BRITISH COLUMBIA | Ministry of Health

APPLICATION TO REQUEST MHA MRR DATA
FOR EVALUATION, PLANNING OR RESEARCH

MENTAL HEALTH & SUBSTANCE USE DATA CHECKLIST

Submit this completed form to the email address:
HealthDataHA@gov.bc.ca

Questions about the request process or any part of this application may be directed to the email address above.

MINISTRY OF HEALTH USE ONLY

File Number	Date Received
ISP Appendix	

PROJECT TITLE

BASED UPON THE FOLLOWING COHORT NAMED AND DESCRIBED ON THE HEALTH DATA REQUEST FORM (HLTH 5426)
(if there is no cohort then write N/A)

AND FURTHER LIMITED TO THE DATE RANGE (N.b. HAs collect and report data by fiscal year period)
(write N/A where not applicable)

From (yyyy/mm/dd)

To (yyyy/mm/dd)

OTHER DATE RANGE AND FILTERING CRITERIA
(more complex filtering may be possible and require additional details leading to additional custom coding and delays in processing your request)

DATA COMPONENT SELECTION (Check the files you need)

The required fields must also be specified on later pages of this form.

	DATA COMPONENT	NOTES
☐	Client	
☐	Service Episode	Always required when other MHA MRR data are provided
☐	Service Event	
☐	Diagnostic 5 (Containing DSM-5 codes)	Required by the MHA MRR only for level 3 services
☐	Diagnostic (Containing DSM-IV TR codes)	Required by the MHA MRR only for level 3 services
☐	Health of the Nation Outcome Scale (HoNOS)	Required by the MHA MRR only for level 2 and 3 services
☐	Substance Use	Required by the MHA MRR only for level 2 and 3 services

Please consult the acccompanying data dictionary for information on level 1, 2, and 3 services.

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CLIENT DATA FIELD SELECTION (This section only relevant when client data selected on page 1)

SUMMARY:

The client data elements provide demographic information. Client records must be accompanied by at least one service episode record.

	FIELD NAMES		VARIABLE NAMES	REASON FOR REQUEST
☐	C2	PHN (Personal Health Care Number)	MRG_CLNT_ANON_ID	PHN will not be released. A randomised study ID will be provided.
☐	C3	City	SRC_CITY	
☐	C4	Home Province, State or Other Country	SRC_PROV_STATE	
☐	C5	Postal Code		Postal code is not available for regular data requests but various geographical breakdowns can be provided.
☐	C6	Birth Date	SRC_BRTH_DATE	Not available for regular data requests. An age or age group can be provided.
☐	C7	Sex Code	CLNT_GENDER_LABEL	
☐	C8	Marital Status	MRTL_STS_LABEL	
☐	C9	Height	HT	
☐	C10	Weight	WT	
☐	C11	Household Composition	HHLD_CMPSN_LABEL	
☐	C16	Highest Level of Education Completed	HGST_LVL_EDUC_LABEL	
☐	C17	Current Educational Engagement	CURR_EDUC_ENGMT_LABEL	
☐	C18	Employment Status Declaration	DCLRD_EMPL_STS_LABEL	
☐	C19	Employment Hours	MHA_EMPL_TM_LVL_LABEL	
☐	C20	WCB, Sickness or Disability Flag	SICK_DSBLTY_FLG_LABEL	
☐	C21	Duration of WCB, Sickness or Disability	DSBLTY_DUR_CAT_LABEL	
☐	C22	Criminal Justice Involvement	CRMNL_JSTC_STG_LABEL	
☐	C23	Nature of Criminal Justice Involvement	CRMNL_CHRG_CAT_LABEL	
☐	C24	Legal Status First Field	LGL_CSTRNT_1_LABEL	
☐	C25	Legal Status Second Field	LGL_CSTRNT_2_LABEL	
☐	C26	Estimated Age	EST_AGE_CAT_LABEL	
☐	C27	History of Suicide Attempts	SUICIDE_ATMT_HIST_FLG	
☐	C28	History of Violence	VLNC_EVDNC_LABEL	
☐	C29	Age of First Use of Alcohol	FRST_ALCL_USE_AGE_LABEL	
☐	C30	Age of First Use of Tobacco	FRST_TBCO_USE_AGE_LABEL	
☐	C31	Age of First Use of Marijuana	FRST_MRJN_USE_AGE_LABEL	
☐	C32	Age of First Use of Any Other Substance	FRST_OTH_USE_AGE_LABEL	

