

**2009 HSRs MENTAL HEALTH  
MODULE DESKCARD**

**MODULE TYPE 9**

**CLIENT CHARACTERISTICS (Field 7)**

- 19 Developmental disability - brain trauma
  - 23 Developmental disability - cerebral palsy
  - 25 Developmental disability – autism spectrum
  - 26 Developmental disability - mental retardation
  - 27 Developmental disability - epilepsy
  - 28 Developmental disability - other or unknown
  - 29 Family member of developmental disability client
  - 86 Severe emotional disturbance - child / adolescent
  - 02 Mental illness (excluding SPMI)
  - 03 Serious and persistent mental illness (SPMI)
  - 14 Family member of mental health client
  - 04 Alcohol client
  - 05 Drug client
  - 10 Chronic alcoholic
  - 12 Alcohol and other drug client
  - 16 Family member of alcohol and other drug client
  - 17 Intoxicated driver
  - 39 Gambling client
  - 07 Blind / visually impaired
  - 08 Hard of hearing
  - 32 Blind / deaf
  - 79 Deaf
  - 09 Physical disability / mobility impaired
  - 36 Other handicap
  - 59 Unmarried parent
  - 71 Victim of domestic abuse
  - 50 Regular caregiver of dependent person
  - 55 Frail elderly
  - 57 Abused / neglected elder
  - 18 Alzheimer's disease / related dementia
  - 43 Migrant
  - 44 Refugee
  - 45 Cuban / Haitian entrant
  - 33 Corrections / criminal justice system client (adult only)
  - 84 Repeated school truancy
  - 37 Frail medical condition
  - 38 Criminal justice system involvement (alleged or adjudicated)
  - 72 Victim of abuse or neglect (alleged or adjudicated)
  - 80 Homeless
  - 90 Special study code (to be defined as need arises)
  - 91 Hurricane Katrina evacuee
  - 92 Hurricane Rita evacuee
  - 99 None of the above
- SPECIAL CHILDREN'S SERVICES CATEGORIES**
- 61 CHIPS - abuse and neglect
  - 62 CHIPS - abuse
  - 63 CHIPS - neglect
  - 64 Family member of abused / neglected child
  - 69 JIPS - status offender
  - 70 Family member of status offender
  - 68 CHIPS - other
  - 74 Family member of CHIPS - other
  - 66 Delinquent
  - 73 Family member of delinquent

**LEGAL/COMMITMENT STATUS (Field 9a)**

- 1 Voluntary
- 2 Voluntary with settlement agreement
- 3 Involuntary civil - Chapter 51
- 4 Involuntary civil - Chapter 55
- 5 Involuntary criminal
- 6 Guardianship only

**BRC TARGET POPULATION (Field 10)**

- Persons in need of:
- H Ongoing, high intensity, comprehensive services
  - L Ongoing, low intensity services
  - S Short-term situational services

**PRESENTING PROBLEM (Field 11)**

- 01 Marital / family problem
- 02 Social / interpersonal (other than family problem)
- 03 Problems coping with daily roles and activities (including job, school, housework, daily grooming, financial management, etc.)
- 04 Medical / somatic
- 05 Depressed mood and / or anxious
- 06 Attempt, threat, or danger of suicide
- 07 Alcohol
- 08 Drugs
- 09 Involvement with criminal justice system
- 10 Eating disorder
- 11 Disturbed thoughts
- 12 Abuse / assault / rape victim
- 13 Runaway behavior
- 14 Emergency detention

