

Data Dictionary.Tables 2021 October DD Last Edit: 2023-02-10

North Sound Behavioral Health Administrative Services Organization 2021 E College Way, Ste 101, Mount Vernon, WA 98273

Action Code	Description
A	Add a record
C	Change a record
D	Delete a record
ID	ASAM Level
0	Place holder for people who are truly not at any r
0.5	Kindergarten, Less than one school grade
1	Outpatient Services
1-WM	Ambulatory WM without Extended On-Site Monitoring
2-WM	Ambulatory WM with Extended On-Site Monitoring
2.1	Intensive Outpatient Services
2.5	Partial Hospitalization Services
3.1	Clinically Managed Low-Intensity Residential Servi
3.2-WM	Clinically Managed Residential WM
3.3	Clinically Managed Population Specific High Intens
3.5	Clinically Managed High-Intensity Residential Serv
3.7	Medically Monitored High-Intensity Inpatient Servi
3.7-WM	Medically Monitored Inpatient WM
4	Medically Managed Intensive Inpatient Services
4-WM	Medically Managed Intensive WM
ОТР	Opioid Treatment Program
ID	Auth Change Reason
1	Change in Funding
2	Lost to Contact
3	Death
4	Early Termination of Episode
5	Late Admission
6	Duplicate
7	Client Info Update Needed
99	Other
<u>ID</u>	Auth Change Type
1	Amendment - chg admit/exit date
2	Retraction - void the auth
ID	Auth Eligibility Criteria
40	PPW
41	WSH Discharge
42	Drug Court
43	Using IV Drugs
44	Pending Charges
46	Current OTP Services
47	Assessment Only
48	ASO SABG
49	SUD Diagnosis

60	МН ОР
ID	Auth Eligibility Type
10	Medicaid
20	SABG
21	CJTA
22	LR
23	STR
24	PACT
25	PPW
26	IUID
27	ОТР
28	GFS
29	LR FFS
30	LR Case Rate
31	AOT FFS
32	AOT Case Rate
99	No Verified Funding
ID	Auth Poverty Level
30	Less Than 221%
31	221% To 400%
ID	Auth Request Type
10	Initial
11	Renewal
ID	Auth Review Reason
1	Medical Necessity
2	Lapse in Participation
3	Prest Review
4	Clt does not Live in NS RSA
5	Clt does not meet Elig Requirements
6	Clt does not meet Priority Pop Crit
7	Additional Information Required
8	Funding not available
9	SpendDown at time of Request
ID	Auth Status
1	Approve
2	Reject
3	Pending
4	ChangeApprove
5	ChangeRejected
<u>ID</u>	Auth Service Type
10	OP MH

11	OP SUD
12	RES SUD
13	OTP
14	IOP MH
15	RES MH
16	RES OUD
17	RES CORP
18	DETOX
ID	Auth Verify Income Source
10	Tax Return
11	Pay Stub
12	Unemployment
13	Bank Statement
14	Social Security
15	Retirement
99	No Income
ID	COD Assmt
1	Less severe MH/Less severe SUD
2	More severe MH/Less severe SUD
3	Less severe MH/More severe SUD
4	More severe MH/More severe SUD
9	No Co-occurring treatment need
	5
ID	COD EDS
0	EDS Score of 0
1	EDS Score of 1
2	EDS Score of 2
3	EDS Score of 3
4	EDS Score of 4
5	EDS Score of 5
8	Refused
9	Unable to Complete
ID	COD IDS
0	IDS Score of 0
1	IDS Score of 1
2	IDS Score of 2
3	IDS Score of 3
4	IDS Score of 4
5	IDS Score of 5
8	Refused
9	Unable to Complete
-	
ID	COD SDS
0	SDS Score of 0
~	

1	SDS Score of 1
2	SDS Score of 2
3	SDS Score of 3
4	SDS Score of 4
5	SDS Score of 5
8	Refused
9	Unable to Complete

ID	County Code
53001	Adams
53003	Asotin
53005	Benton
53007	Chelan
53009	Clallam
53011	Clark
53013	Columbia
53015	Cowlitz
53017	Douglas
53019	Ferry
53021	Franklin
53023	Garfield
53025	Grant
53027	Grays Harbor
53029	Island
53031	Jefferson
53033	King
53035	Kitsap
53037	Kittitas
53039	Klickitat
53041	Lewis
53043	Lincoln
53045	Mason
53047	Okanogan
53049	Pacific
53051	Pend Oreille
53053	Pierce
53055	San Juan
53057	Skagit
53059	Skamania
53061	Snohomish
53063	Spokane
53065	Stevens
53067	Thurston
40050	Unknown or out of state
53069	Wahkiakum
53071	Walla Walla
53073	Whatcom

