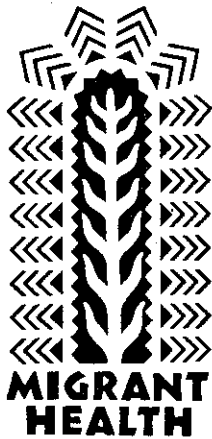


NATIONAL MIGRANT REFERRAL  
PROJECT, INC.  
ALCOHOL PROGRAM

A COMPUTER-BASED CLINICAL  
REFERRAL SYSTEM

SYSTEM OVERVIEW  
MARCH, 1982



## NMRP ALCOHOL PROGRAM

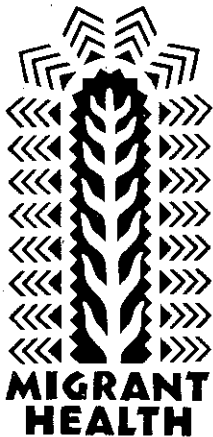
The National Migrant Referral Project (NMRP) is pleased to announce its Alcohol Program, a computer-based information system for Alcohol Programs throughout the nation. The NMRP/Alcohol Program is yet another component of the National Migrant Referral Project and represents NMRP's and the National Institute of Alcohol Abuse and Alcoholism's (NIAAA) commitment to serve migrant and transient populations. The NMRP/Alcohol Program is designed to support continuity of care and treatment, and to eliminate the duplication of services to patients.

The NMRP/Alcohol Program has been developed with the guidance of a National Task Force and is available to Alcohol Programs at no cost.

For more information to participate in the program, please contact either of the following:

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or  
Elida Gonzalez, Data Communicator II  
NMRP/Alcohol Program  
55 North I.H. 35, Suite 207  
Austin, Texas 78702

Telephone: TX. 800-252-9446  
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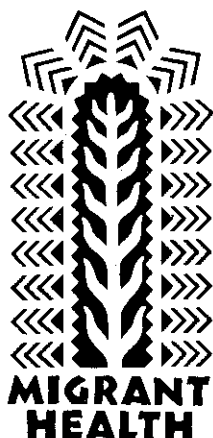
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## INTRODUCTION

A portion of the patient population served by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) consists of migrant farmworkers and their families. The fact of migrancy, which when added to uncertain and short-lived employment, frequent separation from family, bare subsistence income, an often hostile environment, and a host of other pressure inducing life factors vastly compounds the rendering of NIAAA services to the migrant population.

One of the severest handicaps in serving the migrant patient is that of missing continuity. As the migrant traverses the United States, he arrives at each new stop with only the visible evidence of his way of life with him. For an NIAAA program to render effective service, it must undertake the arduous and pains-taking task of converting this evidence into that understanding that permits treatment to begin. Obtaining the base of understanding upon which treatment may proceed represents the commitment of substantial NIAAA program resources. Time upon time these resources are spent in vain, for the migrant and his problems must remain behind at the NIAAA program site. The NIAAA site encountering the migrant must then begin the process anew and thereby commit resources to gain an understanding which already resides in previous program sites. That such a situation needlessly consumes NIAAA program resources is self-evident. What is not self-evident about this lack of continuity of services is the negative effect on the client who must undergo

repetitive intake procedures, evaluations and therapy. In addition to being needless, these repetitive activities may even eventuate in conflicting medication and treatment approaches.

Some of the problems of serving migrant patients can be alleviated simply by providing that information to each NIAAA site which enables the clinic to maintain continuity of service. The NMRP/Alcohol Program addresses the establishment of a system to provide such information.

In 1979 the Migrant Program of the Special Project Branch of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) committed resources through an Inter-agency Agreement with the Health Services Administration (HSA)/Bureau of Community Health Services (BCHS) to serve migrant and seasonal farmworkers. The purpose of this agreement was to develop and integrate a network of alcoholism program providers into a computer-based referral system to support continuity of care and treatment, and to eliminate the duplication of services to migrant patients.

