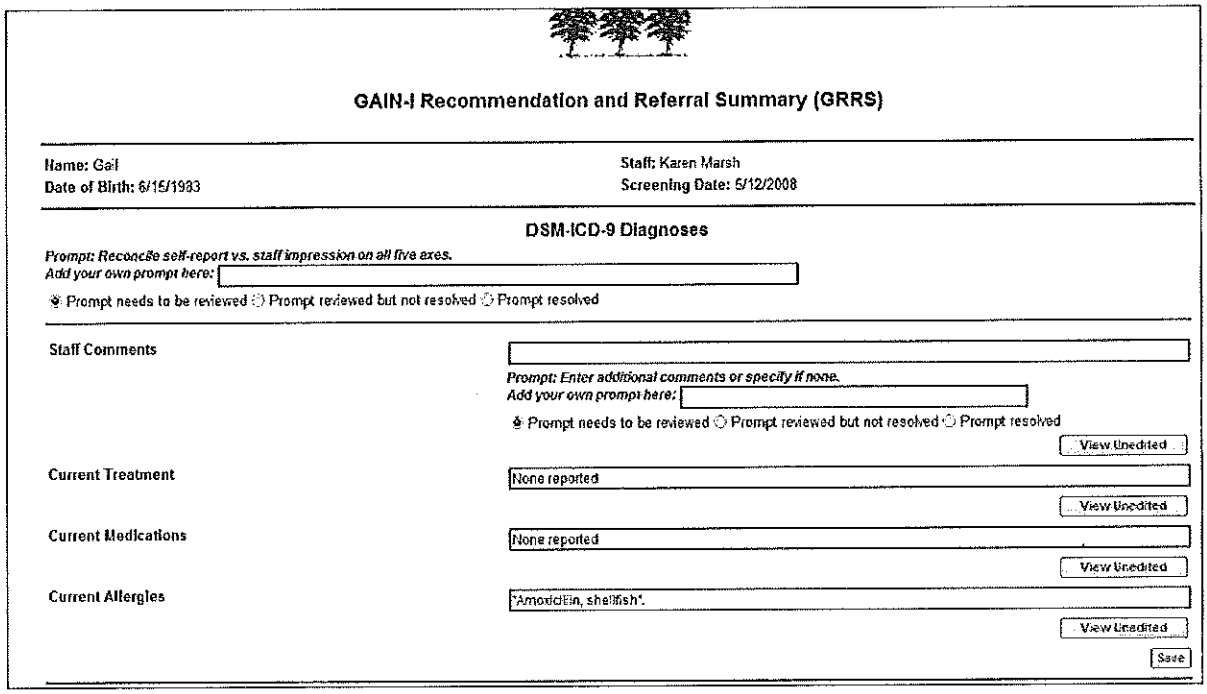
Step 3: When you are finished, close the window containing the staff notes.

Editing the GRRS Report: DSM-IV Editing

Most GRRS editing functions will follow standard word-processing editing commands. There are two aspects of the GRRS Report that use different editing techniques:

1. The DSM-IV sections
2. The Treatment Planning Grid.

Step 1: The DSM-IV section begins with staff comments, current treatment, medications, and allergies as reported by the client. These are shown in verbatim text boxes similar to those used in the GAIN-I. The View Unedited feature is also available here.



GAIN-I Recommendation and Referral Summary (GRRS)

Name: Gail
Date of Birth: 6/15/1983

Staff: Karen Marsh
Screening Date: 5/12/2008

DSM-ICD-9 Diagnoses

Prompt: Reconcile self-report vs. staff impression on all five axes.
Add your own prompt here:

Prompt needs to be reviewed · Prompt reviewed but not resolved · Prompt resolved

Staff Comments

Prompt: Enter additional comments or specify if none.
Add your own prompt here:

Prompt needs to be reviewed · Prompt reviewed but not resolved · Prompt resolved

View Unedited

Current Treatment

None reported

View Unedited

Current Medications

None reported

View Unedited

Current Allergies

"Amoxicillin, shellfish".

View Unedited

Save

Editing the GRRS Report: DSM-IV Editing (cont.)

Step 2: DSM axes I through IV display a list of diagnoses and optional comments. Axes I and II also include the DSM code for each diagnosis.

Name: Gail
Date of Birth: 6/15/1983

Staff: Karen Marsh
Screening Date: 5/12/2008

Save

Axis I: Clinical Disorders/Focal Conditions

	Code	Diagnosis	Comment	
Edit	305.00	Alcohol Abuse		R/O Del
Edit	305.20	Cannabis Abuse		R/O Del
Edit	304.20	Cocaine Dependence w/ Physiological Sx.		R/O Del
Edit	305.10	Nicotine Dependence		R/O Del
Edit	296.90	Major Depressive Disorder (MDD)		R/O Del
Edit	300.00	Rule Out - Anxiety Disorder		R/O Del
Edit	314.00	Rule Out - Attention Deficit Hyperactive Disorder - Inattentive Type		R/O Del
Edit	312.80	Conduct Disorder		R/O Del

Look Up Add

Editing controls for each listed diagnosis include:

- The **Edit** button - When you click on the **Edit** button, the related diagnosis is displayed in an editing box. In this example, we've selected Alcohol Abuse:

Update Cancel 305.00 Alcohol Abuse

Make any changes or additions, then click **Update** to save your changes, or click the Cancel button to leave the item unchanged.

- The **Arrow** buttons - The **Up** or **Down** arrow buttons move an item up or down to change the order of clinical focus.
- The **R/O** button – Use the **R/O** button to add "Rule Out" to the beginning of an item. Click again to change the item back:

Edit 305.00 Rule Out - Alcohol Abuse R/O Del

- The **Del** button – Clicking the **Del** button deletes an item.

Editing the GRRS Report: DSM-IV Editing (cont.)