53075	Whitman
53077	Yakima
<u>ID</u>	DCR Outcome
2	Referred to voluntary outpatient mental health ser
3	Referred to voluntary inpatient mental health serv
4	Returned to inpatient facility/filed revocation pe
5	Filed petition - recommending LRA extension.
6	Referred to non-mental health community resources.
9	Other
10	Referred to acute detox
11	Referred to sub-acute detox
12	Referred to sobering unit
13	Referred to crisis triage
14	Referred to SUD intensive OP program
15	Referred to SUD Inpatient Program
16	Referred to SUD residential program
17	No detention - E&T provisional acceptance did not
18	No detention - Unresolved medical issues
22	Petition filed for outpatient evaluation
23	Filed petition recommending AOT extension
24	No detention – Secure Detox provisional acceptance
25	Detention (120 hours)
25	Detention to Secure Detox facility (120 hours)
90	Refer to Crisis Stabilization - Whatcom
91	Refer to Crisis Stabilization - Skagit
92	Refer to Crisis Triage - Snohomish
ID	Delay Reason
01	Staffing
02	Complex
	Education
1	No formal schooling
2	Nursery school, pre-school, head start
3	Kindergarten, Less than one school grade
4	Grade 1
5	Grade 2
6	Grade 3
7	Grade 4
8	Grade 5
9	Grade 6
10	Grade 7
11	Grade 8
12	Grade 9 Grade 10
13	Grade 10
14	Grade 11

15	Grade 12
16	High School Diploma or GED
17	1st Year of College
18	2nd Year of College
19	3rd Year of College
20	4th Year of College
21	Bachelors Degree
22	Graduate or professional school
23	Vocational School
97	Unknown
<u>ID</u>	Eligibility Criteria
40	PPW
41	WSH Discharge
42	Drug Court
43	Using IV Drugs
44	Pending Charges
46	Current OTP Services
47	Assessment Only
48	ASO SABG
49	SUD Diagnosis
60	MH OP
ID	Eligibility Type
10	Medicaid
20	SABG
22	LR
23	STR
24	PACT
25	PPW
26	IUID
27	OTP
28	GF-S
99	No Verified Funding
ID	Employment
01	FULL TIME
02	PART TIME
03	Unemployed
05	Employed
14	Homemaker
24	Student
34	Retired
44	Disabled
64	Other Reported Classification
74	Sheltered/Non-competitive Employment
84	Not In The Labor Force

96	Not Applicable
97	Unknown
98	Not Collected
ID	Ethnicity
010	White/Caucasian
031	Asian Indian
032	Hawaiian
033	Other Pacific Islander
034	Other Asian
040	Black/African American
050	Some Other Race
021	American Indian
604	Cambodian
605	Chinese
608	Filipino
611	Japanese
612	Korean
613	Laotian
660	Guamanian or Chamorro
999	Not Reported/Unknown
	Frequency lies
<u>ID</u> 1	<u>Frequency Use</u> No Use In The Past Month
2	1-3 Times In Past Month
3	4-12 Times In Past Month
4	13 or More Times In Past Month
5	Daily
6	Not Applicable
7	Not Available
,	Not Available
ID	Block Grant Funded
1	Yes MHBG used to pay for services and supports
3	Yes SABG used to pay for services and supports
5	None Block Grant funding does not apply
6	SABG Covid Enhancement
7	SABG ARPA (American Rescue Plan Act of 2021)
8	MHBG Covid Enhancement
9	MHBG ARPA (American Rescue Plan Act of 2021)
97	Unknown
98	Not collected
ID	Funding Type
01	Medicaid only
02	•
02 03	Medicaid and non-Medicaid sources
02 03 97	•