NIAAA has further recognized that such a program would be beneficial to Public Inebriate Programs (PIP) or any alcohol program that works with a transient population. The transient alcoholic often encounters those same problems faced by the migrant population. Therefore, this program will be extended to Alcohol Programs serving this population.

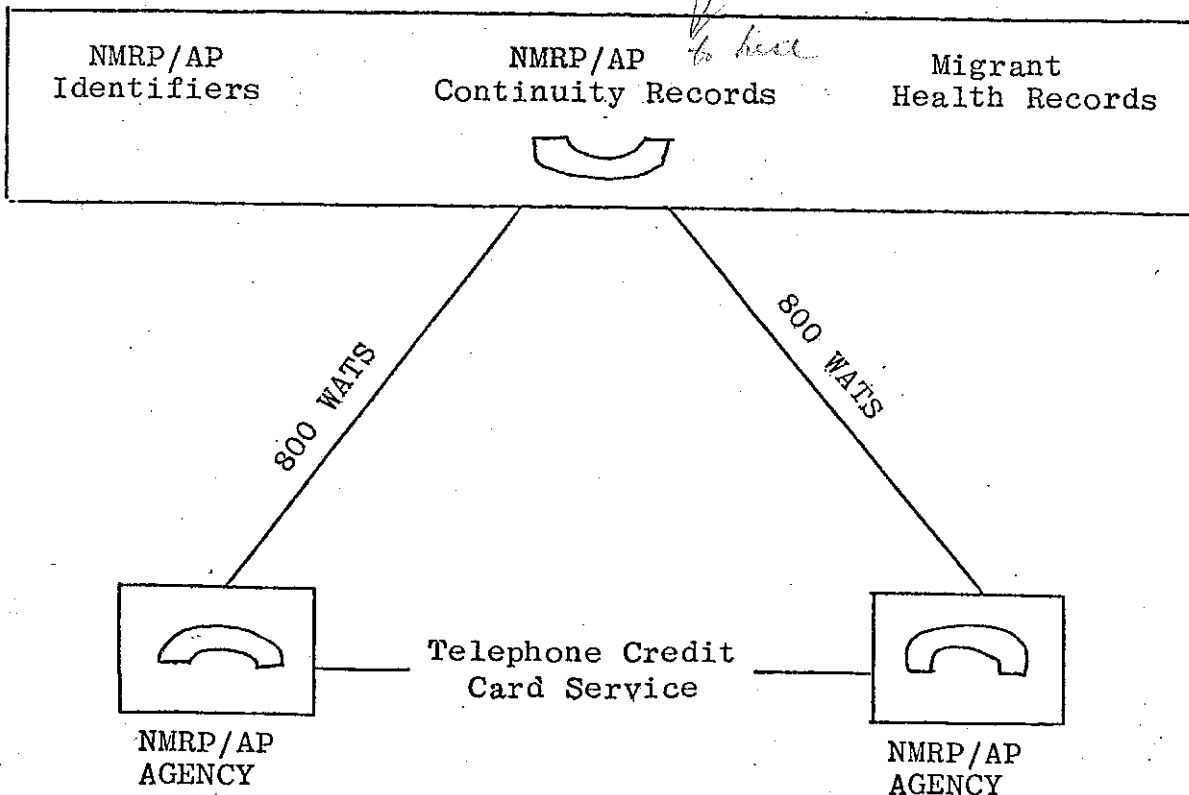
THE NATIONAL MIGRANT REFERRAL PROJECT/ALCOHOL PROGRAM  
 NETWORK AND COMMUNICATION DESCRIPTION

The diagram below shows the basic elements of the system. Access to the central data base is provided through a central data exchange in Austin, Texas. The Austin Data Exchange (ADE) is operated by the National Migrant Referral Project, Inc., a private non-profit organization.

