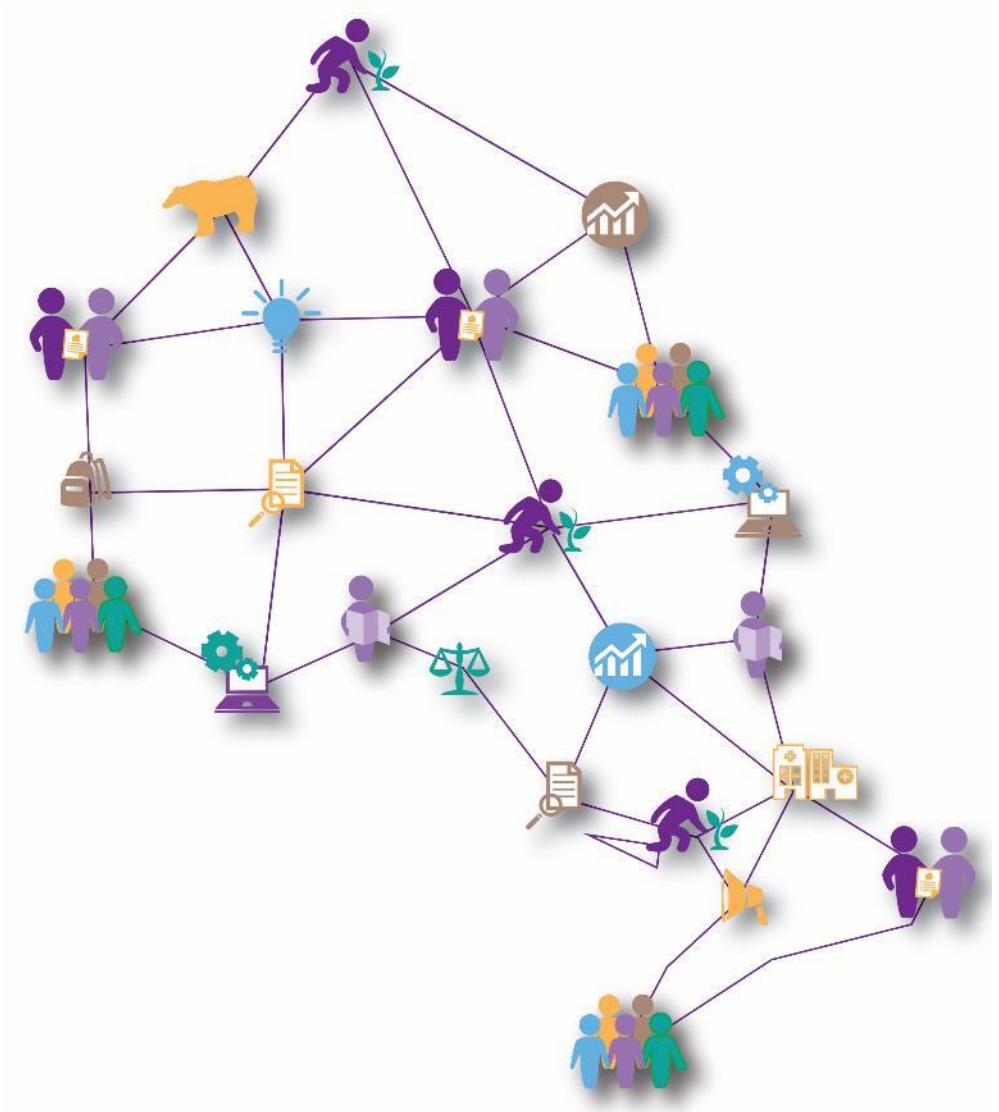
Using the GAIN-SS (CAMH Modified) to screen for mental health and addictions

Presented by: Provincial System Support Program (PSSP)

camh



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Gain Coordinating Center, Chestnut Health Systems

If your agency is implementing the SS&A Process (GAIN-SS, MMS, POSIT, and GAIN Q3 MI ONT), please ensure you review the SS&A Orientation Webinar: https://vimeo.com/170870908

This webinar focuses specifically on the GAIN-SS (CAMH Modified).

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This webinar provides an in-depth look at the administration, scoring and interpretation of the GAIN-SS (CAMH Modified).

Please view this webinar in its entirety.

It is recommended that you have a copy of the GAIN-SS with you as you view this presentation.