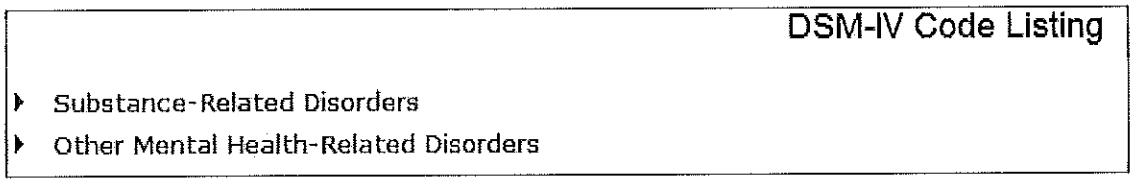
Step 3: There are two ways to add a diagnosis to DSM axes I through IV. The one you choose will depend on how familiar you are with the particular diagnosis that you want to add.

If you know the DSM-IV code and description of the diagnosis, you can enter it directly into the text entry boxes at the bottom of each DSM screen. The name of the diagnosis should be entered into the middle text box. The code (in the box on the far left) and a comment (in the box on the far right) are optional.

After you have typed in the entry, you can click on the **Add** button. This enters the new diagnosis as the last item in the list. You can then use the arrow buttons to change its position (up or down) to reflect its clinical significance.

Step 4: To add a DSM axis I-IV diagnosis when you aren't sure about the exact DSM code or description, use the **LookUp** button to select from a complete list of possible items.

Using Axis I as our example, when you click on the LookUp button, a list of DSM diagnostic categories will appear in a new window:



Editing the GRRS Report: DSM-IV Editing (cont.)

If, for example, the diagnosis you are looking for is substance-related, click the arrow to the left of **Substance-Related Disorders** to view a list of substance-related disorder categories. Click on the left arrows next to any diagnosis to open the subcategories and get the DSM-IV code for the specific diagnosis.

DSM-IV Code Listing

- Substance-Related Disorders
  - Alcohol-Related
  - Amphetamine-Related
  - Caffeine-Related
  - Cannabis-Related
  - Cocaine-Related
  - Hallucinogen-Related
  - Inhalant-Related

Step 5: Using the same example as before (alcohol-related), click on the **Alcohol Use Disorders** listing and see a complete list of alcohol-related disorders with codes and course specifiers:

DSM-IV Code Listing

- Substance-Related Disorders
  - Alcohol-Related
    - Alcohol Use Disorders
      - 303.90 - Alcohol Dependence w/ Physiological Sx - In a Controlled Environment
      - 303.90 - Alcohol Dependence w/ Physiological Sx - On Agonist Therapy
      - 303.90 - Alcohol Dependence w/ Physiological Sx - Sustained Full Remission
      - 303.90 - Alcohol Dependence w/ Physiological Sx - Sustained Partial Remission
      - 303.90 - Alcohol Dependence w/ Physiological Sx - Early Full Remission
      - 303.90 - Alcohol Dependence w/ Physiological Sx - Early Partial Remission
      - 303.90 - Alcohol Dependence w/ Physiological Sx

Click the desired diagnosis to return to the DSM-IV editing screen, with the new diagnosis as the last item in the list. You can then use the arrow buttons to change each diagnonis's position in the list, reflecting its clinical significance, and use the Edit button to add comments.

Editing the GRRS Report: DSM-IV Editing (cont.)

The GRRS Report doesn't generate GAF, GARF or SOFAS ratings (Axis V) but does provide text entry fields to enter them. For more information about GAF, GARF, and SOFAS ratings, see pages 5-16 through 5-20 of the GAIN Manual.

Axis V: Average Clinical Functional Assessment Ratings	
Global Assessment of Functioning (GAF)Past Year Average:	
Global Assessment of Functioning (GAF) Past 90 Day Average:	
Global Assessment of Relational Functioning (GARF) Past Year Average:	
Global Assessment of Relational Functioning (GARF) Past 90 Day Average:	
Social and Occupational Functioning Assessment Scale (SOFAS) Past Year Average:	
Social and Occupational Functioning Assessment Scale (SOFAS) Past 90 Day Average:	

Using the GRRS Report Treatment Planning Grid

Each of the ASAM treatment planning dimensions includes treatment-planning recommendations based on the ASAM Placement Grid described in the GAIN clinical interpretation training.

Intervention History	Problem Recency: None	Past	Current (past 90 days for B2-B6; past 7 days for B1) Low-Mod	High Severity
None	**1** No Problem	**2** Past problem Consider monitoring and relapse prevention.	**3** Low/Mod problems; Not in treatment Consider initial or low invasive treatment.	**4** Severe problems; Not in treatment Consider a more intensive treatment or intervention strategy.
Past	**0** Not Logical Check understanding of problem or lying and recode			
Current		**5** No current problems; Currently in treatment Review for step down or discharge.	**6** Low/Mod problems; Currently in treatment Review need to continue or step up.	**7** Severe problems; Currently in treatment Review need for more intensive or assertive levels.

For each ASAM dimension, the software generates an initial cell placement and related recommendation statements based on the client's self-reported information. You can use your clinical judgment to change the cell (see next page) based on the synthesis of other available information and then regenerate the treatment planning recommendations.

> **Note:** When you change the cell and the treatment planning recommendations are regenerated, any edits you may have made to the treatment planning recommendation section for that ASAM dimension will be lost.
>
> **Be sure to review the cell placement and make any alternative cell placements *before* beginning to edit the treatment planning recommendations!**

Using the GRRS Report Treatment Planning Grid (continued)

Step 1: When you get to the Treatment Planning Recommendations section, begin by reviewing the cell placement. In the ASAM Dimension B1 example below, the client was placed in cell 2 – Past problem.

Treatment Planning Recommendations:

2. Past Problem (with or without Treatment History) | Change Cell

Gail reported a history (more than a week ago) of withdrawal problems. Based on the information provided, staff's recommendations are:

- Engaging in detoxification services if needed.
- Monitor for change in intoxication or withdrawal symptoms.
- Reviewing need for immediate detoxification or withdrawal services.

Prompt: Review, delete, or edit according to specific needs and clinical indications. Determine whether the most recent detox was more than 7 days ago, and review/edit cell placement.
Add your own prompt here:

Prompt needs to be reviewed | Prompt reviewed but not resolved | Prompt resolved

If you agree with that placement, review the specific recommendations and make any additions or changes using the editing and formatting box tools. To change the cell placement, click the **Change Cell** button.

Step 2: The ASAM Placement Grid displays in a new window. Click the cell you want and you will be returned to the GRRS Report with the *new* treatment planning recommendations now in the text box.