The Network  
 Austin Data Exchange  
 (ADE)

*remains at this place*

*make box wider*



## ADMINISTRATIVE DATA

The administrative data serves the following purposes:

- A. Identifies the patient
- B. Identifies the agency originating the data
- C. Tells what time period the data covers
- D. Describes administrative reasons for the patient/ agency contact
- E. Highlights key historical critical factors

### SECTION 1

National Migrant Referral Project/Alcohol Program									
CONTINUITY FORM					NMRP/AP AGENCY NO. _____ NMRP/PT. NO. _____ LOCAL PT. NO. _____ UPDATE DATE _____ INQUIRY DATE _____ INITIAL ENCOUNTER DATE _____ MOST RECENT ENCOUNTER DATE _____ <div style="text-align: right;">(MO) (DA) (YR)</div>				
LAST NAME	MI	FIRST NAME	DOB MO DA YR	SEX					
PATIENT _____									
ALIAS _____									
PARENT'S FIRST NAMES _____									
STREET		CITY	ST	ZIP					
ADDRESS CURRENT _____									
PERMANENT RESIDENCE _____									
ETHNICITY: MEXICAN AMERICAN <input type="checkbox"/> BLACK <input type="checkbox"/> WHITE <input type="checkbox"/> PUERTO RICAN <input type="checkbox"/> CUBAN <input type="checkbox"/> HAITIAN <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> OTHER <input type="checkbox"/> _____ VETERAN <input type="checkbox"/>									
REASON FOR ENCOUNTER			REFERRAL SOURCE			HISTORY			
VOLUNTARY <input type="checkbox"/>		INVOLUNTARY <input type="checkbox"/>		SELF <input type="checkbox"/> FAMILY <input type="checkbox"/> POLICE <input type="checkbox"/> PROBATION <input type="checkbox"/> COURT <input type="checkbox"/>		PATIENT		FAMILY ALCOHOLISM	
				OTHER _____		YES NO		IMMEDIATE FAMILY <input type="checkbox"/>	
						DT'S SEIZURES <input type="checkbox"/> <input type="checkbox"/>		REMOVED FAMILY <input type="checkbox"/>	
						BLACKOUTS <input type="checkbox"/> <input type="checkbox"/>			



## PROBLEM DEFINITION

The problem definition data permits your agency to:

- A. Enter the appropriate DSM Code
- B. Identify the basic presenting problems
- C. Describe the source of the presenting problem identification (i.e., therapist (th), patient (pt), support system (ss), or any combination thereof. Notice that this section provides a vehicle for expressing agreement or disagreement (among therapist, patient or support system) as to problem identification.
- D. A brief summary of problems by each party. This section does not imply a problem by problem summary.

## SECTION 2

DSM CODES	PRIMARY	SECONDARY			TERTIARY	
PRESENTING PROBLEM		SOURCE			SUMMARY OF PROBLEMS	
NO.	NAME	TH	PT	SS	THERAPIST	
					PATIENT	SUPPORT SYSTEM
1	ALCOHOL					
2	ALCOHOL/W/DWI/DUI					
3	ALCOHOL/DRUG					
4	LEGAL					
5	POVERTY					
6	EMPLOYMENT					
7	FAMILY					
8	MARITAL					
9	INTERPERSONAL					
10	PSYCHIATRIC/EMOTIONAL					
11	MEDICAL					
12	OTHER					

## TREATMENT DATA

The treatment data permits your agency to identify:

- A. The types of services rendered by the patient
- B. The intensity of services rendered
- C. The facilities within which the services were rendered
- D. The medications prescribed and/or provided
- E. The objectives set for each problem and whether the objectives were set by the therapist patient or both
- F. The outcome as seen by the therapist, patient or support system of the objectives
- G. Patient strengths
- H. The reason the patient left the program, and
- I. A certification that an active consent to release information through this system is on file (See Section 3 on the following Page)



## MEDICAL DATA

Medical data on an NMRP/AP patient requested by a participating agency will be made available to authorized agency personnel.

Request for medical data should be directed to the ADE operator. The ADE operator will access the Migrant Health Data Base for medical information. If the medical information is available, the ADE operator will relay this via telephone or hard copy mailout.

