

Warm Handoff Frequently Asked Questions (FAQs)

TOPIC	QUESTION	RESPONSE
DDAP	What is the time frame DDAP will be responding to questions?	DDAP is coordinating responses to send individually to the SCA that is asking the question and developing an FAQ to be posted to DDAP's website. An individual response will be provided to the SCA within 1 week of submission to DDAP.
Survey Download	I was able to download it, but even though I closed, it is asking me for a username and password. Now what?	<p>Once you have the field application downloaded, the next step is to close the field application and then click the survey form download link provided in the email sent to the SCA Administrators every month.</p> <p>A new survey link will be sent to the SCA Administrators each month via email correspondence.</p> <p>Having the field application closed when you click that download link will allow you to bypass the request for a username and password and access the data entry form.</p>
WHO Survey Technology	The ArcGIS downloads require IT involvement. Many of our systems are blocked from downloading programs. Due to working remotely, this download will need to be on both the desktop and laptop. It will also require scheduling a time to with my county IT staff.	The SCA is to make every effort to complete the monthly survey by the due date. If the SCA is encountering technical difficulties, they should reach out to the Treatment Resource Account to notify them of the issues and ask for any assistance they need.
WHO Survey Data Entry	Can more than 1-person report data for the same county?	The requirements of the Treatment and CMCS Manual indicate it is the SCA's responsibility to coordinate WHO within their county. The SCA is responsible for submitting WHO Survey data and would not include more than 1 agency reporting the data. An SCA should work with their project officer if they have any concerns regarding the submission of WHO data.
Hospital Data	Should a Behavioral Health Hospital be included for reporting WHO data?	The hospitals listed within the ArcGIS WHO Survey are based on hospitals with an ED and would not include behavioral health hospitals.
Hospital Data	Should Veterans Administration (VA) hospitals be included as part of the hospital survey data?	The VA hospitals would only be included if the SCA is providing Warm Handoff services at the VA hospital. The SCA should reach out to DDAP through the DA-Treatment Resource Account if a VA hospital needs to be added.

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WHO 24/7 Hospital Coverage	The CMCSM indicates that WHO is to be offered 24/7. Our county has multiple hospitals. Is DDAP really going to require that we spend additional funds to expand this service to 24/7? Is this something that we can ask DDAP a waiver from?	The language is the same in the current Treatment Manual and was not changed as part of the Case Management Clinical Services (CMCS) Manual for the 2020-2025 Grant Agreement (GA). The SCA can work with their project officer from County Program Oversight regarding how services are provided when the SCA/contracted provider is not at the hospital and the type of warm handoff model that may be used.
WHO Shifts	The county provides WHO from 8:00 AM to Midnight, 7 days per week. There is no selection in the tool to record this accurately. Can the ArcGIS tool be revised to allow SCA's to identify their specific timeframes?	The SCA can select first and second shift and make a note in the comments section of the times the SCA or contracted provided from the county is available to provide a warm handoff.
WHO Encounters	How do I report data for WHO Encounters done over the telephone?	You will enter WHO encounters done over the telephone like you would enter any other type of encounter. There is a question in the survey asking you how many of the encounters were done via telephone and you would input a number there if you had any that were completed over the telephone
WHO Data Reporting	What is DDAP's direction on how we are reporting on DOC?	<p>The WHO survey is to collect data regarding the substance(s) for which the individual has overdosed or been admitted to the hospital regardless of primary, secondary, tertiary. If the SCA or hospital is able to collect data of the substances as primary, secondary, and tertiary substances that resulted in the individual's overdose or admission to the hospital, the SCA should continue to do so. The WHO Survey allows for more than one substance to be reported if the individual was using more than one substance at the time of the OD or admission.</p> <p>Training Script: <i>In those instances where an individual may present with polysubstance use across multiple categories, the SCA should count the encounter for all the relevant drug categories.</i> <i>Individual drug category values must be less than or equal to the total number of WHO Encounters reported during the period, but the <u>sum of the values of the drug category responses may exceed the total number of WHO encounters because of polysubstance use reporting.</u></i></p>

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WHO Referrals	If the CRS goes into the person's room, and the person refuses to talk with them, is this situation included in the report? Or is this not even counted as an encounter?	If a face to face was conducted and the individual refused to talk or refused a referral it would be reported as a refusal.
WHO Referrals	When a WHO encounter is unable to be referred to treatment, due to the LOC needing to be completed at a future scheduled date, how do we record that as a referral?	In this situation the warm handoff encounter is still considered a referral. You would record it as a referral to "recovery services/case management"
WHO Referrals	When a WHO encounter has been initiated and the client is going to Mental Health Services before they start drug and alcohol treatment, how do we record that as a referral?	In this situation the warm handoff encounter is still considered a referral. You would record it as a referral to "recovery services/case management"