

**Georgia Department of Behavioral Health & Developmental Disabilities** *Frank W. Berry, Commissioner* 

**Office of Adult Mental Health** *Two Peachtree Street, NW · 23<sup>rd</sup> Floor · Atlanta, Georgia 30303 · (404) 232-1644* 

## Assertive Community Treatment DACTS Fidelity Review Report

Provider: Grady – Team 1

Date(s) of Review: Jan. 29-30, 2014

Region: 3

The Dartmouth Assertive Community Treatment Scale was completed following the visit. Attached to this report is a copy of the completed score card. The scale is divided into three sections, Human resources: Structure and Composition, Organizational Boundaries, and Nature of Services. Each item is rated on a 5-point response format, ranging from 1 = no implementation to 5 = full implementation, with intermediate numbers representing progressively greater degrees of implementation. The GOI (General Organizational Index) was not completed during this review.

## **Total Score: 118**

## Total Mean Score: 4.21

## **DACTS** Items

H. Human Resources: Structure and Composition	Section Mean
	4.36
H1. Small caseload	Rating
ACT Teams should maintain a low consumer to staff ratio in the range of 10 to 1 to ensure	5
adequate intensity and individualization of services.	
H2. Team Approach	Rating
The entire team shares the responsibility for each consumer, each team member contributes expertise	5
as appropriate. In a typical 2 week period what percentage of consumers sees more than one member	
of the team.	
H3. Program Meeting	Rating
Daily Team meetings allow ACT team members to discuss consumers, solve problems, and plan	5
treatment efforts, ensuring all consumers receive optimal service.	
H4. Practicing ACT Leader	Rating
Supervisor of ACT Team provides direct services. According to Operational and Clinical Standards and	1
SAMHSA it is expected that the practicing ACT Team leader provides services in the community at least	
50% of the time.	
H5. Continuity of Staffing	Rating
Program maintains the same staffing over time.	4

H6. Staff Capacity	Rating
Program operates at full staffing.	4
H7. Psychiatrist on Staff	Rating
At least 1 full-time Psychiatrist per 100 consumers.	5
H8. Nurse on Staff	Rating
At least 2 full-time Nurses per 100 consumers.	5
H9. Substance Abuse Specialist on Staff	Rating
At least 2 full time SA Specialists with at least 1 year of SA training or clinical experience per 100	5
consumers.	5
H10. Vocational Specialist on Staff	Rating
At least 2 full time Vocational Specialists with at least 1 year of vocational training or experience per 100	4
consumers.	
H11. Program Size	Rating
Program is sufficient size to consistently provide necessary staffing diversity and coverage. The ACT team provides an integrated approach to mental health services, through which the range of treatment issues are addressed from a variety of perspectives. It is critical to maintain adequate staff size and disciplinary background to provide comprehensive, individualized service to each consumer.	5
O. Organizational Boundaries	Section Mean
	4.29
O1. Explicit Admission Criteria	Rating
Targeted toward consumers who typically do not benefit from usual services. This program has a clearly	5
identified mission to serve a particular population; it is measurable and operationally defined criteria to	
screen out inappropriate referrals. An admission criterion is targeted toward consumers who typically	
do not benefit from usual services.	
O2. Intake Rate	Rating
Program takes consumers in at a low rate to maintain a stable service environment.	5
O3. Full Responsibility for Treatment Services	Rating
ACT team directly provides psychiatric services, medication management, counseling, housing support,	5
SA treatment, employment services, and case management. Consumers benefit when services are	
integrated into a single team rather than when they are referred to many different service providers. An	
integrated approach allows services to be tailored to each consumer.	
O4. Responsibility for Crisis Services	Rating
Program has 24 hr responsibility for covering psychiatric crises.	5
O5. Responsibility for Hospital Admissions	Rating
ACT team is closely involved in hospital admissions.	2
	Rating
O6. Responsibility for Hospital Discharge Planning	
	5
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O6. Responsibility for Hospital Discharge Planning   Program is involved in planning for hospital discharges.   O7. Time-unlimited Services/Graduation Rate   Program does not have arbitrary time limits for consumers admitted to the program.   S. Nature of Services   S1. Community-based Services	5 Rating 3 Section Mean
O6. Responsibility for Hospital Discharge Planning   Program is involved in planning for hospital discharges.   O7. Time-unlimited Services/Graduation Rate   Program does not have arbitrary time limits for consumers admitted to the program.   S. Nature of Services   S1. Community-based Services   Develops skills in the community rather than function as an office-based program.	5 Rating 3 Section Mean 4.00 Rating
O6. Responsibility for Hospital Discharge Planning   Program is involved in planning for hospital discharges.   O7. Time-unlimited Services/Graduation Rate   Program does not have arbitrary time limits for consumers admitted to the program.   S. Nature of Services   S1. Community-based Services	5 Rating 3 Section Mean 4.00 Rating

Program uses street outreach, legal mechanisms, i.e. probation, and parole to ensure ongoing engagement.	5
S4. Intensity of Service	Rating
High amount of face-to-face service time as needed. To help consumers with serious symptoms	3
maintain and improve their functioning within the community high service intensity is often required.	
S5. Frequency of Contact	Rating
High amount of face-to-face service contacts as needed. ACT teams are highly invested in their	2
consumers and maintain frequent contact to provide ongoing responsive support as needed. Frequent	
contacts are associated with improved consumer outcomes.	
S6. Work with Informal Support System	Rating
Program provides support and skills for consumers' informal support network (i.e., people not paid to	2
support consumer, such as family, landlord, shelter staff, employer, or other key person).	
S7. Individualized Substance Abuse Tx	Rating
One or > members of the team provide direct SA treatment to consumers with substance use disorders.	4
S8. Co-occurring Disorder Treatment Group	Rating
Program uses group modalities as a treatment strategy for people with substance use disorders	5
consumers with SA disorders.	
S9. Co-occurring Disorder Model	Rating
Program uses a non-confrontational, stage wise treatment model, follows behavioral principles,	5
considers interactions between mental illness and substance abuse, and has gradual expectations of	
abstinence.	
S10. Role of consumers on Treatment Team	Rating
Consumers are members of the team who provide direct services.	5
Total:	118
Total Mean:	4.21