SERVICE EPISODE DATA FIELD SELECTION (This section only relevant when client data are selected)

SUMMARY:
Date of First Contact is the first contact with client or collaterals (for example, client's clinician, physician or caregiver) where clinically relevant information is exchanged. At Date of First Contact the client may be enrolled in one or more Continuum of MHSU Services. Each Service type represents a Service Episode.

		FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	C2	PHN (Personal Health Care Number)	MRG_CLNT_ANON_ID	PHN will not be released. A randomised study ID will be provided.
☐		SRV_EPSD_ANON_ID	SRV_EPSD_ANON_ID	
☐	S2	Continuum of MHSU Services	MHA_SRV_TP_LABEL	
☐	S3	Referral Source	MHA_RFRL_SRC_TP_LABEL	
☐	S4	Referral Date	RFRL_DATE_LABEL	
☐	S5	Date of First Contact	FRST_CTCT_DATE_LABEL	
☐	S6	Date of First Service Event	FRST_SRV_DATE_LABEL	
☐	S7	Date of First Service Event in Reporting Period	PRD_1ST_SRV_DT_LABEL	
☐	S8	Date of Last Service Event in Reporting Period	PRD_LST_SRV_DT_LABEL	
☐	S9	Number of Service Events in Reporting Period	PERIOD_SRV_EVT_CNT	
☐	S10	Living Arrangement	RSDC_ARNGMT_LABEL	
☐	S11	Acute Inpatient – Secure Room	ACUTE_INPTNT_SEC_RM_FLG	
☐	S12	Acute Inpatient - Transport	MHA_ACUTE_TRNSPT_LABEL	
☐	S13	MHSU Affected Relationship	AFCTD_RELN_LABEL	
☐	S14	Service Agency Location Code	MHA_SRV_AGCY_LABEL	
☐	S15	Type of CBT Intervention	CBT_STTG_TP_LABEL	
☐	S16	Type of DBT Intervention	DBT_STTG_TP_LABEL	
☐	S17	Date Extended Leave Ends	XTND_LV_END_DATE	
☐	S18	Date of Discharge from Service	SRV_PROG_DSCHG_DT_LABEL	
☐	S19	Reason for End of Service	SRV_END_RSN_LABEL	
☐	S20	Date of Hospital to Community Contact	HSP_CMTY_CTCT_DATE	
☐	S21	Reason for No Community Follow up Contact	FLWP_FAIL_RSN_LABEL	
☐	S22	Pregnancy	MHA_PRGCY_STS_LABEL	
☐	S23	Parenting	MHA_PRNTG_STS_LABEL	
☐	S24	Suicide Attempt	SUICIDE_ATMT_IND	
☐	S25	Violence	VLNC_EVDNC_LABEL	
☐	S26	Peer Support Service	PEER_SUPT_SRV_FLG	
☐	S27	Fetal Alcohol Spectrum Disorder (FASD)	MHA_FASD_LABEL	

SERVICE EVENT DATA FIELD SELECTION (This section only relevant when client and episode data are selected)

SUMMARY:

The Service Event is a single encounter between the client and a mental health and substance use service provider.

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	SRV_EPSD_ANON_ID	SRV_EPSD_ANON_ID	Used to link the event record to the corresponding episode
☐	T2 Date and Time of Service Event	SRV_DATE_LABEL, SRV_TM_OF_DAY	

DSM-5 DATA FIELD SELECTION (This section only relevant when client data and specific services are selected[1])

SUMMARY:

For all clients, four years of age or older, at least one diagnosis is captured at enrolment and discharge for either DSM-5 or DSM-IV TR (axis 1 and axis 2). Clients enrolled before April 1, 2016 have a DSM-IV diagnosis at enrolment in the Diagnostic table. If they are discharged after April 1, 2016, they have a DSM-5 diagnosis at discharge record in the Diagnostic 5 table.