98	Not collected
ID	Gender
1	Female
2	Male
4	Transgender
5	Intersex
7	Transgender female
8	Transgender male
97	Unknown
98	Refused
ID	Hearing Outcome
0	Dismissed
1	14 Day MH Commitment
2	90 Day MH Commitment or extension
3	180 Day MH Commitment or extension
4	90 Day MH LRA or LRA extension
5	180 Day MH LRA or LRA extension
6	Agreed to Voluntary Treatment
7	Revoke LRA
8	Reinstate LRA
9	120 Hour Commitment under Joel Law
10	Dismissal of petition filed under Joel Law
14	14 Day SUD Commitment or extension
19	90 Day SUD LRA or LRA extension
23	90 Day MH LRA Extension
24	180 Day MH LRA Extension
27	90 Day SUD LRA Extension
28	180 Day SUD LRA Extension
30	14 Day MH LRA
31	365 Day MH LRA
32	18 Month MH AOT Order
33	Revoke MH AOT
34	Reinstate MH AOT
35	Revoke SUD LRA
36	Reinstate SUD LRA
37	14 Day SUD LRA
38	18 Month SUD AOT Order
39	Revoke SUD AOT
40	Reinstate SUD AOT
<u>ID</u>	Hispanic Origin
000	Specific Origin Unknown
709	Cuban
722	Mexican
727	Puerto Rican

799	Other Specific Hispanic
998	Not of Hispanic Origin
999	Unknown
ID	Income Source
1	Wages/Salary
2	Public Assistance
3	Retirement/Pension
4	Disability
20	Other
21	None
97	Unknown
98	Not collected
חו	Investigation Outcome
<u>ID</u> 1	Detention to MH facility (72 hours)
2	Referred to voluntary Outpatient MH Svc
3	Referred to voluntary Inpatient MH Svc
4	Returned to Inpatient facility/filed revocation pe
5	Filed petition-recommending LRA extension
6	Referred to non-MH community resources
7	Detention to Secure Detox facility (72 hours)
9	Other
10	Referred to acute detox
10	Referred to sub-acute detox
12	Referred to sobering unit
13	Referred to crisis triage
15	Referred to SUD intensive outpatient program
15	Referred to SUD inpatient program
16	Referred to SUD residential program
17	
18	No detention–ET provisional accept did not occur w No detention – Unresolved medical issues
19	Non-emergent detention petition filed
20	Did not require MH or CD services
20	Referred for hold
22	Petition filed for outpatient evaluation
23	Filed petition recommending AOT extension
23	No detention-Secure Detox provisional accept did n
24	
ID	Investigation Reason
1	Investigation was mainly related to mental disorde
2	Investigation was mainly related to a chemical dep
3	Investigation was related in some degree to both a
ID	Investigation Referral Source
1	Family
2	Hospital
2	Ποοριταί

3	Professional
4	Care Facility
5	Legal Representative
6	School
7	Social Service Provider
8	Law Enforcement
9	Community
10	Other
11	Referral from MCR to DCR
70	Impact Team Law Enforcement Referral
ID	Legal Reason
A	Dangerous to Self
В	Dangerous to Others
C	Gravely Disabled
D	Dangerous to property
X	Revoked for reasons other than above
Z	NA- person was not involuntarily detained under IT
ID	Marital Status
1	Single or Never married
2	Now married or Committed Relationship
3	Separated
4	Divorced
5	Widowed
97	Unknown
ID	Method
1	Inhalation
2	Injection
3	Oral
4	Other
5	Smoking
ID	Military Service
1	Yes
2	No
3	Refuse
4	Unknown
ID	Mobile Resp Referral Given
01	Referred to Substance Use Disorder and Mental Heal
02	Non-Behavioral Health Community Services
03	Forensic Projects for Assistance in Transition fro
04	Forensic Housing and Recovery through Peer Service
05	Traditional HARPS
06	Traditional PATH

