Tips on editing the GAIN-I Core Recommendation and Referral Summary (GRRS)

On October 1, 2012 the Behavioral Health Interagency Cooperative (BHIC) approved the GAIN-I Core as the default standard assessment for all state-funded treatment. They also agreed to allow the use of other GAIN assessment tools in certain situations.

The GAIN I Core predates the development of the longer GAIN I Full. The Core, like the longer Full, is a standardized clinical assessment for diagnosis, placement, and treatment planning. The tool has sections covering background, substance use, physical health, risk behaviors and disease prevention, mental and emotional health, environment and living situation, legal, and vocational.

While the unedited Gain Recommendation and Referral Summary (GRRS) format of the Core and the Full are identical, the Core GRRS includes Missing Data cues that are not found in the GAIN-I Full GRRS report.

Chestnut Health Systems recommends the following procedures when editing the missing data cues in the GRRS generated by the Gain-I Core:

1. Clinicians should use their experience and clinical judgment to determine whether or not it is important to capture the missing information.
2. On a case by case basis, the clinician should consider the relevance of the missing information to each client’s situation.
3. If it is decided that additional information should be collected outside of the assessment, then it is recommended the clinician make a note in the client’s file and add the information into the GRRS.
4. If it is decided that the missing information is not crucial to collect for treatment planning then the prompt or paragraph can be removed from the GRRS report.
5. The intake clinician who conducts the assessment can also add a recommendation within the GRRS for the treatment clinician to follow-up and collect specific information at a later date. This could be done by adding a note within the GRRS under the “Prompt” section(s) which would allow treatment staff to be quickly and easily notified of any area(s) in the client’s situation that need further assessment for treatment planning.