**COUNTY OF RESIDENCE (Field 13)**

- |                |              |                 |
|----------------|--------------|-----------------|
| 01 Adams       | 25 Iowa      | 49 Portage      |
| 02 Ashland     | 26 Iron      | 50 Price        |
| 03 Barron      | 27 Jackson   | 51 Racine       |
| 04 Bayfield    | 28 Jefferson | 52 Richland     |
| 05 Brown       | 29 Juneau    | 53 Rock         |
| 06 Buffalo     | 30 Kenosha   | 54 Rusk         |
| 07 Burnett     | 31 Kewaunee  | 55 St. Croix    |
| 08 Calumet     | 32 La Crosse | 56 Sauk         |
| 09 Chippewa    | 33 Lafayette | 57 Sawyer       |
| 10 Clark       | 34 Langlade  | 58 Shawano      |
| 11 Columbia    | 35 Lincoln   | 59 Sheboygan    |
| 12 Crawford    | 36 Manitowoc | 60 Taylor       |
| 13 Dane        | 37 Marathon  | 61 Trempealeau  |
| 14 Dodge       | 38 Marinette | 62 Vernon       |
| 15 Door        | 39 Marquette | 63 Vilas        |
| 16 Douglas     | 40 Milwaukee | 64 Walworth     |
| 17 Dunn        | 41 Monroe    | 65 Washburn     |
| 18 Eau Claire  | 42 Oconto    | 66 Washington   |
| 19 Florence    | 43 Oneida    | 67 Waukesha     |
| 20 Fond du Lac | 44 Outagamie | 68 Waupaca      |
| 21 Forest      | 45 Ozaukee   | 69 Waushara     |
| 22 Grant       | 46 Pepin     | 70 Winnebago    |
| 23 Green       | 47 Pierce    | 71 Wood         |
| 24 Green Lake  | 48 Polk      | 72 Menominee    |
|                |              | 73 Out of state |
- 84 Menominee Indian Res
  - 85 Red Cliff Indian Reserv
  - 86 Stockbridge Munsee Ind
  - 87 Potawatamie Indian Res
  - 88 Lac du Flambeau Indian

- 89 Bad River Indian Reserv
- 91 Mole Lake Indian Reserv
- 92 Oneida Indian Reserv
- 94 Lac Courte Oreilles Indian
- 95 St Croix Indian Reserv

**SOCIAL SUPPORT (Field 15)**

(Optional)

**Family / Marital / Interpersonal Relationships**

- 01 Very frequent contact, positive contact
- 02 Frequent or more often, usually positive contact
- 03 Occasional or more often, sometimes positive, sometimes negative
- 04 Contact is usually negative
- 05 Little or no social support

**REFERRAL SOURCE (Field 18)**

(Optional)

- 01 Self
- 02 Family or friend
- 03 Law enforcement (except court or correction agency)
- 04 Court or correction agency
- 05 School system or education agency
- 06 Social service agency
- 07 Inpatient or residential
- 08 Physician / health care provider
- 99 Other

**STANDARD PROGRAM**

**CATEGORY / SUBPROGRAM (Field 22)**

<u>SPC/SUB CODE</u>	<u>STANDARD PROGRAM CATEGORY NAME</u>	<u>UNITS TO BE REPORTED</u>
<b>Inpatient</b>		
503	Inpatient	Days
503 10	Emergency detention	Days
505	DD center / nursing home	Days
925	Institution for mental disease	Days
<b>Residential</b>		
202	Adult family home	Days
203	Foster home	Days
204	Group home	Days
205	Shelter care	Days
504	Residential care center	Days
506	CBRF	Days
<b>Partial Day</b>		
108	Work related services	Hours
615	Supported employment	Hours
706	Day center services - nonmedical	Hours
<b>Outpatient</b>		
303	Juvenile probation and supervision	Hours
507	Counseling / therapeutic resources	Hours
507 10	Medication management	Hours
507 20	Individual	Hours
507 30	Group	Hours
507 40	Family (or couple)	Hours
507 50	Intensive in-home	Hours
507 60	Family support	Hours
704	Day treatment - medical	Hours
<b>Emergency</b>		
501	Crisis intervention	Hours
503 20	Emergency room - hospital setting	Hours

**CATEGORY / SUBPROGRAM (Field 22) Cont'd****Other**

509	Community support	Hours
510	Comprehensive community services	Days
604	Case management	Hours

**Note:** Any other appropriate SPCs associated with mental health services should be reported even though not listed here. The SPCs listed above are those that require units of service reporting.

**SPC CLOSING REASON (Field 28)**

01	Completed service - major improvement
02	Completed service - moderate improvement
03	Completed service - no change
04	Transferred to another community based resource
05	Administratively discontinued service (i.e., noncompliance)
06	Referred
07	Withdrew against staff advice or services not wanted
08	Funding / authorization expired
09	Incarcerated (local jail or prison)
10	Entered nursing home or institutional care (IMD, RCC, etc.)
11	No probable cause
99	Death

**CONSUMER STATUS INFORMATION**

Required when BRC Target Population in Field 10 is coded H or L.

