

CDS Changes resulting from DRUG LAW REFORM (DLR)

Discussions with New York State criminal justice agencies following the passing of Drug Law Reform (DLR) have made it necessary for OASAS to make changes in the CDS. Commencing on October 7, 2009, programs assessing clients referred from the New York State criminal justice system will be receiving a signed consent form (TRS-49) from the referring criminal justice entity. This consent form will contain a New York State ID (NYSID) assigned by the Division of Criminal Justice Services (DCJS) and the date that the consent was initiated. This consent permits OASAS to share client data with the criminal justice agencies identified on the consent form in compliance with federal confidentiality requirements (42 CFR). In addition, the TRS-49 permits communication concerning the client between and among the treatment program and the referring criminal justice entity. The consent form is to be used for all clients who agree to enter treatment as an alternative to incarceration or as a condition of supervision or release from custody.

Programs should require the referring criminal justice entity to fax a copy of the signed consent form when an assessment session is requested. If the decision is made to admit the client, the NYSID and the consent date must be entered into the PAS-44N. If at this time, the program has not yet received a copy of the signed consent form, staff should contact the referring criminal justice entity and request that the information be provided electronically (i.e., fax or e-mail) or by telephone. If the information is obtained by telephone, a note indicating such should be entered into the client record. A copy of the TRS-49 must ultimately be received and placed in the client record. Programs experiencing difficulty in obtaining copies of the signed consent form from referring criminal justice entities, should inform their local OASAS Field Office.

If, at anytime in the future, a client informs the program that he/she wishes to revoke their consent, the program is required to edit the PAS-44N and enter the date of consent revocation. It is not anticipated that this will be a common occurrence.

New York State parole and probation agencies, district attorneys and the court system will be using the consent form for all substance abuse treatment referrals on and after October 7, 2009. However, not all referrals from criminal justice system entities will require TRS-49 Consent Forms (and thus not require entry of the NYSID or Date of Consent). If, for example, a client is referred by a federal criminal justice agency, a TRS-49 consent form is not required.

NYSID

The New York State ID (NYSID) is a nine alpha/numeric field consisting of 8 digits and a capital letter and is located on the top, left hand side of the consent form. It is assigned to persons by DCJS and is linked to fingerprints. The NYSID is permanently assigned to an individual. The NYSID will be obtained from the signed TRS-49 Consent Form and must be entered into the PAS-44N for every client admitted for whom the program received a TRS-49. If for some reason, this information is not yet available when the client's PAS-44N is created, the program should edit the form and enter the data when the information is obtained. This information is crucial to OASAS' ability to work with NYS criminal justice agencies and comply with DLR requirements to evaluate the effectiveness of this initiative. There are edit checks built into the

PAS-44N that determine if the NYSID entered into the system meets basic NYSID logic requirements. If the CDS rejects the NYSID entered, contact the referring criminal justice entity to obtain the correct NYSID.

CJ Consent Date

The CJ Consent Date is the date that the client signed the CJ Consent Form (TRS-49). It is found on the bottom, left hand side of the form. The date must be prior to the date of admission (but not more than 180 days prior) and after the client's date of birth.

CJ Consent Revocation Date

This date is entered in the unlikely event that, after the client is admitted and the PAS-44N has been submitted to OASAS, the client informs the program that he/she is choosing to revoke the consent granted on the CJ Consent Form (TRS-49). Programs must go in and edit the submitted PAS-44N. The only change required is the entering of the revocation date into the CJ Consent Revocation Date field.

PRINCIPAL REFERRAL SOURCE

Indicate the agency, individual, or legal entity that referred the client. If the client can be included under more than one, choose the category that represents the agency, individual or legal situation most responsible for the client seeking treatment in this program. In most cases, if a client was referred from a criminal justice entity on or after October 7, 2009, the program should have received a signed criminal justice consent form (TRS-49) that identifies the referring entity in the top, right hand side of the form. The program must check the matching TRS-49 referral code listed under Principal Referral Source (located in the Criminal Justice Services section on the PAS-44N feeder form). There are cross edits in the PAS-44N that will require selection of one of the TRS-49 codes if an entry has been made in the NYSID field (which will only be entered for a TRS-49 referral). The appropriate non-TRS-49 criminal justice referral code should be selected if the referral was not accompanied by a criminal justice consent form, and thus not considered a TRS-49 referral. If the client is currently involved with the criminal justice system and initially indicates "Self-Referral," probe to determine if the referral source may be more appropriately categorized using one of the criminal justice codes. If the client, in actuality, has been referred to treatment as an alternative to incarceration, or as a condition of supervision of release from custody, a TRS-49 form must be obtained from the referring criminal justice entity.

Criminal Justice Services

DLR District Attorney A direct referral from a District Attorney accompanied by a TRS-49. In order to select this code, the program must have received the signed criminal justice consent form which identified the District Attorney as the referral source.

DLR Court A direct referral from a court (in the vast majority of cases, a drug court) accompanied by a TRS-49. In order to select this code, the program must have received the signed criminal justice consent form which identified the court as the referral source.