07	Other housing resources
08	Adult Protective Services
09	EBT/ABD (Food/Cash Benefits)
10	Educational Assistance
11	Employment Assistance
12	Home and Community Services
13	Job Training
14	Medical Insurance Services
15	Dental Care
16	SSI/SSDI
17	Veteran's Administration (VA) Benefits
18	Voluntary Inpatient Behavioral Health Services
19	Alternative Housing Supports
20	Food Bank
21	No referrals given
ID	Mobile Resp Outcome
1	Routine Follow-up completed
2	Stabilized no additional services needed
3	Stabilized with follow up recommended
4	Transport to crisis triage/stabilization
5	Transport to community hospital (includes ER)
6	Police/911
7	DCR for ITA evaluation/investigation Authorization
8	Unable to locate caller
97	Other
<u>ID</u>	Mobile Resp Referral Source
1	Family or Friend
2	Hospital
3	Professional
4	Care Facility
5	Legal Representative
6	School: post-secondary school
7	
7	Social Service Provider
8	
	Social Service Provider Law Enforcement Community: landlord, business, neighbors
8	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral
8 9	Social Service Provider Law Enforcement Community: landlord, business, neighbors
8 9 10	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral
8 9 10 11	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral Crisis Call Center Referral Designated Crisis Responder to MCR Impact Team
8 9 10 11 12	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral Crisis Call Center Referral Designated Crisis Responder to MCR
8 9 10 11 12 70	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral Crisis Call Center Referral Designated Crisis Responder to MCR Impact Team
8 9 10 11 12 70 97	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral Crisis Call Center Referral Designated Crisis Responder to MCR Impact Team Other
8 9 10 11 12 70 97	Social Service Provider Law Enforcement Community: landlord, business, neighbors Self-Referral Crisis Call Center Referral Designated Crisis Responder to MCR Impact Team Other <u>Mobile Resp Time</u>

ID	Mobile Resp Type
01	Mobile Crisis Response
02	Mobile Crisis provided via Telehealth
02	
ID	Needle Use Ever
1	Continuously
2	Intermittently
3	Rarely
4	, Never
97	Unknown
98	Refused to answer
ID	Needle Use Recent
Ν	No
R	Refused to Answer
U	Unknown
Y	Yes
ID	Opioid Therapy
1	Yes
2	No
3	Not applicable
7	Unknown
8	Not collected
ID	Parenting
 N	No
R	Refused to Answer
U	Unknown
Ŷ	Yes
ID	Peak Use
1	No Use
2	1-3 Times In A Month
3	4-12 Times In A Month
4	13 or More Times In A Month
5	Daily
6	Not Applicable
0	Name Of Commiss
	Place Of Service
01	Pharmacy
02	Telehealth
03	School
04	Homeless Shelter
05	Indian Health Service Free-standing Facility
06	Indian Health Service Provider-based Facility

07	Tribal 638 Free-standing Facility
08	Tribal 638 Provider-based Facility
09	Prison - Correctional Facility
10	Telehealth Home
11	Office
12	Home
13	Assisted Living Facility
14	Group Home
15	Mobile Unit
16	Temporary Lodging
17	Walk-in Retail Health clinic
19	Off Campus - Outpatient Hospital
20	Urgent Care Facility
21	Inpatient Hospital
22	On Campus - Outpatient Hospital
23	Emergency Room Hospital
24	Ambulatory Surgical Center
25	Birthing Center
26	Military Treatment Facility
31	Skilled Nursing Facility
32	Nursing Facility
33	Custodial Care Facility
34	Hospice
41	Ambulance ?Land
42	Ambulance ? Air or Water
49	Independent Clinic
50	Federally Qualified Health Center
51	Inpatient Psychiatric Facility
52	Psychiatric Facility-Partial Hospitalization
53	Community Mental Health Center
54	Intermediate Care Facility/Mentally Retarded
55	Residential Substance Abuse Treatment Facility
56	Psychiatric Residential Treatment Center
57	Non-residential Substance Abuse Treatment Facility
60	Mass Immunization Center
61	Comprehensive Inpatient Rehabilitation Facility
62	Comprehensive Outpatient Rehabilitation Facility
65	End-Stage Renal Disease Treatment Facility
71	Public Health Clinic
72	Rural Health Clinic
81	Independent Laboratory
99	Other Place of Service
ID	Poverty Level
0	Unknown
31	221% То 400%
30	Less Than 221%

ID	Preferrered Language
15	American Sign Language
23	Amharic
33	Arabic
6	Cambodian
16	Cantonese
26	Czech
35	Dutch
13	English
25	Farsi
24	Finnish
12	French
14	German
21	Greek
36	Gujarti
32	Hindi
8	Hmong
17	Hungarian
10	llocano
37	Indian
38	Italian
1	Japanese
2	Korean
39	Lakota Sioux
0	Language Unknown
5	Laotian
40	Malay
7	Mandarin
41	Marathi
27	Mien
42	Norwegian
34	Other Chinese - Not Cantonese or Mandarin
99	Other Language
44	Panjabi
20	Polish
30	Puyallup
19	Romanian
18	Russian
29	Salish
9	Samoan
3	Spanish
11	Tagalog
31	Thai
22	Tigrigna
43	Ukrainian
4	Vietnamese

