



CRCG Data Submission Tips & Reminders

The integrated system for data collection has been utilized for several years. The following has been developed based on the information that was seen in the previous submissions. The biggest problem seen was that of incomplete information being provided. Most importantly, if you have a problem, or are unable to pull up a record you believe is already entered, please contact the State CRCG Office (512/424-6963) for assistance. Re-entering data creates duplicate entries that result in skewed data reports and additional work.

MONTHLY MEETING INFORMATION

- ❖ Monthly meeting information should always be entered, even if there aren't any staffings or follow-ups. This records that there is activity within the CRCG.
- ❖ **CRCG Type:** This should reflect the *TYPE of CRCG*, **not** the person/s being staffed at that meeting. Also note that it is critical that the State Office have accurate information on the type of CRCG for contact information.
- ❖ **Attendance:** Although the Health and Human Services System Transformation has taken place, the Meeting Information form remained the same to enable us to capture the **program areas** that are being represented at the meeting (for example: CPS vs. APS gives a better understanding of area represented as opposed to just DFPS). In 2007, a new form is used to reflect the Transformation.

INITIAL SERVICE PLAN (STAFFING) FORM

- ❖ **Case Numbers:** These are assigned by the CRCG but should be kept for the same person if they reenter the system when possible. Make sure these are entered correctly as they cannot be changed once the entry has been submitted. This case number will be linked to the monthly meeting and all subsequent follow-ups. If the person is re-entering, use the original case number with an "R" at the end. If a youth is being released from TYC, add a "Z" to the end of the case number.
- ❖ **Type of Staffing:** Please make sure you complete this, even if it is just a Resource/Referral.
- ❖ **Referral Sources:** This is NOT referring to the attendees for this staffing. The only one marked here is the agency/ies that actually *referred* the individual to the CRCG.
- ❖ **Consumer Attendance:** This section was quite often left unanswered. Be sure that if either did **not** attend, a reason is selected for either consumer or family, or both.
- ❖ **Contributing Resources/Services:** All agencies identified as providing services to the plan should be marked.
- ❖ **Referred Children/Youth or Referred Adult:** Please make sure that **ALL** questions in this section are answered. Numerous times answers are not given.
- ❖ **Agreement with Service Plan:** It is important to note if there is agreement with the plan. The online system will not allow you to submit the information without an answer to this question.
- ❖ **Demographic and Diagnostic Information for the Referred Individual(s) and Demographic Information for other Family Members for whom the Service Plan identifies a service:** This is important information that has not been completed many times. In order to accurately reflect the individuals served, it is critical to have this information completed every time. Please note that for the last part, it is for other family members for whom a service plan *identifies* a service or resource. This information should be completed as well. Many times data entered on the computer is confusing because it will have only one of the pieces of information entered. This breeds the question: Was it a mistake, or was someone else really identified? (Ages can be estimated for this purpose.)

FOLLOW-UP FORM

- ❖ **Date of Initial Staffing:** It is important to have the correct date of the Initial Staffing. This is how it will track later. If you cannot locate a staffing that you know was entered in the system, please contact the State Office immediately. Do NOT re-enter the information; this will create a duplicate record.
- ❖ **Type of Follow-up:** Please select the appropriate box dated from the initial staffing. If the "Other" category is used, please enter a timeframe from the initial staffing (i.e., 15 months, 21 months, etc.). Any special comments can be placed in the comment section later in the form.
- ❖ **Service Needs:** This area has had minor changes made in the online system. You are now able to reset or clear just one line that was done in error. Only place a check mark to indicate the status of service needs *that were identified*.
- ❖ **Barriers:** Don't forget to identify barriers.

RETENTION:

All CRCG records should be retained using the following formula: AC+CE+2 where AC means After Closed and CE means Calendar Year End.

Example: A record is closed in February 2008. Records must be retained February 2008 (AC) +December 31, 2008 (CE) + 2 years so that record may be **destroyed** after December 31, 2010.