In this example, we changed 2 - Past Problem to 3 – Low-to moderate problems.

3 - Low-Moderate Problems; Not in Treatment Currently | Change Cell

Gail reported having low to moderate withdrawal symptoms within the past week, but is not currently receiving detoxification services. Based on the information provided, staff's recommendations are:

- Ambulatory or residential/inpatient detoxification services.
- Referral for medication for alcohol or other drug withdrawal or cravings, such as buprenorphine, methadone, or Antabuse.

Printing/Saving the GRRS

To print or save a copy of the GRRS Report, export it to Adobe Acrobat, then use the Adobe Acrobat toolbar. There are two ways to create the GRRS Report in Adobe Acrobat.

Created with GRRS Software (Copyright ©2002-2008 Chestnut Health Systems)

GAIN-I Recommendation and Referral Summary (GRRS)

Name: Gail | **Staff:** Karen Marsh
Date of Birth: 6/15/1983 | **Screening Date:** 5/12/2008

Presenting Concerns and Identifying Information

Gail is a 24-year-old Caucasian/White (Self-described as "White") female who is living with someone as married and has 3 children. She presented as typically groomed with no apparent physical abnormalities. She was referred to Software Team by "Bertha Jones", ("Probation Officer"). Gail stated that the reason for coming to Software Team was because "My probation officer sent me.". Gail last attended school or training more than 12 months ago. Gail reported last working 3 to 7 days ago at "Heritage Estate".
Prompt: Expand on reason referred; Enter custody arrangements, living situation, current address, parents' marital status, addresses of relevant parents or guardians

Below is a narrative summary of the evaluation procedures, a five-axis diagnostic summary of

Step 1: From the last GRRS Report editing screen (ASAM Criteria B Summary Recommendations) click the Next button to go to the **Signatures** screen.

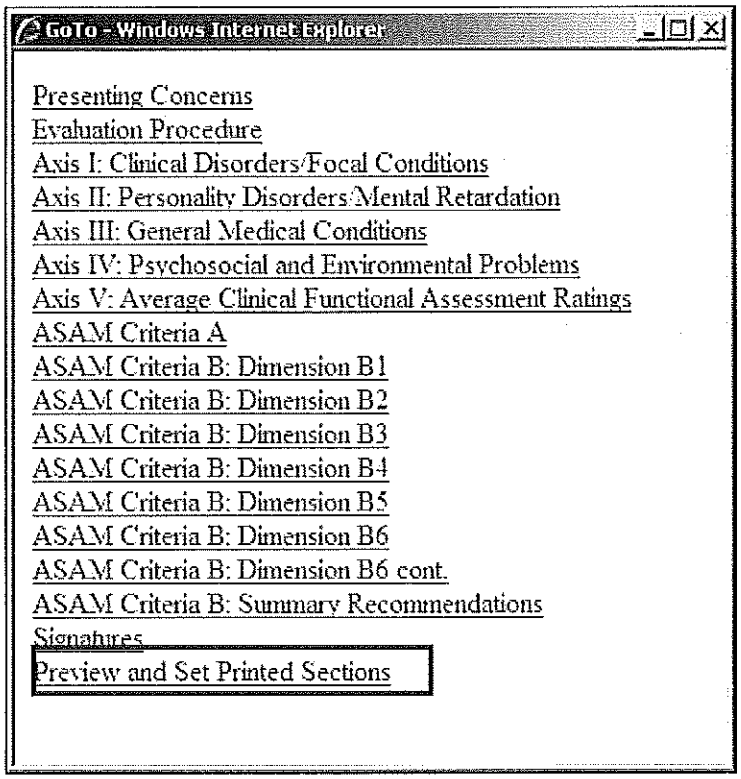
Signatures

Date

If your GRRS Report isn't configured with a list of required signatures, you can enter a label here, and click on the Next button to go to the **Select Sections to Print** screen.

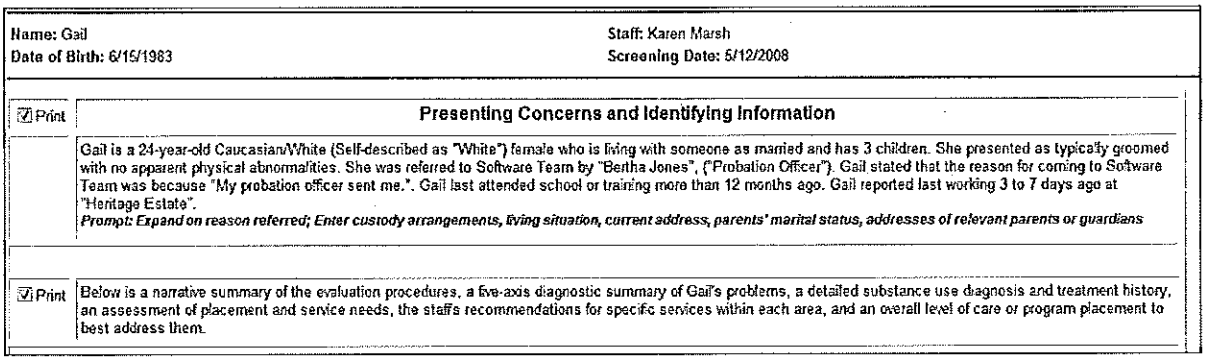
Printing/Saving the GRRS (cont.)

If you are not at the last editing screen, click on the **Go To** button and click on the **Preview and Set Printed Sections** link.



Step 2: At the Select Sections to Print screen you can review each section's complete text. Be sure to check that each section's prompts have been resolved and no longer display.

In the example below, the prompts for the **Presenting Concerns and Identifying Information** have not been resolved. Use the Go To button at the bottom of the page to return to the sections in question and resolve the issues before continuing further.



Name: Gail
Date of Birth: 6/15/1983

Staff: Karen Marsh
Screening Date: 5/12/2008

☑ Print	Presenting Concerns and Identifying Information
	Gail is a 24-year-old Caucasian/White (Self-described as "White") female who is living with someone as married and has 3 children. She presented as typically groomed with no apparent physical abnormalities. She was referred to Software Team by "Bertha Jones", ("Probation Officer"). Gail stated that the reason for coming to Software Team was because "My probation officer sent me.". Gail last attended school or training more than 12 months ago. Gail reported last working 3 to 7 days ago at "Heritage Estate". ***Prompt: Expand on reason referred; Enter custody arrangements, living situation, current address, parents' marital status, addresses of relevant parents or guardians***
☑ Print	Below is a narrative summary of the evaluation procedures, a five-axis diagnostic summary of Gail's problems, a detailed substance use diagnosis and treatment history, an assessment of placement and service needs, the staffs recommendations for specific services within each area, and an overall level of care or program placement to best address them.