28	Yakama
ID	Pregnant
Ν	No
R	Refused to Answer
U	Unknown
Y	Yes
<u>ID</u>	Presenting Problem
1	Mental Health
2	Substance Use Disorder
3	Co-Occurring
97	Other
ID	Program ID
1	PACT Program for Assertive Community Treatment
2	Chemical Dependency Disposition Alternative commit
3	Chemical Dependency Disposition Alternative locall
11	Jail Services
19	Functional Family Therapy
20	Illness Self-Management/Illness Management and Rec
21	Integrated Dual Disorders Treatment
23	Multi-systemic Therapy
25	Supported Housing
26	Therapeutic Foster Care
28	(WISe), Wraparound with Intensive Services
29	HARPS), Housing and Recovery through Peer Services
30	Supported Employment Program
34	CJTA), (DC)
35	CJTA ,(NDC)
36	Diversion Program
38	New Journeys
39	BEST
42	Peer Bridger Program – Hospital and Community
43	Peer Respite
44	Intensive Residential Teams
45	Intensive Behavioral Health Facilities
51	Substance Use Disorder – Outpatient
52	Substance Use Disorder – Intensive Outpatient
54	Substance Use Disorder – Intensive Inpatient
55	Substance Use Disorder – Long Term Residential
56	Substance Use Disorder – Recovery House
57	Substance Use Disorder – Withdrawal Management
58	Substance Use Disorder – Opiate Substitution
59	Substance Use Disorder – Housing Support Services
ID	Program End Reason

1	Treatment completed
2	Left against advice, including dropout
3	Terminated by facility
4	Transferred to another SA treatment or MH program
5	Incarcerated
6	Death by Suicide
7	Death Not by Suicide
8	Other
9	Lost to Contact
10	Administrative Closure
ID	Program Referal Source
1	Individual/self-referral
2	Alcohol/Drug Abuse Provider
4	Other Health Care Provider
6	School (Educational)
7	Employer/EAP
8	Court/CriminalJustice/DUI/DWI
9	Other Community Referral
97	Unknown
<u>ID</u>	Primary Intervention Reason
01	Mental Health
02	Substance Use Disorder
03	Co-Occurring
04	Other
ID	Race
021	American Indian/Alaskan Native
031	Asian Indian
040	Black or African American
604	Cambodian
605	Chinese
608	Filipino
660	Guamanian or Chamorro
081	Iraqi or Iranian
611	Japanese
612	Korean
613	Laotian
801	Middle Eastern
032	Native Hawaiian
034	Other Asian
033	Other Pacific Islander
050	Other Race
655	Samoan
999	Unknown
619	Vietnamese

010	White
ID	Referral Source
1	Community CD Provider
2	Community MH Agency
3	Crisis Triage
4	Individual Professional Staff
5	Self
6	Employer or Co-worker
7	Family or Friend
8	Hospital ER
9	Hospital Medical Unit
10	Hospital Psychiatric Unit
11	Law Enforcement Agency
12	MH Evaluation & Treatment Facility
13	Residential Facility
14	Sobering Center or Detox
15	Secure Detox Facility
16	Other
21	Social Service Agency
22	Probation
23	Corrections
24	Court
25	School
26	Tribe
27	State Hospital (WSH, ESH, or CSTC)
- O	Informed Concert
	Informed Consent Informed consent to release
Y	Yes
T	Tes .
ID	Residence
1	Homeless without housing
2	Foster Home/ Foster Care
3	Residential Care
4	Crisis Residence
5	Institutional Setting
6	Jail/ Correctional Facility
7	Private Residence
8	Independent Living
9	Dependent Living
10	Private Residence
11	Other Residential Status
12	Homeless with housing
97	Unknown
ID	<u>Return to InPt</u>