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	SRV_EPSD_ANON_ID	SRV_EPSD_ANON_ID	Used to link the event record to the corresponding episode
☐	D1 DSM-5 Date of Diagnostic Assessment at Enrolment	ENRL_ASSMT_DATE	
☐	D2 DSM-5 Clinician's Impression at Enrolment	ENRL_CLN_IMPR_FLG_LABEL	
☐	D3 DSM-5 Diagnosis at Enrolment 1 (Primary)	DSM5_ENRL_DX_1_LABEL	
☐	D4 DSM-5 Diagnosis at Enrolment 2 (Secondary)	DSM5_ENRL_DX_2_LABEL	
☐	D5 DSM-5 Diagnosis at Enrolment 3 (Tertiary)	DSM5_ENRL_DX_3_LABEL	
☐	D6 DSM-5 Diagnosis at Enrolment 4 (Quaternary)	DSM5_ENRL_DX_4_LABEL	
☐	D7 DSM-5 Diagnosis at Enrolment 5 (Quinary)	DSM5_ENRL_DX_5_LABEL	
☐	D8 Date of Diagnostic Assessment at Discontinuation	DISC_ASSMT_DATE	
☐	D9 Clinician's Impression at Discontinuation	DISC_CLN_IMPR_FLG_LABEL	
☐	D10 DSM-5 Diagnosis at Discontinuation 1 (Primary)	DSM5_DISC_DX_1_LABEL	
☐	D11 DSM-5 Diagnosis at Discontinuation 2 (Secondary)	DSM5_DISC_DX_2_LABEL	
☐	D12 DSM-5 Diagnosis at Discontinuation 3 (Tertiary)	DSM5_DISC_DX_3_LABEL	
☐	D13 DSM-5 Diagnosis at Discontinuation 4 (Quaternary)	DSM5_DISC_DX_4_LABEL	
☐	D14 DSM-5 Diagnosis at Discontinuation 5 (Quinary)	DSM5_DISC_DX_5_LABEL	

[1] Please consult the data dictionary

DSM-IV TR DATA FIELD SELECTION (This section only relevant when client data and specific services are selected[1])

SUMMARY:

For all clients, four years of age or older, at least one diagnosis is captured at enrolment and discharge for either DSM-5 or DSM-IV TR (axis 1 and axis 2). Clients enrolled before April 1, 2016 have a DSM-IV diagnosis at enrolment in the Diagnostic table. If they are discharged after April 1, 2016, they have a DSM-5 diagnosis at discharge record in the Diagnostic 5 table.

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	SRV_EPSD_ANON_ID	SRV_EPSD_ANON_ID	Used to link the event record to the corresponding episode
☐	D1 Date of Diagnostic Assessment At Enrolment	ENRL_ASSMT_DATE	
☐	D2 Date of Diagnostic Assessment At Discontinuation	DISC_ASSMT_DATE	
☐	D3 Diagnosis Axis 5: GAF Score at Enrolment or Service	AX5_GAF_ENRL_SCORE	
☐	D4 Diagnosis Axis 5: GAF Score at Discontinuation	AX5_GAF_DISC_SCORE	
☐	D5 Initial DSM-IV-TR Diagnosis Axis 1: Primary or First at Enrolment	DSM_AX1_ENRL_DX_1_LABEL	
☐	D6 DSM-IV-TR Diagnosis Axis 1: Primary or First at Discontinuation	DSM_AX1_DISC_DX_1_LABEL	
☐	D7 Initial DSM-IV-TR Diagnosis Axis 1: Second or Secondary at Enrolment	DSM_AX1_ENRL_DX_2_LABEL	
☐	D8 DSM-IV-TR Diagnosis Axis 1: Second or Secondary at Discontinuation	DSM_AX1_DISC_DX_2_LABEL	
☐	D9 Initial DSM-IV-TR Diagnosis Axis 1: Other at Enrolment	DSM_AX1_ENRL_DX_O_LABEL	
☐	D10 DSM-IV-TR Diagnosis Axis 1: Other at Discontinuation	DSM_AX1_DISC_DX_O_LABEL	
☐	D11 Initial DSM-IV-TR Diagnosis Axis 2: Primary or First at Enrolment	DSM_AX2_ENRL_DX_1_LABEL	
☐	D12 DSM-IV-TR Diagnosis Axis 2: Primary or First at Discontinuation	DSM_AX2_DISC_DX_1_LABEL	
☐	D13 Initial DSM-IV-TR Diagnosis Axis 2: Second or Secondary at Enrolment	DSM_AX2_ENRL_DX_2_LABEL	
☐	D14 DSM-IV-TR Diagnosis Axis 2: Second or Secondary at Discontinuation	DSM_AX2_DISC_DX_2_LABEL	
☐	D15 Clinician's Impression	CLNCN_IMPRSSN_FLG_LABEL	