Printing/Saving the GRRS Report (cont.)

Step 3: If there are any sections of the GRRS Report that you don't want to print, uncheck the **Print** box to the left of that section.

☑ Print	Presenting Concerns and Identifying Information
	Gail is a 24-year-old Caucasian/White (Self-described as "White") female who is living with someone as married and has 3 children. She presented as typically groomed with no apparent physical abnormalities. She was referred to Software Team by "Bertha Jones", ("Probation Officer"). Gail stated that the reason for coming to Software Team was because "My probation officer sent me.". Gail last attended school or training more than 12 months ago. Gail reported last working 3 to 7 days ago at "Heritage Estate".
☑ Print	Below is a narrative summary of the evaluation procedures, a five-axis diagnostic summary of Gail's problems, a detailed substance use diagnosis and treatment history, an assessment of placement and service needs, the staff's recommendations for specific services within each area, and an overall level of care or program placement to best address them.

Note: *Unchecking a section will not delete that section's text from the GRRS Report. It will simply keep it from being included in the Adobe Acrobat file. You can choose to include it in future printings if you wish.*

Step 4: When you have completed your review and unchecked any sections you don't want to print, click on the **Save and View GRRS** button at the bottom of the screen.

Save and View G-RRS

If you don't need to review the GRRS Report text or select sections to print, click the **Preview GRRS** button on any GRRS Report screen to view the Adobe Acrobat (.pdf) version.

Preview G-RRS

Step 5: The GRRS Report will display in a new Adobe window. Use the tools in the Adobe Acrobat toolbar to print or save the report.

Reminder:

Be sure to follow your local HIPAA guidelines for securing the PHI included in the saved report.

When you are finished, close the window containing the GRRS Report, then close the GRRS Report to get back to the Client Record View.

If performing a GAIN I:

- Once you have completed the GAIN, if you are conducting a GAIN I, click on Generate GRRS.
- Complete and Save the GRRS.

Returning to your active Window in WITS:

- Click Download/Update GAIN Summaries in the Administrative Actions section. You will receive a "successful download" message once complete, and an activity will be created for the GAIN I in the client's Activity Record.
- To view the GRRS, click Review on the Client Activity List, then Review on the GAIN Screen next to the GAIN I activity (holding the CTRL while you click the second review action ensures that pop-ups will not stop the report from coming up). Click the print icon to print.
- Close the GAIN-ABS Window.

QRRS Report

When you select the **QRRS Report** for a GAIN-Q interview, the system wil generate a narrative summary of the client's GAIN-Q interview.

This report's structure mirrors the GAIN-Q structure, beginning with the client's identifying information and general client background. The rest of the narrative is arranged by major scale:

- General Life Problems
- Emotional Health
- Behavioral Health
- Substance-Related Issues
- Case Disposition

Results for each subscale appear under the heading of the associated scale. Please see the **GAIN-Q Administration and Scoring Manual** for more detailed information about interpreting the QRRS Report.

GAIN-Q Recommendation and Referral Summary (QRRS)

Name: jane	**Staff ID:** 100
Participant ID: 5555555	**Assessment Date:** 10/7/2008
Date of Birth: 4/1/1994	

Background

jane is a 14-year old African American/Black female. Her first language is English. She is in the legal custody of "mother". She has completed the 9th grade. She was referred by Mother; (Susan Doe). The reason(s) jane was referred is/are: general concerns; family problems; school problems; behavioral or conduct problems; substance use. jane does not want help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. jane completed this assessment on her own without help in a treatment or intake unit.

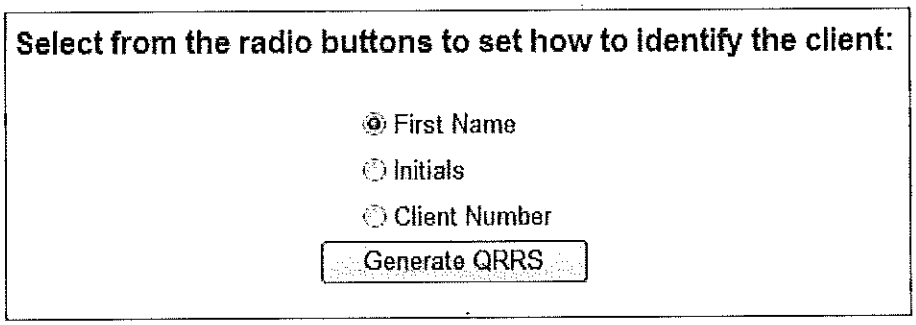
General Life Problems

Overall, jane reported problems in the **no/minimal range** of the **General Life Problem Index** and does not appear to need services in this area.

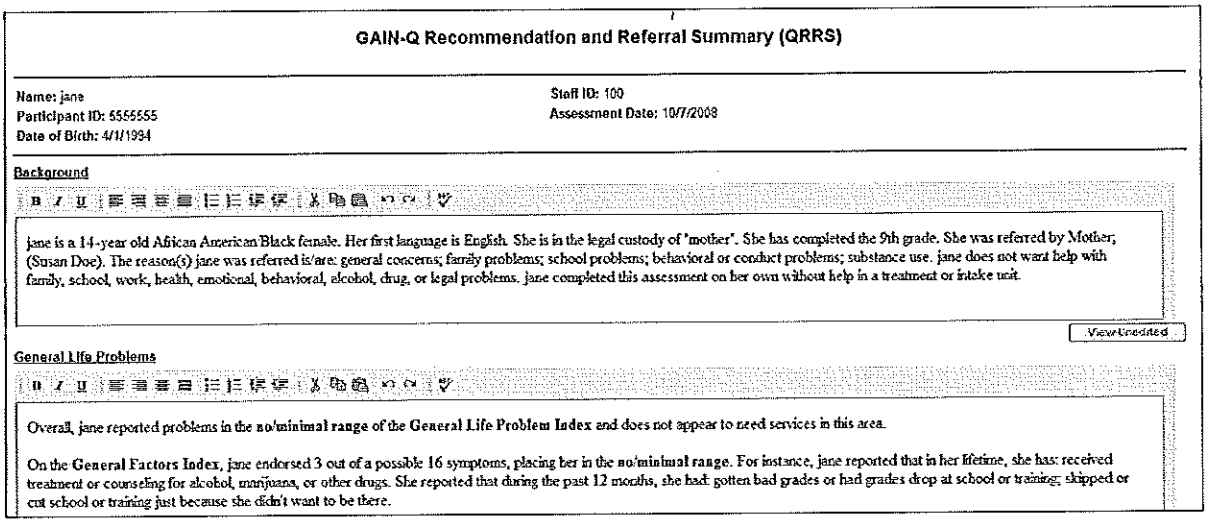
QRRS Report (cont.)