DLR Probation A direct referral from a county Probation Department accompanied by a TRS-49. In order to select this code, the program must have received the signed criminal justice consent form which identified Probation as the referral source.

DLR Parole General A direct referral from the New York State Division of Parole accompanied by a TRS-49. In order to select this code, the program must have received the signed criminal justice consent form which identified the New York State Division of Parole General as the referral source and the client is not being resentenced or referred from Willard or a shock program.

DLR Parole Shock Release A direct referral from the New York State Division of Parole accompanied by a TRS-49. In order to select this code, the program must have received the signed criminal justice consent form which identified the New York State Division of Parole Shock as the referral source and the client is coming to the program after completing a shock program.

DLR Parole Willard Release A direct referral from the New York State Division of Parole accompanied by a TRS-49. In order to select this code, the program must have received the signed criminal justice consent form which identified the New York State Division of Parole Willard as the referral source and the client is coming to the program after completing the Willard program.

DLR Parole Resentence A direct referral from the New York State Division of Parole accompanied by a TRS-49 for a drug offender who was resentenced. In order to select this code, the program must have received the signed criminal justice consent form which identified the New York State Division of Parole Resentence as the referral source and the client has been resentenced and released.

Drinking Driver Referral A direct referral from the Department of Motor Vehicles' Drinking Driver Program (DDP), or a referral resulting from a specific Driving While Intoxicated (DWI), or Driving While Ability Impaired (DWAI) law enforcement incident (*which could involve alcohol and/or drugs*). *All DWI/DWAI referrals belong in this category regardless of related criminal justice status.*

Police A direct referral from a municipal, town, county or state police agency, including the sheriff's department. However, this does not include referrals from jails, which are normally operated by a sheriff, which should be reported using "City/County Jail." In all cases this will be before, or in lieu of, adjudication.

Family Court Family Court has jurisdiction over all juvenile cases (under the age of 16), except for juvenile offenders (JOs). It also has jurisdiction over neglect and some domestic violence cases.

Other Court This includes town and village, district, New York City criminal justice and federal courts. *It does not include referrals from a drug court or drug treatment court.* Referrals, in this category, will come directly from the court in lieu of sentencing to a jail or prison **and are not** accompanied by a TRS-49.

Alternatives to Incarceration A referral made by a criminal justice entity which is not required to provide a TRS-49 consent form (e.g., federal probation), as an alternative to incarceration (e.g., local court, non-drug court, a federal court). *This does not include DWI or DWAI cases which should be reported in "Drinking Driver-Referral."*

City/County Jail This would include referrals for detainees and sentenced offenders that are referred by local jail personnel (including personnel working in the jail for other agencies) for treatment provided in the community or jail itself. This does not include the NYS Department of Correctional Services (DOCS).

NYS Department of Correctional Services This category is for use only for those offenders that are under the jurisdiction of the State prison system (DOCS), either within the prison or who are receiving treatment off-site, as part of a work release program. *It does not include offenders who are under the jurisdiction of the Division of Parole, such as the Willard Drug Treatment Campus, which should be reported as "DLR Parole Willard Release."*

Office of Children and Family Services (OCFS) This category includes all direct referrals of a youth from an OCFS facility or office.

Self, Family, Other

Self-Referral

Family, Friends, Other Individuals

AA/NA and Other Self-Help

Chemical Dependence Treatment

CD Program in New York State Excludes VA CD programs located in New York State.

CD Program Out of State Excludes VA CD programs located outside of New York State.

CD VA Program Includes VA CD programs regardless of location.

CD Private Practitioner

Prevention/Intervention Services

School-Based Prevention Program

Community-Based Prevention Program

Employee Assistance Program

Other Prevention/Intervention Program

Health Care Services

Developmental Disabilities Program

Mental Health Provider

Managed Care Provider

Health Care Provider

AIDS Related Services

Employer/Educational/Special Services

Employer/Union (Non-EAP)

School (Other than Prevention Program)

Special Services (Homeless/Shelters)

Social Services

Local Social Services – Child Protective Services/CWA

Local Social Services – Income Maintenance

Local Social Services Treatment Mandate/Public Assistance The referral was made by a local social services district, or an authorized agent acting on its

behalf, following an assessment by an OASAS credentialed individual who has determined that the individual's alcohol/substance abuse precludes participation in work at the time of referral and is mandated to treatment as a condition for continued receipt of Public Assistance.

Local Social Services Treatment Mandate/Medicaid Only The referral was made by a local social services district, or an authorized agent acting on its behalf, following an assessment by an OASAS credentialed individual who has determined that the individual's alcohol/substance abuse precludes participation in work at the time of referral and is mandated to treatment as a condition for continued receipt of Medicaid.

Other Social Services Provider

Other Select this code if the source of referral can not reasonably be reflected by any of the codes above.

ARRESTS/INCARCERATION

IS THIS ADMISSION THE RESULT OF AN ALTERNATIVE TO INCARCERATION?

Indicate whether the client's admission is the result of his/her participation in one of the various alternatives to incarceration programs. Please check "yes" for all clients referred accompanied by a TRS-49 form from District Attorneys, Courts, Probation and Parole Release Willard.