1	DCR determined detention during course of investig
2	Outpatient provider requested revocation
9	N/A
<u>ID</u>	<u>School Attendance</u>
N	No
R	Refused to Answer
U	Unknown
Y	Yes
ID	ASAM Screen or Assmt
A	COD Quadrant Asmnt
S	GAIN-SS Screening
B	Both
ID	Self Help Attendance
1	No attendance
2	Less than once a week
3	About once a week
4	2 to 3 times per week
5	At least 4 times a week
6	Not Collected
97	Unknown
<u>ID</u>	<u>Sexual Orientation</u>
1	Heterosexual
3	Gay/Lesbian/Queer/Homosexual
4	Bisexual
5	Questioning
9	Choosing not to disclose
3	Gay/Lesbian/Queer/Homosexual
4	Bisexual
5	Questioning
3 4 5 9 <u>ID</u> 1 2 3 4 97	Gay/Lesbian/Queer/Homosexual Bisexual Questioning Choosing not to disclose SMI SED Status SMI SED At risk for SED Not SMI or SED Unknown

1	None
2	Alcohol
3	Cocaine/Crack
4	Marijuana/Hashish
5	Heroin
6	Other Opiates And Synthetics
7	PCP-phencyclidine
8	Other Hallucinogens
9	Methamphetamine
10	Other Amphetamines
11	Other Stimulants
12	Benzodiazepine
13	Other non-Benzodiazepine Tranquilizers
14	Barbiturates
15	Other Non-Barbiturate Sedatives or Hypnotics
16	Inhalants
17	Over-The-Counter
18	Oxycodone
19	Hydromorphone
20	MDMA (ecstasy, Molly, etc.)
21	Other
22	Fentanyl
ID	Service End Reason
01	Treatment completed
01 02	Treatment completed Dropout
	-
02	Dropout
02 03	Dropout Terminated by facility
02 03 04	Dropout Terminated by facility Transferred client showed
02 03 04 05	Dropout Terminated by facility Transferred client showed Incarcerated
02 03 04 05 06	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide
02 03 04 05 06 07	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide
02 03 04 05 06 07 08	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other
02 03 04 05 06 07 08 14	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show
02 03 04 05 06 07 08 14 24	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility
02 03 04 05 06 07 08 14 24 34	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH
02 03 04 05 06 07 08 14 24 34 96	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable
02 03 04 05 06 07 08 14 24 34 96	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown
02 03 04 05 06 07 08 14 24 34 96 97	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected
02 03 04 05 06 07 08 14 24 34 96 97 98	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected Lost to Contact
02 03 04 05 06 07 08 14 24 34 96 97 98 09	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected Lost to Contact Admin Close
02 03 04 05 06 07 08 14 24 34 96 97 98 09 10 ⊥	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected Lost to Contact Admin Close
02 03 04 05 06 07 08 14 24 34 96 97 98 09 10 ID 1	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected Lost to Contact Admin Close <u>Service Referral Source</u> Individual/self-referral
02 03 04 05 06 07 08 14 24 34 96 97 98 09 10 ID 1	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected Lost to Contact Admin Close Service Referral Source Individual/self-referral Alcohol/Drug Abuse Provider
02 03 04 05 06 07 08 14 24 34 96 97 98 09 10 ID 1 2 4	Dropout Terminated by facility Transferred client showed Incarcerated Death by Suicide Death Not by Suicide Other Transferred Client no show Transferred to non SSA or SMH facility Discharge from SH Not Applicable Unknown Not Collected Lost to Contact Admin Close <u>Service Referral Source</u> Individual/self-referral Alcohol/Drug Abuse Provider Other Health Care Provider

8	Court/CriminalJustice/DUI/DWI
9	Other Community Referral
97	Unknown
<u>ID</u>	Voluntary Outcome
0	NA
1	Referred to voluntary outpatient mental health ser
2	Referred to voluntary inpatient mental health serv
3	Referred to non-mental health community resources.
4	Refer to Criminal Justice System
5	Refer to ER/Emergency Medical Services
6	Referred to chemical dependency intensive outpatie
7	Referred to chemical dependency inpatient program
8	Referred to chemical dependency residential progra
9	No Outcome - No Action Taken
10	Crisis Resolved - No Referral
11	Refer to Crisis Stabilization - Whatcom
12	Refer to Crisis Stabilization - Skagit
13	Refer to Crisis Triage - Snohomish
14	Refer to Another Agency for ITA
99	Other Voluntary Outcome NEC