[1] Please consult the data dictionary

HoNOS DATA FIELD SELECTION (This section only relevant when client data and specific services are selected[1])

SUMMARY:

Health of the Nation Outcome Scale (HoNOS) assessment tools were developed in the United Kingdom to measure health and social function. The MHSU clinical working group agreed to adopt them as common assessment tools for both mental health and substance use clients. There are four tools:

- Children/Youth
- Adult
- Senior
- Developmental Disability (Intellectual Disabilities)

Note: Data elements N22 to N39 are completed for Intellectual Disabilities only.

Data elements N3 to N45 are not required for children under 4 years of age.

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	SRV_EPSD_ANON_ID	SRV_EPSD_ANON_ID	Used to link the event record to the corresponding episode
☐	N2 Date of HoNOS Assessment	HONOS_ASSMT_DATE_LABEL	
☐	N3 HoNOS Problems with Overactive, Aggressive, Disruptive, Agitated or Antisocial Behaviour (Behavioural Disturbance)	HONOS_BHVR	
☐	N4 HoNOS Non Accidental Self Injury	HONOS_SELF_INJ	
☐	N5 HoNOS Problem Drinking or Drug Taking/Use (Problems with Alcohol, Substance/Solvent Use)	HONOS_SBSTC_USE	
☐	N6 HoNOS Cognitive Problems	HONOS_COGNV_PRBM	
☐	N7 HoNOS Problems Related to Physical Illness or Disability	HONOS_PHYS_ILLNS	
☐	N8 HoNOS Problems Associated with Hallucinations, Delusions or Abnormal Perceptions (False Beliefs)	HONOS_HALLUC	
☐	N9 HoNOS Problems with Depressive Mood (Symptoms)	HONOS_DPRSV_SMPTM	
☐	N10 HoNOS Problems with Relationships (Social, Supportive and Family Life)	HONOS_FAM_SOC_RELN	
☐	N11 HoNOS Problems with Activities of Daily Living	HONOS_ADL	
☐	N12 HoNOS Overall Problems with Living Conditions	HONOS_LIVG_CONDN	
☐	N13 HoNOS Problems with Occupation/Work and (Leisure) Activities – Quality of Daytime Environment	HONOS_ACTVY	
☐	N14 HoNOS Problems With Over Activity, Attention or Concentration	HONOS_OVER_ACTVY_ATTN	
☐	N15 HoNOS Problems with Scholastic or Language Skills	HONOS_SCHOL_LANG	
☐	N16 HoNOS Problems with Non-organic Somatic Symptoms	HONOS_NORGC_SOMATIC	