Step 1: Follow the instructions in the Generating Reports section to select and create the QRRS Report. The QRRS Report requires one additional step before it can be printed. Follow the instructions in the Generating GAIN ABS Reports section (p. 26).

After completing step 1, you will need to select how you want to identify the client, then click Generate QRRS.



Step 2: The QRRS Report will display with the text for the **Background** and **General Life Problems** sections in a text box with an editing tool bar.



GAIN-Q Recommendation and Referral Summary (QRRS)

Name: jane
Participant ID: 5555555
Date of Birth: 4/1/1994

Staff ID: 100
Assessment Date: 10/7/2008

Background

jane is a 14-year old African American/Black female. Her first language is English. She is in the legal custody of "mother". She has completed the 9th grade. She was referred by Mother; (Susan Doe). The reason(s) jane was referred is/are: general concerns; family problems; school problems; behavioral or conduct problems; substance use. jane does not want help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. jane completed this assessment on her own without help in a treatment or intake unit.

View Unedited

General Life Problems

Overall, jane reported problems in the **no/minimal range** of the **General Life Problem Index** and does not appear to need services in this area.

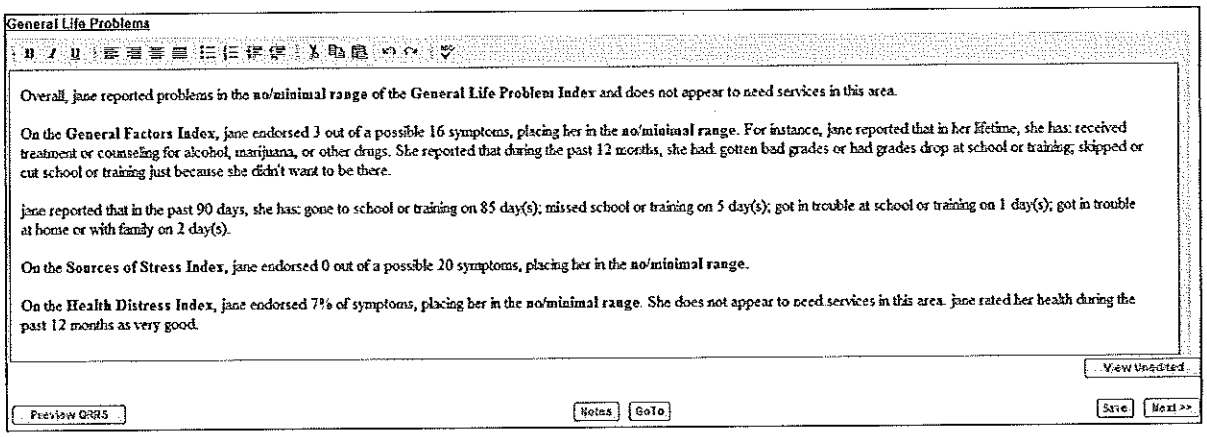
On the **General Factors Index**, jane endorsed 3 out of a possible 16 symptoms, placing her in the **no/minimal range**. For instance, jane reported that in her lifetime, she has: received treatment or counseling for alcohol, marijuana, or other drugs. She reported that during the past 12 months, she had: gotten bad grades or had grades drop at school or training; skipped or cut school or training just because she didn't want to be there.

After the **QRRS Report** displays, there are three steps to completing a printed or electronic copy:

1. Review and edit the contents or the appearance of the QRRS Report.
2. Select which sections of the QRRS Report to print or save.
3. Print or save the QRRS Report.

Navigating the QRRS Report

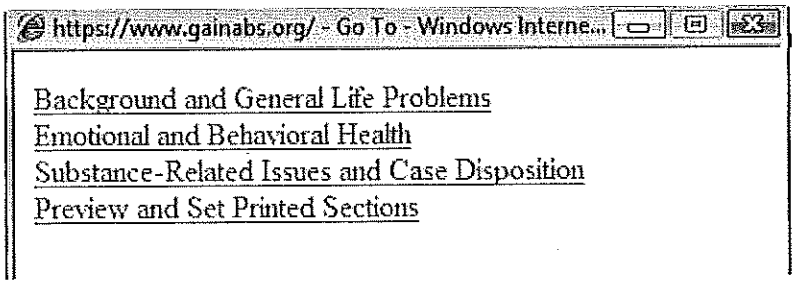
At the bottom of each QRRS Report screen are several navigation buttons.



Next and Previous – these buttons let you page through the report review/edit process one screen at a time:

Save – any editing that you do is automatically saved when you click on the Next or Previous buttons. The Save button saves your changes before you leave a screen if you want to ensure your progress is saved.