Completion time: 2023-02-10T12:11:53.0962086-08:00

<u>ID</u>	Primary Language
sgn	American Sign Language
amh	Amharic
ara	Arabic
chi	Cantonese
cze	Czech
dut	Dutch
eng	English
per	Farsi
fin	Finnish
fre	French
deu	German
gre	Greek
guj	Gujarti
hin	Hindi
hmn	Hmong
hun	Hungarian
ilo	llocano
hin	Indian
ita	Italian
jpn	Japanese
kor	Korean
tet	Lakota Sioux
lao	Laotian
msa	Malay
chi	Mandarin
mar	Marathi
chi	Mien
nor	Norwegian
chi	Other Chinese - Not Cantonese or Mandarin
pol	Polish
sal	Puyallup
ron	Romanian
rus	Russian
sal	Salish
smo	Samoan
spa	Spanish
tgl	Tagalog
tha	Thai
tir	Tigrigna
ukr	Ukrainian
mis	Uncoded Languages
und	Undetermined
vie	Vietnamese
chi	Yakama

ID	State
AL	Alabama
AK	Alaska
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
СТ	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NE	Nebraska
NV	Nevada
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
ОК	Oklahoma
OR	Oregon
OT	Other
PA	Pennsylvania
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
ТХ	Texas
XX	Unknown

UT	Utah
VT	Vermont
VA	Virginia
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming

Placement Unit	PlacementUnitCode	
ABHS Chehalis	1598123226	j
ABHS Secure Detox	1609365238	,
ABHS Spokane	1215286851	
Affiliated Health Skagit	1568548121	
BHC Fairfax Monroe	1053327890)
Bridges E&T Yakima	1083035547	,
Carondolet Psych	1053775841	
Cascade Behavioral Hospital LLC	1124456967	,
Cascade Behavioral Hospital Tukwila	1124456967	,
Cascade E&T Center	1760979298	
Cascade Valley Arlington	1073566246	
Central WA Hospital	1306883228	
Childrens - Seattle	1467536276	ì
Compass - Mukilteo E&T	1942324710)
Eastern State Hospital	1467440602	
Evergreen Hospital Med Ctr - Kirkland	WA 1548463474	
EvergreenHealth Monroe Valley Gene	ral 1962513572	
Greater Lakes Recovery Center E&T	1306234273	
Harborview - Seattle	1922102342	
Harrison Memorial	1518912609	1
Kitsap E & T	1033268008	
Lake Chelan	1578568853	
Lourdes Counseling Center	1548342181	
Madigan Army Medical Center	1649624453	
Metro Dev Council	1205234424	
Mukilteo	1942324710)
MultiCare Health System	1770579534	•
Navos H beds	1184764227	/
Northwest Seattle	1700861580)
Our Lady Of Lourdes	1548342181	
Overlake	1811904063	
Pierce E&T Telecare	1780913657	/
Pioneer Center North	1194069427	2
Providence - Everett	1700037801	
Providence Sacred Heart Childrens Hs	otl 1144471715	
Puget Sound	1497757207	/
Recovery Innovations Pierce	1871726570	1
Sacred Heart - Spokane	1891947263	
Sacred Heart - Univ District	1346237971	
Sacred Heart Medical Center	1528163763	
Saint Johns Hospital	1720056187	
Skagit Regional Psychiatry	1053357244	
Skagit Valley Hospital	1053357244	
Smokey Point Behavioral Hospital	1679020150	
South Sound Vest Thurston	1336605849	
Southwest Medical Center	1134178999	ł

Ct. Francia	1002712001
St. Francis	1093713091
St. Joseph Hospital Bellingham	1689677320
St. Joseph Tacoma	1952309098
St. Peters Olympia	1346250594
Swedish - Mill Creek	1114356904
Swedish Edmonds	1033107214
Swedish Edmonds	1033107214
Swedish Edmonds	1033107214
Swedish Med Ballard Psych	1902355654
Swedish Seattle	1154476208
Tacoma General	1366556227
Telecare E&T of Pierce County	1659758639
Telecare NS E&T	1659758639
Telecare Thurston Mason	1730532136
Thurston/Mason E&T Facility	1093895203
Two Rivers Landing	1689812968
UW Medical Center	1326002049
VA Puget Sound	1972825008
VALLEY CITIES COUNSELING AND CONSULTATION	1538604426
Valley General Hospital	1013074061
Valley Hospital	1538345251
Valley Medical Renton	1649209230
Virginia Mason	1801851258
West Seattle Psychiatric Hospital	1124034699
Western State	1144295080
Whidbey General Hospital	1043497001
Yakima Valley Memorial Hospital	1356781884
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