[1] Please consult the data dictionary

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	N17 HoNOS Problems with Emotional and Related Symptoms	HONOS_EMOTL	
☐	N18 HoNOS Problems with Peer Relationships	HONOS_PEER_RELN	
☐	N19 HoNOS Problems with Self-Care and Independence	HONOS_SELF_CARE_INDPNDC	
☐	N20 HoNOS Poor School Attendance	HONOS_POOR_SCHL_ATTNDC	
☐	N21 HoNOS Problems with Knowledge or Understanding about the Nature of the Child/ Adolescent's Difficulties	HONOS_KNLDG_OF_DIFCTY	
☐	N22 HoNOS LD #1: Behavioural Problems Directed at Others	HONOS_DD1_BHVR_OTHS	
☐	N23 HoNOS LD #2: Behavioural Problems Directed Towards Self (self-Injury)	HONOS_DD2_BHVR_SELF_INJ	
☐	N24 HoNOS LD #3: Other Mental and Behavioural Problems	HONOS_DD3_OTH_PRBM	
☐	N25 HoNOS LD #4: Attention and Concentration	HONOS_DD4_ATTN	
☐	N26 HoNOS LD #5: Memory and Orientation	HONOS_DD5_MEMORY	
☐	N27 HoNOS LD #6: Communications (problems with understanding)	HONOS_DD6_UNDSTG	
☐	N28 HoNOS LD #7: Communications (problems with expression)	HONOS_DD7_COMMN	
☐	N29 HoNOS LD #8: Problems Associated with Hallucinations and Delusions	HONOS_DD8_HALLUC	
☐	N30 HoNOS LD #9: Problems Associated with Mood Changes	HONOS_DD9_MOOD_CHG	
☐	N31 HoNOS LD #10: Problems with Sleeping	HONOS_DD10_SLEEP	
☐	N32 HoNOS LD #11: Problems with Eating and Drinking	HONOS_DD11_EATG_DRKG	
☐	N33 HoNOS LD #12: Physical Problems	HONOS_DD12_PHYS_PRBM	
☐	N34 HoNOS LD #13: Seizures	HONOS_DD13_SZR	
☐	N35 HoNOS LD #14: Activities of Daily Living at Home	HONOS_DD14_ADL_HOME	
☐	N36 HoNOS LD #15: Activities of Daily Living Outside the Home	HONOS_DD15_ADL_OUTSIDE_HOME	
☐	N37 HoNOS LD #16: Level of Self Care	HONOS_DD16_SELF_CARE	
☐	N38 HoNOS LD #17: Problems with Relationships	HONOS_DD17_RELN	
☐	N39 HoNOS LD #18: Occupation and Activities	HONOS_DD18_OCCPN	
Note: elements N40, N41 and N44 collect information on Other Mental and Behavioural Problems			
☐	N40 Mania	HONOS_MANIA	
☐	N41 Anxiety Including Obsessions/Compulsions	HONOS_ANXIETY	

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	N44 Eating Disordered Behaviour	HONOS_EATG_DSORD	
☐	N45 HoNOS Problems with Lack of Information About Services or Management of the Child's/ Adolescent's Difficulties	HONOS_LACK_INF_SRV	
☐	N46 HoNOS Tool	HONOS_TOOL_LABEL	

SUBSTANCE USE FIELD SELECTION (This section only relevant when client data and specific services are selected[1])

SUMMARY:
Each substance must be submitted in a separate Substance Use (SU) record. Each Substance must be reported at the time of the first and last service for a Continuum of MHSU Service Episode, and, when possible, every six months during the course of the service. It is acknowledged that information is not always available as the client may be lost to contact for a variety of reasons.

	FIELD NAMES	VARIABLE NAMES	REASON FOR REQUEST
☐	SRV_EPSD_ANON_ID	SRV_EPSD_ANON_ID	Used to link the event record to the corresponding episode
☐	U2 Date of Substance Use Assessment	SBSTC_ASSMT_DATE_LABEL	
☐	U3 Substance Use	MHA_SBSTC_LABEL	
☐	U4 Stage of Change (Client's Readiness for Change)	DPNDC_CHG_RDNS_LABEL	
☐	U5 Average Number of Cigarettes or Drinks in 30 Days Prior to Assessment	AVG_DLY_ALCL_CIG_CNSMPN_ UNITS	
☐	U6 Number of Days Drinking or Using Substance in 30 Days Prior to Assessment	MTHLY_CNSMPN_DAYS	
☐	U7 Primary Method of Substance Intake	PRIM_INTAKE_MTHD_LABEL	
☐	U8 Sharing Needles in 30 Days Prior to Assessment	NEEDLE_SHRG_IND	
☐	U9 Source of Substance	SBSTC_SRC_LABEL	
☐	U10 Primary Substance Used	PRIM_SBSTC_FLG_LABEL	

[1] Please consult the data dictionary