

APPENDIX A:

Assisted Outpatient Treatment Characteristics Form

**Assisted Outpatient Treatment Evaluation
AOT CHARACTERISTICS FORM**

AOT Program Site: _____

Individual Completing Form: _____

Date: ____/____/____

Previous Form Completion Date (if applicable): ____/____/____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0465. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

INTRODUCTION

The Assistant Secretary for Planning and Evaluation (ASPE) has contracted with RTI International and its partners--Policy Research Associates (PRA) and Duke University--to conduct a cross-site evaluation of the 2016 Substance Abuse and Mental Health Services Administration grant program, entitled "Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness". This grant program provides funds for 17 newly implemented assisted outpatient treatment (AOT) programs that are located across the nation.

As part of our evaluation, we are investigating the civil and legal processes of AOT at each in-depth site. To achieve this critical aim of our project we are asking AOT local evaluators to complete this AOT characteristics form on a monthly basis. If this is the first time you are completing this form, the reference period dates back to initial implementation of your AOT program. On subsequent completions, the reference period will date back to the "Previous Form Completion Date" you provide above.

TARGET POPULATIONS

- Total number of civil AOT petitions since initial implementation of your AOT program [previous form completion date]: _____
- Number of these petitions that are ultimately dismissed/not placed on AOT: _____
 - How many of these are due to inappropriate diagnostic/clinical criteria? Specifically:
 - Primary substance use disorder: _____
 - Antisocial personality disorder: _____
 - Severe violence/dangerousness: _____
 - Other: _____ Please specify: _____
 - How many of these AOT case dismissals are due to the judge/magistrate/DA not approving the AOT order when the treatment team thinks the case is appropriate? _____
 - How many of these AOT case dismissals are due to a lack of clinical capacity (e.g., no spots currently available for ACT or other treatment)? _____
 - If any petitions have been dismissed/not placed on AOT for reasons not listed above, please describe them here. _____

- Number of these petitions that have been placed on AOT: _____
 - How many of these were stepped up from the community to an AOT order? _____
 - How many of these were stepped up from a voluntary settlement agreement (VSA) to an AOT order? _____
 - How many of these were stepped down from an inpatient setting to an AOT order? _____
 - Has the case mix presented above changed since initial implementation of your civil AOT program [previous form completion date]? If so, how?

- What happens when the individual being petitioned agrees to voluntarily comply with the order? Are they still placed on the AOT court order or is a VSA used instead? Please explain.

- Number of petitions that have been referred to a VSA: _____
 - How many of these were stepped up from the community to a VSA? _____
 - How many of these were stepped down from an AOT order to a VSA? _____
 - How many of these were stepped down from an inpatient setting to a VSA? _____
 - Has the case mix presented above changed since initial implementation of your civil AOT program [previous form completion date]? If so, how?

- Are individuals with ongoing criminal justice involvement (e.g., pending criminal charges) permitted to enter your civil AOT program?

___ Yes

___ No

If yes, are there additional, established criteria regarding types of charges to be excluded from AOT (e.g., felony, violent offenses)? Can these exclusions be overridden by the judge/magistrate based on judicial or clinical judgment of the case in question?

Please describe. _____

Number of AOT cases whose charges were dismissed prior to being placed on AOT, in which the order is used as a form of conditional release: _____

Number of AOT cases with ongoing criminal charges: _____

- Has this proportion changed since initial implementation of your civil AOT program [previous form completion date]? If so, how?

Number of AOT cases with ongoing criminal charges that end up on probation: _____

- Has this proportion changed since initial implementation of your civil AOT program [previous form completion date]? If so, how?

- Number of these cases in which the probation officer is present during the initial AOT hearing: _____

- Has this proportion changed since initial implementation of your AOT program [previous form completion date]? If so, how? _____

INITIATION

- Average length of time from petition to civil AOT commitment (in days): _____
 - Has this changed since initial implementation of your civil AOT program [previous form completion date]? What are the most common delays in getting a case on the docket? Explain/describe. _____

- Average length of AOT docket per court day (in hours): _____
 - Has this changed since initial implementation of your AOT program [previous form completion date]? If so, how? _____

- Average number of AOT cases heard during the docket (do not include other non-AOT civil cases here): _____
 - Has this changed since initial implementation of your civil AOT program [previous form completion date]? If so, how? _____

- Average time spent on/discussing each AOT case during the docket (in minutes, from reading the case number to the conclusion of the case): _____
 - Has this changed since initial implementation of your AOT program [previous form completion date]? If so, how? _____

- If statutorily required for the judge/magistrate to review the treatment plan prior to approving the civil AOT order, is the treatment plan discussed during the docket or reviewed with the treatment team/patient? Please also describe how/if patient and treatment provider preferences are solicited during the treatment plan review _____

- If yes, does the legal team, including the judge/magistrate, public defender, district attorney, etc., solicit patient preferences when discussing the treatment plan, including what has worked (or not worked) for them previously? Is the treatment team also involved in this discussion during the docket? Are patients able to meaningfully/appropriately participate in these discussions? Please describe: _____

- Do the legal stakeholders (i.e., judge/magistrate, public defender, district attorney) seek family and/or caregiver opinions regarding the case and treatment plan before or during the AOT docket? Please describe: _____

What happens in instances of disagreement, such as when legal representatives disagree with medical testimony, or when the client/family disagrees with the AOT order?

- Perceived level of judicial involvement during the initial civil AOT hearing:

___ Minimal/low

___ Medium

___ High

Please explain the reason for your selection regarding level of involvement. For example, does the judge/magistrate make conditions of AOT explicit to the patient and/or include specific warnings, reminders, or words of encouragement? Does the judge/magistrate make sure that the treatment team is on board and able to provide all required services?

- Has this involvement varied significantly from judge to judge/magistrate to magistrate, or changed over time at your site? If so, how?

POST-INITIATION PROCESSES

- Are status hearings used to monitor progress over the course of an order?

___ Yes

___ No

If yes, on average, how frequently? _____

If yes, are they official proceedings (e.g., with a court reporter and proceedings being read into record)?

___ Yes

___ No

- If yes, who is present at the hearings? _____

- Please describe your AOT program's response to noncompliance via the use of pickup orders, sanctions, appearances before the judge, consideration of order modification, etc.:

- Has this changed since initial implementation of your AOT program [previous form completion date]? If so, how? _____

- Please describe renewal or closeout processes, including the clinical determination involved, and if your AOT program makes use of voluntary settlement agreements as a step-down from AOT: _____

- Has this changed since initial implementation of your AOT program [previous form completion date]? If so, how? _____

- Of the total number of AOT cases specified above, how many have been renewed even though the client has been successful on AOT (i.e., the order is renewed because the treatment or legal stakeholders thinks that the civil AOT order is the reason the person is improving, and without the order, for example, the client would stop attending treatment)? Please describe: _____

- Perceived level of judicial involvement during the civil AOT order:

___ Minimal/low

___ Medium

___ High

- Please explain the reason for your selection. For example, does the judge/magistrate include specific warnings, reminders, or words of encouragement during any hearings held during the order? How do they respond in instances of noncompliance? _____

- Has this involvement varied significantly from judge to judge/magistrate to magistrate, or changed over time? Do you think this level of involvement is appropriate/useful? If so, how/explain your thoughts regarding the level of judicial involvement or lack thereof and its relationship to effective/not effective AOT processes and treatment required under the civil AOT order? _____

- Does your site's AOT statute limit judicial involvement once the order has been granted in ways that limit the effectiveness of AOT or the treatment required under the civil AOT order? If so, how? _____