**BRC TARGET POPULATION UPDATE (Field 31)**

Persons in need of:

H	Ongoing, high intensity, comprehensive services
L	Ongoing, low intensity services
S	Short-term situational services

**PSYCHOSOCIAL AND ENVIRONMENTAL STRESSORS (DSM IV, Axis IV) (Field 32)**

1	None
2	Mild
3	Moderate
4	Severe
5	Extreme
6	Catastrophic
0	Inadequate information

**GLOBAL ASSESSMENT OF FUNCTIONING (DSM IV, Axis V) (Field 33)**

Enter a specific 2 digit code.

91+	Superior functioning in a wide range of activities
81-90	Minimal symptoms, good functioning in all areas
71-80	Symptoms are transient and expectable reactions
61-70	Some mild symptoms
51-60	Moderate symptoms
41-50	Serious symptoms
31-40	Some impairment in reality testing and communication
21-30	Behavior is considerably influenced by delusions or hallucinations
11-20	Some danger of hurting self or others
01-10	Persistent danger of severely hurting self or others
00	Inadequate information

**HEALTH STATUS (Field 34)**

1	No health condition
2	Stable / capable
3	Stable / incapable
4	Unstable / capable
5	Unstable / incapable
6	New symptoms / capable
7	New symptoms / incapable
9	Unknown

**HEALTH CARE APPOINTMENT (Field 35)**

Health, Vision, Dental	
1	Kept appointment or no appointment needed
2	Unable to access needed services
3	Did not keep or refused appointment
9	Unknown

**SUICIDE RISK (Field 36)**

1	No risk factors
2	Presence of risk factors
3	High potential for suicide
9	Unknown

**RESIDENTIAL ARRANGEMENT (Field 37)**

1	Street or shelter
2	Private residence or household
3	Supported or semi-supervised residence
4	Specialized facility - on-site supervision
5	Other institution
6	Jail or correctional facility

**DAILY ACTIVITY (Field 38)**

1	No educational, social or planned activity
2	Part-time educational activity
3	Full-time educational activity
4	Meaningful social activity
5	Volunteer or planned formal activities
6	Other activities
9	Unknown

**EMPLOYMENT (Field 39)**

1	Competitive
2	Temporary
3	Supported
4	Sheltered
5	Prevocational activity - job training, transitional, vocational rehabilitation
6	Not working - seeking employment
7	Unemployed / retired - uninterested in working
8	Other status - homemaker, student, caregiver, SSI disabled
9	Not in the labor force
99	Unknown

**EMPLOYMENT LEVEL (Field 40)**

1	Full time - 35+ hours per week
2	Part-time - 20-34 hours per week
3	Other - less than 20 hours per week

**LEGAL/COMMITMENT STATUS UPDATE (Field 41)**

1	Voluntary (no commitment status)
2	Voluntary with settlement agreement
3	Involuntary civil - Chapter 51
4	Involuntary civil - Chapter 55
5	Involuntary criminal
6	Guardianship only

**INCARCERATION / INVOLVEMENT WITH CRIMINAL JUSTICE SYSTEM (Field 42)**

1	None
2	On probation
3	Arrest(s)
4	Jailed / imprisoned (includes Huber)
5	On parole
6	Juvenile justice system contact
9	Unknown

**FINANCIAL SUPPORTS (Field 43)**

1	Paid employment
2	Social Security retirement benefits / pension
4	Disability payments
5	Worker's compensation
6	Food stamps
7	Temporary assistance to needy families (TANF)
8	Trust fund / savings income
9	Alimony / maintenance, child support
10	Unemployment compensation
11	Relatives and / or spouse
12	Rent supplements
13	County cash assistance
14	None
15	Other
16	Supplemental Security Income (SSI)
17	Social Security Disability Income (SSDI)
99	Unknown

**SOS DESK (608) 266-9198**

8:00 - 11:30 A.M. and 12:30 - 4:00 P.M.

Or leave voice mail message.

E-mail Address: dhssoshelp@wisconsin.gov

FAX: (608) 267-2437

HSRS Handbook and Terminal Operator's Guide:

<http://www.dhs.wisconsin.gov/HSRS/index.htm>

WI Department of Health Services

Division of Enterprise Services

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