Medical data that will be available to the NMRP/AP agency are listed below:

- Problem List
- TB-PPD Screening
- Blood Pressure and Pulse
- Patient History (Epilepsy)

\*\*\*\*\*  
:01

NATIONAL MIGRANT REFERRAL PROJECT/ALCOHOL PROGRAM

NOTICE :THIS INFORMATION HAS BEEN DISCLOSED TO YOU FROM RECORDS WHOSE CONFIDEN-  
:TIALITY IS PROTECTED BY FEDERAL LAW. FEDERAL REGULATIONS(42 CFR PART 2)  
:PROHIBITS YOU FROM MAKING ANY FURTHER DISCLOSURE OF IT WITHOUT THE  
:SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS OR AS OTHER-  
:WISE PERMITTED BY SUCH REGULATIONS.

-----

FOR FURTHER INFORMATION CONTACT NMRP/AP AT:

IN TEXAS USE :1-800-252-9446

USA(EX TX) USE :1-800-531-5120

\*\*\*\*\*

\*\*\*\*\*

LAST NAME FIRST NAME MI DOB SEX

:BROWN :RICHARD :L :041252 :M PT NO :18

DATE OF CONSENT TO DISCLOSE CONFIDENTIAL INFORMATION :100881

PARENTS F/N :LOUISE :ROBERT VET:X ALIAS :BOB LEE :AL POLK

ADDRESS: STREET CITY ST ZIP

PERMANENT :632 SPRING :HARLINGEN :TX :75109

CURRENT :142 RIDGE :KANSAS CITY :MO :65128

CONSENT EXPIRE DATE:100882 AP AGENCY NO :GEM71 LOCAL PT NO :1127

UPDATE DATE :120881 INITIAL ENC. DATE :100581 MOST REC ENC DATE :120781

REASON FOR ENCOUNTER PATIENT HISTORY FAMILY ALCOHOLISM

VOLUNTARY :X DT'S : IMMEDIATE FAM :X

INVOLUNTARY : SEIZURES : REMOVED FAM :

BLACKOUTS:

REFFERAL SOURCE

ETHNICITY

SELF :X PROBATION : BLACK : MEXICAN AMER :

FAMILY : COURT : CUBAN : PUERTO RICAN :

POLICE : OTHER : HATIAN : AMER INDIAN :

WHITE :X OTHER :-----

\*\*\*\*\*

\*\*\*\*\*  
LAST NAME : BROWN PT NO : 18

DSM CODES : 305.02 SECONDARY : TERTIARY :

PRESENTING PROBLEM	SOURCE				SOURCE		
	TH	PT	SS		TH	PT	SS (TH=THERAPIST, PT=PATIENT, SS=SUPPORT SYS)
ALCOHOL	:X	:X	:	FAMILY	:	:	:
ALCOHOL (DWI/DUI)	:	:	:	MARITAL	:	:	:
ALCOHOL/DRUG	:	:	:	INTERPERSONAL	:	:	:
LEGAL	:X	:	:	PSYCH/EMO	:	:	:
POVERTY	:	:	:	MEDICAL	:X	:	:
EMPLOYMENT	:X	:X	:	OTHER :	:	:	:
				:			

MEDICATION

NDC NO : PRESCRIPTION NO :

AMT DISPENSED : CONCENTRATION :

DOSE/SCHED :

NDC NO : PRESCRIPTION NO :

AMT DISPENSED : CONCENTRATION :

DOSE/SCHED : -----

\*\*\*\*\*

\*\*\*\*\*

PT NO : 18

LAST NAME : BROWN

AF AGENCY NO : GEM71

UPDATE DATE : 120881

PROBLEM SUMMARY

SOURCE=TH : PT. APPEARED TO HAVE BEEN DRINKING EXCESSIVELY & WAS INEBRIATED UPON  
: ARRIVAL. PT'S SPEECH WAS SLURRED. PT. HAD DIFFICULTY STANDING  
: ALONE. APPEARED IN NEED OF DETOXIFICATION. PT. IS AN UNEMPLOYED  
: 10TH GRADE DROP-OUT. PT. HAS CHARGES PENDING FOR ASSAULT ON A  
: POLICE OFFICER.

