Dane County Department of Human Services

Comprehensive Community Services – Consumer Status Data Form

1202 Northport Drive, Madison, WI 53704
(608) 242-6415

Participant County ID #:		
Participant Full Name:		
SF Agency:	County Program #:	Report Date:
County of Residence (if not Dane County):	Referral Source (see pg. 2):	Staff Initials:

Legal/Commitment Status (Check 1 Code)

- ☐1 – None (Voluntary Involvement)
- ☐2 – Settlement Agreement
- ☐3 – Involuntary Civil – Chapter 51
- ☐4 – Involuntary Civil – Chapter 55
- ☐5 – Involuntary Criminal
- ☐6 – Guardianship Only
- ☐99 – Unknown

Presenting Problem(s) (Check Up to 3 Codes)

- ☐1 – Marital / Family
- ☐2 – Social / Interpersonal
- ☐3 – Coping with Daily Roles and Activities
- ☐4 – Medical / Somatic
- ☐5 – Depressed Mood / Anxious
- ☐6 – Attempt, Threat or Danger of Suicide
- ☐7 – Alcohol
- ☐8 – Drugs
- ☐9 – Involvement with Criminal Justice System
- ☐10 – Eating Disorder
- ☐11 – Disturbed Thoughts
- ☐12 – Victim of Abuse, Assault or Rape
- ☐13 – Runaway Behavior
- ☐14 – Emergency Detention
- ☐99 – Unknown

BRC Target Population (Check 1 Code – **MUST** select low or high)

- ☐H – Need Ongoing, High Intensity, Comprehensive Services
- ☐L – Need Ongoing, Low Intensity, Comprehensive Services
- ☐S – Need Short-Term Situational Services

Principal/Primary Diagnosis (Need ICD-10 Codes)

Effective 10/1/2015, all service authorizations with a start date on 10/1/2015 or later will need to use the ICD-10 diagnosis codes. Service authorizations that started prior to 10/1/2015 will use the ICD-9 diagnosis codes.

If BRC Target Population is S, stop here. If BRC is H or L, the entire form must be completed.

Psychosocial & Environmental Stressors (Check 1 Code)

- ☐0 – Inadequate Info.
- ☐1 – None
- ☐2 – Mild
- ☐3 – Moderate
- ☐4 – Severe
- ☐5 – Extreme
- ☐6 – Catastrophic

Health Status (Check 1 Code)

- ☐1 – No Health Condition
- ☐2 – Stable / Capable
- ☐3 – Stable / Incapable
- ☐4 – Unstable / Capable
- ☐5 – Unstable / Incapable
- ☐6 – New Symptoms / Capable
- ☐7 – New Symptoms / Incapable
- ☐99 – Unknown

Suicide Risk (Check 1 Code)

- ☐1 – No Risk Factors
- ☐2 – Presence of Risk Factors
- ☐3 – High Potential for Suicide
- ☐99 – Unknown

Living Arrangement (Check 1 Code)

- ☐1 – Street, shelter, no fixed address, homeless
- ☐2 – Private residence or household; living alone or with others without supervision; includes persons age 18 and older living with parents (**ADULTS ONLY**)
- ☐3 – Supported residence (**ADULTS ONLY**)
- ☐4 – Supervised licensed residential facility
- ☐5 – Institutional setting, hospital, nursing home
- ☐6 – Jail or correctional facility
- ☐7 – Child under age 18 living with biological or adoptive parents
- ☐8 – Child under age 18 living with relatives, friends
- ☐9 – Foster home
- ☐10 – Crisis stabilization home/center
- ☐11 – Other living arrangement
- ☐99 – Unknown

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Employment Status (Check 1 Code)

☐1 – Full-time competitive employment (35 or more hours/week)
☐2 – Part-time competitive employment (less than 35 hours/week)
☐3 – Unemployed (but looking for work in past 30 days)
☐4 – Not in the labor force – homemaker
☐5 – Not in the labor force – student
☐6 – Not in the labor force – retired
☐7 – Not in the labor force – disabled
☐8 – Not in the labor force – jail, correctional or other institutional facility
☐9 – Not in the labor force – sheltered non-competitive employment
☐10 – Not in the labor force – other reason
☐11 – Supported competitive employment
☐98 – Not applicable – Children 15 and under
☐99 – Unknown

Daily Activity (Check Up to 3 Codes)

☐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 activities
☐6 – Other respected status
☐99 – Unknown

Criminal Justice System Involvement within the Last 6 Months (Check Up to 4 Codes)

☐1 – None
☐2 – On Probation
☐3 – Arrest(s)
☐4 – Jailed / Imprisoned
☐5 – On Parole
☐6 – Juvenile Justice System
☐99 – Unknown

Number of Arrests in the Past 30 Days (Check Code **AND** Enter Number)

☐0-98 – Number of Arrests _____ (if none, put 0)
☐99 – Unknown

Number of Arrests in the Past 6 Months (Check Code **AND** Enter Number)

☐0-98 – Number of Arrests _____ (if none, put 0)
☐99 – Unknown

Referral Source

Code	Value	Code	Value
1	Self	13	IV Drug Outreach Worker
2	Family, Friend or Guardian	14	Other
3	AODA Program / Provider (Includes AA, Al-Anon)	15	Drug Court
4	Inpatient Hospital or Residential Facility	16	OWI Court – Monitors the Multiple OWI Offender
5	School, College	17	Screening Brief Intervention Referral Treatment (SBIRT)
6	IDP – Court	18	Mental Health Program / Provider
7	IDP – Division of Motor Vehicle	19	Hospital Emergency Room
8	Corrections, Probation, Parole	20	Primary Care Physician or Other Health Care Program / Provider
9	Other Court, Criminal or Juvenile Justice System	21	Law Enforcement, Police
10	Employer, Employee Assistance Program (EAP)	22	Mental Health Court
11	County Social Services	23	Homeless Outreach Worker
12	Child Protective Services Agency	99	Unknown