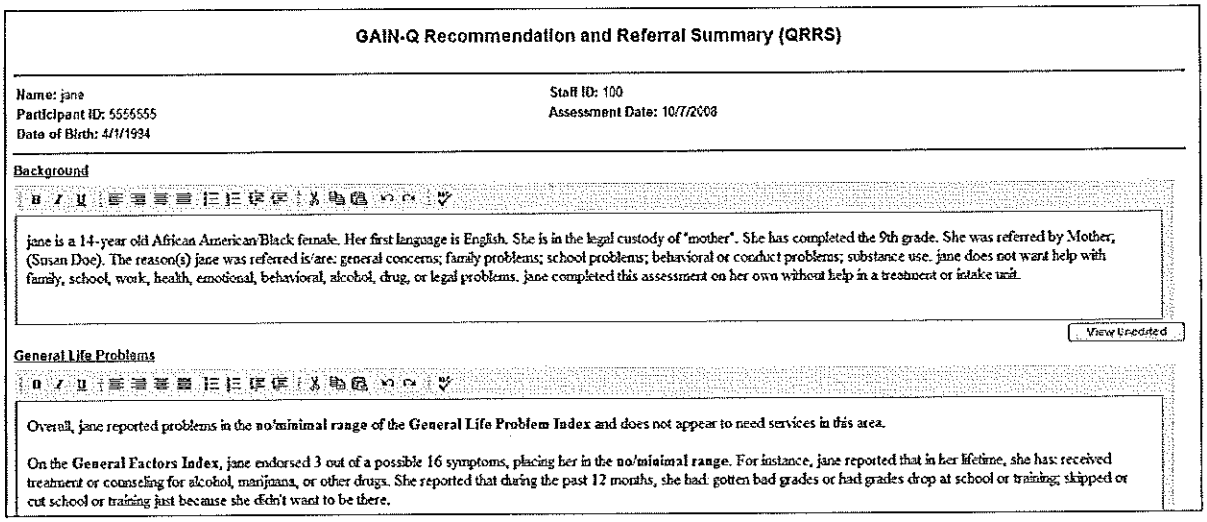
GoTo – jump to any of the editing screens or to the final screen where you can preview the report and make decisions about which pages to print.



Editing the QRRS Report: Overview

Most of the text of the QRRS Report is displayed in an editing and formatting box like you see with the Background and General Life Problems section.

Step 1: Review the contents of the document and note any changes you want to make.



GAIN-Q Recommendation and Referral Summary (QRRS)

Name: jane
Participant ID: 5555555
Date of Birth: 4/1/1994

Staff ID: 100
Assessment Date: 10/7/2008

Background

jane is a 14-year old African American/Black female. Her first language is English. She is in the legal custody of "mother". She has completed the 9th grade. She was referred by Mother, (Susan Doe). The reason(s) jane was referred is/are: general concerns; family problems; school problems; behavioral or conduct problems; substance use. jane does not want help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. jane completed this assessment on her own without help in a treatment or intake unit.

View Unedited

General Life Problems

Overall, jane reported problems in the **no/minimal range** of the **General Life Problem Index** and does not appear to need services in this area.

On the **General Factors Index**, jane endorsed 3 out of a possible 16 symptoms, placing her in the **no/minimal range**. For instance, jane reported that in her lifetime, she has: received treatment or counseling for alcohol, marijuana, or other drugs. She reported that during the past 12 months, she had: gotten bad grades or had grades drop at school or training; skipped or cut school or training just because she didn't want to be there.

Step 2: Make desired changes in the text boxes. The editing and formatting toolbar at the top of the text box can be used just like the ones in word processing software like Microsoft Word.

1 – Character formatting - bold, italic, underline
2 – Paragraph formatting - alignment, bullets, numbering, indent
3 – Cut, copy, paste
4 – Undo, redo
5 – Spelling – online dictionary includes all terms used in all GAIN instruments

Editing QRRS Report: Overview (cont.)

Step 3: After you've edited a section, you can compare your new copy with an unedited version by clicking on the **View Unedited** button:

View Unedited

When you click on the View Unedited button, a second text box will appear below the editing and formatting box with the original text for that section.

GAIN-Q Recommendation and Referral Summary (QRRS)

Name: Lloyd
Participant ID: 999
Date of Birth: n/a

Staff ID: 101
Assessment Date: 6/13/2008

Background

Lloyd is a 0-year old [gender not recorded]. Lloyd's first language is . Lloyd has completed the [grade not recorded]th grade. The reason (s) Lloyd was referred is/are: . Lloyd wants help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. Lloyd completed this assessment on Lloyd's own without help

View Unedited

General Life Problems

Overall, Lloyd reported problems in the no/minimal range of the General Life Problem Index and does not appear to need services in this area.

On the **General Factors Index**, Lloyd endorsed 0 out of a possible 16 symptoms, placing Lloyd in the **no/minimal range**.

On the **Sources of Stress Index**, Lloyd endorsed 0 out of a possible 20 symptoms, placing Lloyd in the **no/minimal range**.

On the **Health Distress Index**, Lloyd endorsed 0% of symptoms, placing Lloyd in the **no/minimal range**. Lloyd does not appear to need services in this area. Lloyd rated Lloyd's health during the past 12 months as [unrecorded].

Revert | Hide Unedited

To restore some text that you've deleted, copy and paste the unedited text into the edit box: highlight the unedited text that you want to copy, then hold down the Ctrl key while you press C. Next, move the cursor to the place in your edited text that you want to insert the copied text, and hold down the Ctrl key while you press V.

When you are finished with the original text, you can hide its window by clicking on the **Hide Unedited** button:

Hide Unedited

If you decide that you'd like to undo all your edits, you can return your edited text to its original state by clicking on the **Revert** button:

Revert

Editing the QRRS Report: Staff Notes

Step 1: At the bottom of each QRRS Report screen is a **Notes** button that gives you access to any Staff Notes that are included with the GAIN-Q interview.

To view staff notes click on the **Notes** button at the bottom of the QRRS Report screen.

Step 2: Additional Staff Notes will be displayed in a new window.

Each note is labeled with the GAIN-I variable from the item in the GAIN where the note was created.

If you want to include the text of a note in the GRRS Report, you can copy and paste it as described in the editing section.

Additional Staff Notes to Incorporate or Delete

	Variable	Note
Used/Reviewed	BK6bv	She sees her Dad a lot, too.
Used/Reviewed	GF1b	She has talked to her pastor about being sad a lot.
Used/Reviewed	GF2j	She was beaten on the school bus.

Step 3: To help you keep track of which notes you have already incorporated, each staff note has a **Used/Reviewed** button associated with it. When you click on a note's Used/Reviewed button, that note is highlighted.