SOURCE=PT : PT. ADMITTED DRINKING EXCESSIVELY. PT. POINTS TO HIS INABILITY TO  
: FIND WORK & HIS LACK OF JOB SKILLS AS A CONTRIBUTING FACTOR TO FRUS-  
: TRATION & ANGER WHICH AT TIMES RESULTS IN EXCESSIVE DRINKING &  
: VIOLENT BEHAVIOR.

:

SOURCE=SS :

:

:

:

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FT NO :18

LAST NAME :BROWN

AP AGENCY NO :GEM71

UPDATE DATE :120881

PROB NO :1

OBJECTIVE SET BY:TH

OBJECTIVE DESCRIPT :SUPPORT PT'S OBJECTIVE. OFFER VARIOUS RESOURCES & ALTERNA-  
:TIVES THAT ARE AVAILABLE TO PT.

:

OUTCOME AS SEEN BY :TH

OUTCOME DESCRIPTION:PT. MADE MUCH PROGRESS & APPEARS STABLE.

:

:-----

\*\*\*\*\*

\*\*\*\*\*  
PT NO :18                    LAST NAME :BROWN                    AP AGENCY NO :GEM71

UPDATE DATE :120881

PROB NO :1

OBJECTIVE SET BY:PT

OBJECTIVE DESCRIPT :PT. WILL WORK TOWARDS SOBRIETY ONE DAY AT A TIME.

:-----  
:-----

OUTCOME AS SEEN BY :PT

OUTCOME DESCRIPTION:PT. WAS VERY PROUD THAT HE HAD BEEN SOBER FOR 2 MOS. HE  
:FEELS THAT HE HAS BEEN ABLE TO RESOLVE SOME ISSUES, HE  
:FEELS MUCH BETTER ABOUT HIMSELF.

\*\*\*\*\*

\*\*\*\*\*

PT NO :18                      LAST NAME :BROWN                      AP AGENCY NO :GEM71

UPDATE DATE :120881

PROB NO :4

OBJECTIVE SET BY:TH

OBJECTIVE DESCRIPT :IDENTIFY LEGAL SERVICES & REFER PT. FOR AID.

:-----

:-----

OUTCOME AS SEEN BY :TH

OUTCOME DESCRIPTION:AS A RESULT OF HIS CHANGE IN ATTITUDE, HIS SIGNIFICANT  
:PERIOD OF SOBRIETY & EARNEST ATTEMPT TO KEEP HIS JOB, HE  
:WAS PLACED ON PROBATION.

\*\*\*\*\*

\*\*\*\*\*  
PT NO :18                    LAST NAME :BROWN                    AP AGENCY NO :GEM71

UPDATE DATE :120881

PROB NO :6

OBJECTIVE SET BY:TH

OBJECTIVE DESCRIPT : IDENTIFY POTENTIAL EMPLOYERS & REFER PT. FOR INTERVIEWS.

:

:

OUTCOME AS SEEN BY :TH

OUTCOME DESCRIPTION:PT. HAS DEVELOPED SOME PATIENCE & POSSESSES A BETTER SELF-

: IMAGE.

: -----

\*\*\*\*\*



\*\*\*\*\*

PT NO :18

LAST NAME :BROWN

AP AGENCY NO :GEM71

UPDATE DATE :120881

PATIENT STRENGTHS :RECOGNITION OF PROBLEMS. YOUTHFULNESS. WILLINGNESS TO SUB-  
:MIT FOR TREATMENT. RESPONSIBLE & MATURE.

\*\*\*\*\*

\*\*\*\*\*

PT NO :18

LAST NAME :BROWN

AP AGENCY NO :GEM71

UPDATE DATE :120881

REASON FOR LEAVING

TREATMENT COMPLETE : X

MIGRATION : X

AGAINST MED ADVICE :

UNKNOWN :

OTHER :

THERAPIST REFERRAL :

SPECIFY :PT. WAS MOVING BACK TO HARLINGEN, TX. & WAS REFERRED TO MIDWAY HOUSE.

:-----

\*\*\*\*\*