

**DSH – Pre-trial Felony Mental Health Diversion**  
**DSH Diversion Outcomes Data Dictionary - Behavioral Health**

<b>YEAR</b>	Year – Current calendar years
<b>FYQTR</b>	Fiscal year quarter – Select one <ul style="list-style-type: none"> <li>• Q1: July 1 – September 30</li> <li>• Q2: October 1 – December 31</li> <li>• Q3: January 1 – March 30</li> <li>• Q4: April 1 – June 30</li> </ul>
<b>LNAME</b>	Last name – Last name of DSH Diversion participant
<b>FNAME</b>	First name – First name of DSH Diversion participant
<b>SSN</b>	Social security number – 9-digit social security number (no dashes)
<b>DOB</b>	Date of birth of participant – MM/DD/YYYY
<b>SEX</b>	Gender – Select one <ul style="list-style-type: none"> <li>• Male</li> <li>• Female</li> <li>• Transgender M-F</li> <li>• Transgender F-M</li> <li>• Non-binary</li> <li>• Other</li> </ul>
<b>ETHNIC</b>	Race/Ethnicity – Select one <ul style="list-style-type: none"> <li>• White Non - Hispanic</li> <li>• Black Non - Hispanic</li> <li>• Hispanic</li> <li>• Asian</li> <li>• American Indian or Alaska Native</li> <li>• Native Hawaiian/Other Pacific Islander/Filipino</li> <li>• Other</li> </ul>
<b>MCAL</b>	Medi-Cal status – was the participant enrolled in Medi-Cal at time of arrest <ul style="list-style-type: none"> <li>• No</li> <li>• Yes</li> <li>• Not eligible</li> </ul>
<b>MCALE</b>	If not eligible, reason why if known

- LIVSIT** Living situation – What was the participant’s living status at the time they were arrested (see following definitions)
- Not homeless: Permanent housing/Housed in treatment facilities/board and care/group home for more than 90 days
  - Homeless sheltered: Housed in treatment facilities/board and care/group home for more than 90 days **OR** hotel/motel/couch surfing
    - \*key: must have access to running water & electricity
  - Homeless unsheltered: Living in car/encampment/other unsheltered situation
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## **BEHAVIORAL HEALTH VARIABLES**

**DEVAL** Was there a diversion eligibility evaluation?

- No
- Yes

**HOWELIG** If No, how was eligibility determined

**DOE** Diversion eligibility evaluation date MM/DD/YYYY

**MOTIV** Based on eligibility evaluation, was the crime related to the individual’s (select primary motive)

- Psychosis
- Homelessness

**PDIAG** Primary diagnoses determined from diversion evaluation (select one)

- Schizophrenia
- Schizoaffective disorder
- Bipolar disorder

**SUBSTDY** Does the individual have a co-morbid substance abuse diagnosis?

- No
- Yes

**SUBST** If yes, please enter individual’s drug of choice:

- Alcohol
- Cannabis
- Cocaine
- Hallucinogen
- Amphetamine or other stimulant
- Opioid
- Other

- PERSD** Does the individual have a co-morbid Personality Disorder diagnosis?
- No
  - Yes
- PDDX** If yes, which Personality Disorder?
- Antisocial Personality Disorder
  - Borderline Personality Disorder
  - Other Personality Disorder
- COGD** Does the individual have a co-morbid Cognitive Disorder diagnosis? This includes Neurocognitive Disorders (Alzheimer's, vascular dementia, TBI) or intellectual disability
- No
  - Yes
- RISKASS** Was structured risk assessment performed?
- No
  - Yes

**If Yes, which one?**

- RANAME** - Short-Term Assessment of Risk & Treatability (START)  
 - Historical Clinical Risk Management – 20 (HCR-20)  
 - Level of Services Inventory (LSI)

**OTHERRA** - Other

- MATCHS** How were services matched to participant?
- Risk-Needs-Responsivity (RNR) Assessment
  - Provided standard mental health services
  - Other

**RNRASS** List Risk-Needs-Responsivity (RNR) Assessment

**OTHERM** List other service matching method

- JDIVS** Diversion services provided prior to release from jail
- No
  - Yes

**If Yes:**

**DBJDIVS** Date jail diversion services began MM/DD/YYYY

**DEJDIVS** Date jail diversion services ended MM/DD/YYYY

**JAILMED** Name of antipsychotic medication prescribed in jail