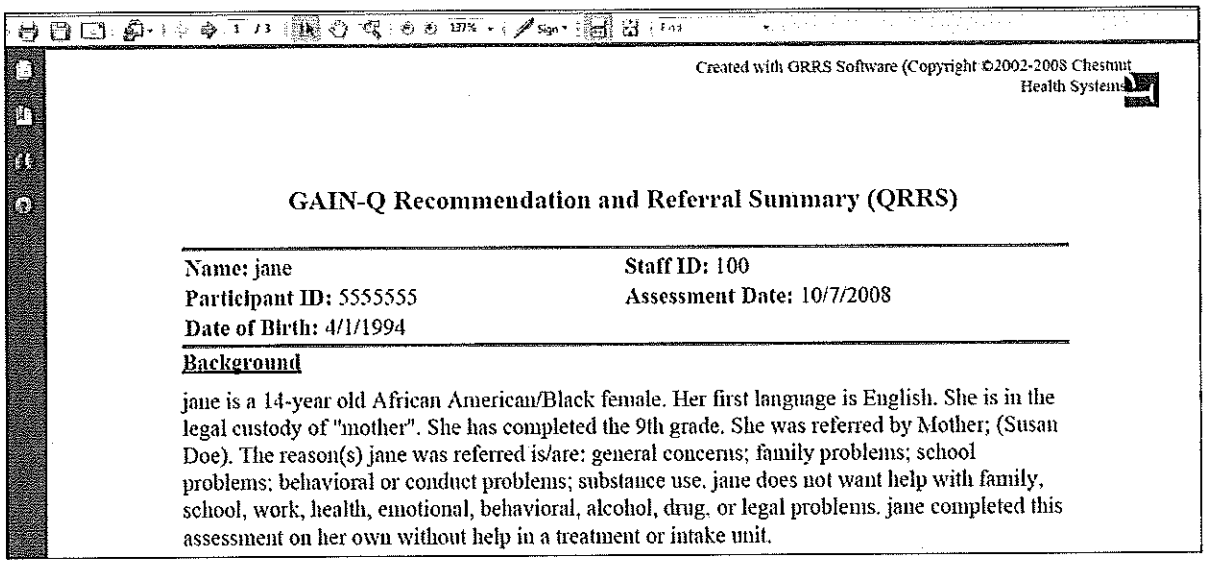
Additional Staff Notes to Incorporate or Delete

	Variable	Note
Used/Reviewed	BK6bv	She sees her Dad a lot, too.
Used/Reviewed	GF1b	She has talked to her pastor about being sad a lot.
Used/Reviewed	GF2j	She was beaten on the school bus.

When you are finished, close the window containing the staff notes.

Printing/Saving the QRRS Report

To print the QRRS Report, export it to Adobe Acrobat, then use the Adobe Acrobat toolbar to print. There are two ways to create the QRRS Report in Adobe Acrobat format. The one you choose to use will depend on the amount of editing you've done, and whether you want to print all or only part of the report.



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GAIN-Q Recommendation and Referral Summary (QRRS)

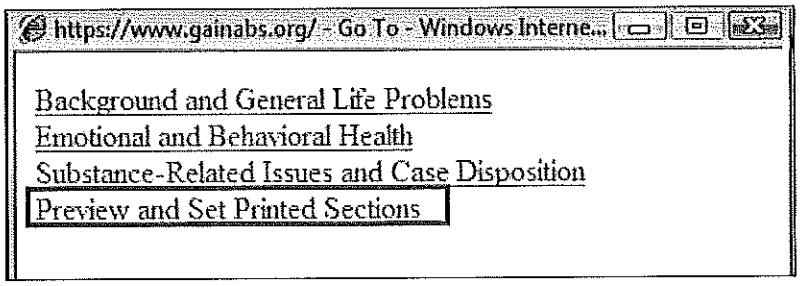
Name: jane
Participant ID: 5555555
Date of Birth: 4/1/1994
Staff ID: 100
Assessment Date: 10/7/2008

Background

jane is a 14-year old African American/Black female. Her first language is English. She is in the legal custody of "mother". She has completed the 9th grade. She was referred by Mother; (Susan Doe). The reason(s) jane was referred is/are: general concerns; family problems; school problems; behavioral or conduct problems; substance use. jane does not want help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. jane completed this assessment on her own without help in a treatment or intake unit.

Step 1: From the last QRRS Report editing screen (Substance-Related Issues and Case Disposition) click on the Next button to go to the **Select Sections to Print** screen.

If you are not at the last editing screen, you can click on the Go To button and click on the **Preview and Set Printed Sections** link.



Printing/Saving the QRRS Report (cont.)

Step 2: At the **Select Sections to Print** screen you can review each section's complete text. If you don't want to print any of the QRRS Report's sections, uncheck the Print box to the left of that section.

> ***Note:*** *Unchecking a section will not delete that section's text from the QRRS Report. It will simply keep it from being included in the Adobe Acrobat file. You can choose to include it in future printings if you wish.*

GAIN-Q Recommendation and Referral Summary (QRRS)

Name: jane
Participant ID: 5555555
Date of Birth: 4/1/1994

Staff ID: 100
Assessment Date: 10/7/2008

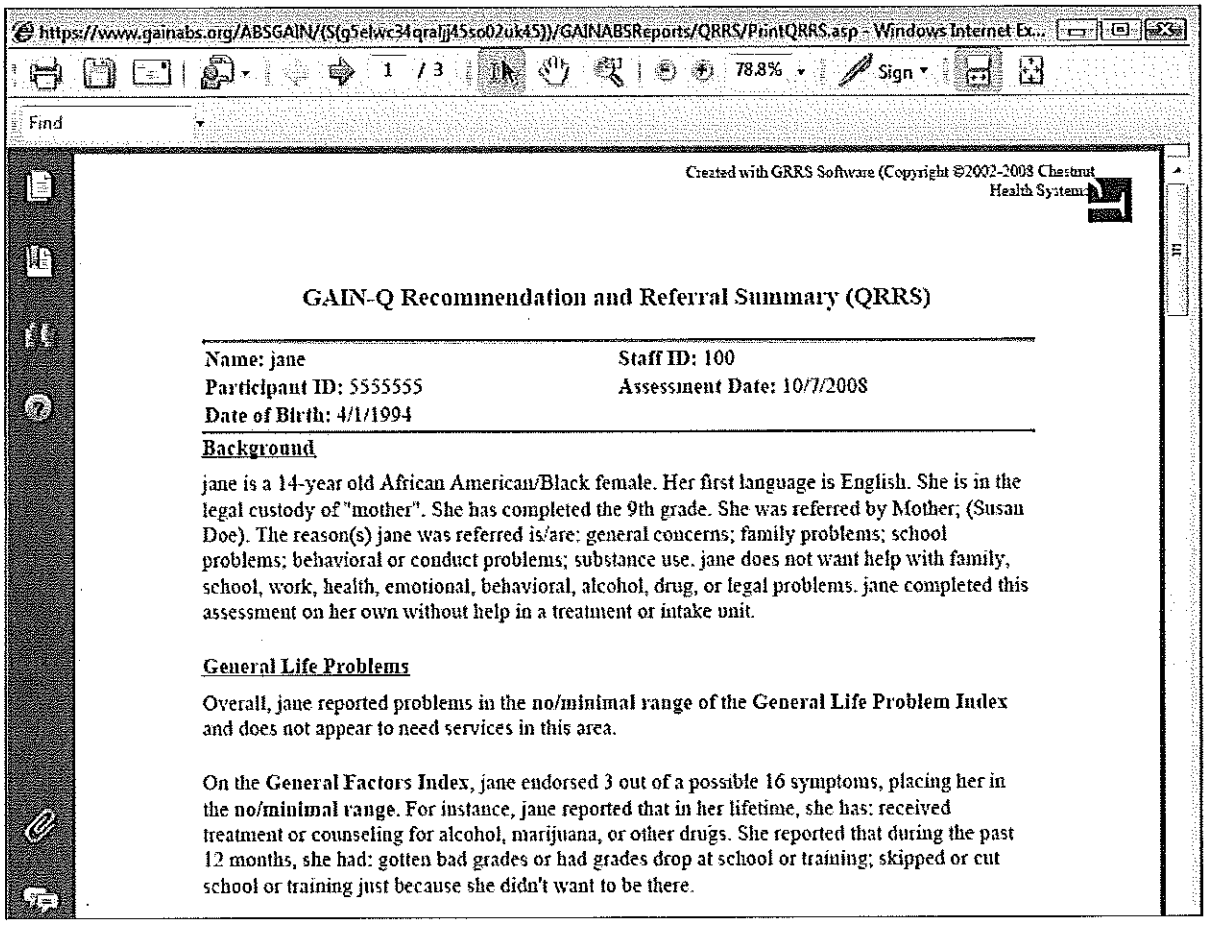
☑ Print	**Background** jane is a 14-year old African American/Black female. Her first language is English. She is in the legal custody of "mother". She has completed the 9th grade. She was referred by Mother; (Susan Doe). The reason(s) jane was referred is/are: general concerns; family problems; school problems; behavioral or conduct problems; substance use. jane does not want help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. jane completed this assessment on her own without help in a treatment or intake unit.
☑ Print	**General Life Problems** Overall, jane reported problems in the **no/minimal range** of the **General Life Problem Index** and does not appear to need services in this area. On the **General Factors Index**, jane endorsed 3 out of a possible 16 symptoms, placing her in the **no/minimal range**. For instance, jane reported that in her lifetime, she has: received treatment or counseling for alcohol, marijuana, or other drugs. She reported that during the past 12 months, she had: gotten bad grades or had grades drop at school or training; skipped or cut school or training just because she didn't want to be there. jane reported that in the past 90 days, she has: gone to school or training on 85 day(s); missed school or training on 5 day(s); got in trouble at school or training on 1 day(s); got in trouble at home or with family on 2 day(s). On the **Sources of Stress Index**, jane endorsed 0 out of a possible 20 symptoms, placing her in the **no/minimal range**. On the **Health Distress Index**, jane endorsed 7% of symptoms, placing her in the **no/minimal range**. She does not appear to need services in this area. jane rated her health during the past 12 months as very good.

Step 3: When you have completed your review and unchecked any sections that you don't want to print, click on the **Save and View QRRS** button at the bottom of the screen.

If you don't need to review the QRRS Report's text and plan to print the entire report, click the **Preview QRRS** button on any QRRS Report screen to go directly to the Adobe Acrobat version.

Printing/Saving the QRRS Report (cont.)

Step 4: The QRRS Report will display in a new window. Use the Adobe Acrobat toolbar to print or save the report.



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GAIN-Q Recommendation and Referral Summary (QRRS)

Name: jane
Participant ID: 5555555
Date of Birth: 4/1/1994
Staff ID: 100
Assessment Date: 10/7/2008

Background

jane is a 14-year old African American/Black female. Her first language is English. She is in the legal custody of "mother". She has completed the 9th grade. She was referred by Mother; (Susan Doe). The reason(s) jane was referred is/are: general concerns; family problems; school problems; behavioral or conduct problems; substance use. jane does not want help with family, school, work, health, emotional, behavioral, alcohol, drug, or legal problems. jane completed this assessment on her own without help in a treatment or intake unit.

General Life Problems

Overall, jane reported problems in the **no/minimal range** of the **General Life Problem Index** and does not appear to need services in this area.

On the **General Factors Index**, jane endorsed 3 out of a possible 16 symptoms, placing her in the **no/minimal range**. For instance, jane reported that in her lifetime, she has: received treatment or counseling for alcohol, marijuana, or other drugs. She reported that during the past 12 months, she had: gotten bad grades or had grades drop at school or training; skipped or cut school or training just because she didn't want to be there.

When you are finished, close the window containing the QRRS Report, close the QRRS Report window and return to Client Record View.

Reminder:

Be sure to follow your local HIPAA guidelines for securing the PHI included in the saved report.

If performing a GAIN Q:

- Once you have completed the instrument, close the GAIN-ABS window and return to WITS.
- Click Create GAIN Q Activity in the Administrative Actions section. When prompted, click YES. This will create an Activity in the client's record to note the date of the GAIN Q.

At any point, you may update the GAIN instrument by:

- locating your client in WITS,
- going to the GAIN Administration screen,
- syncing your client,
- going to GAIN-ABS by clicking Perform GAIN Assessment.
- You may only perform the GAIN Q once during each treatment Episode.