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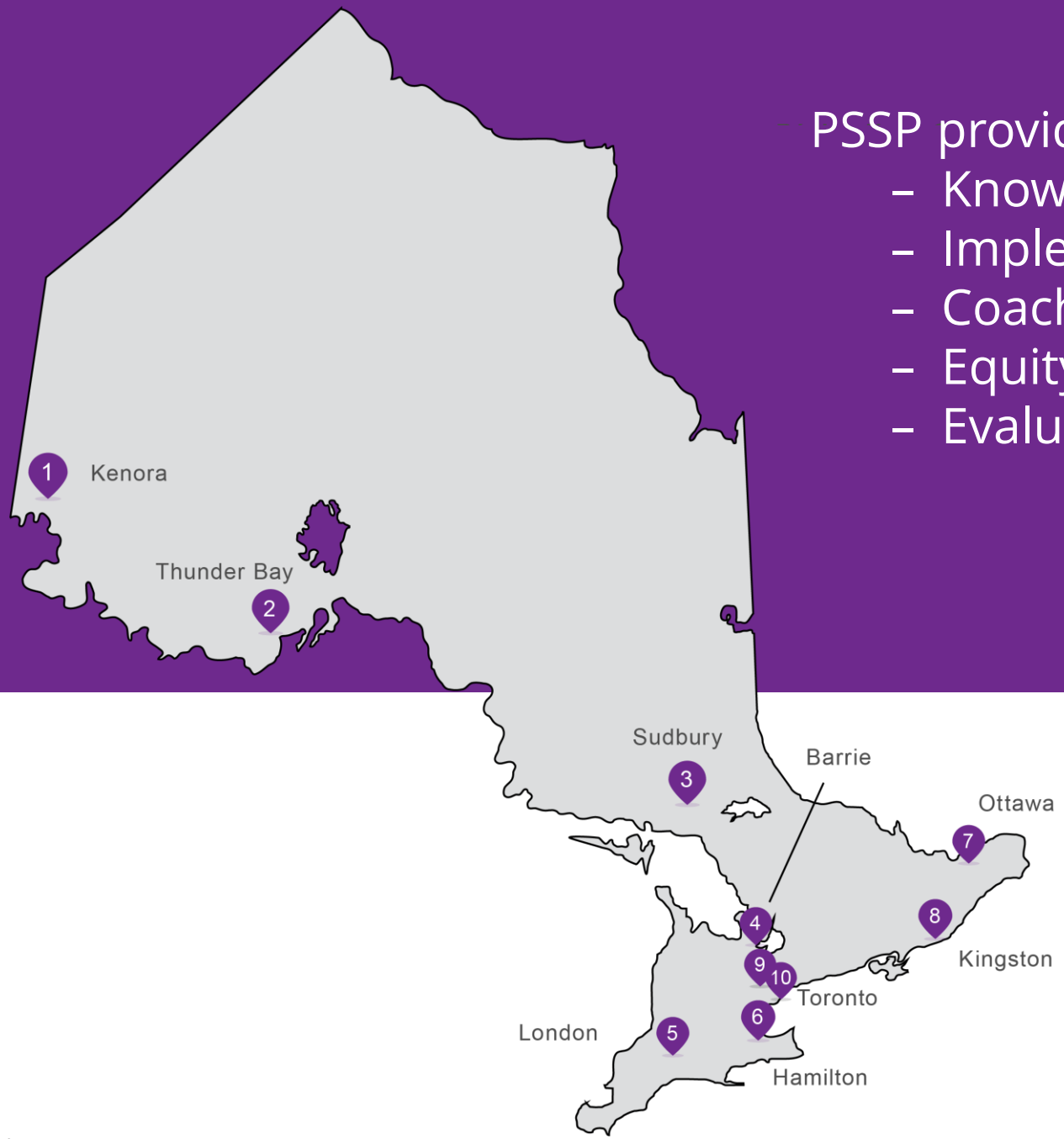

- PSSP provides capacity and expertise in:
  - Knowledge exchange
  - Implementation
  - Coaching
  - Equity and engagement
  - Evaluation and data

PSSP's provincial office is in Toronto with nine regional offices located throughout Ontario.

www.improvingsystems.ca

AGENDA

1. Screening & Assessment
2. Overview of the GAIN-SS (CAMH Modified)
3. Administration, Scoring & Interpretation
4. Summary

1

Screening & Assessment for Mental Health and Addiction

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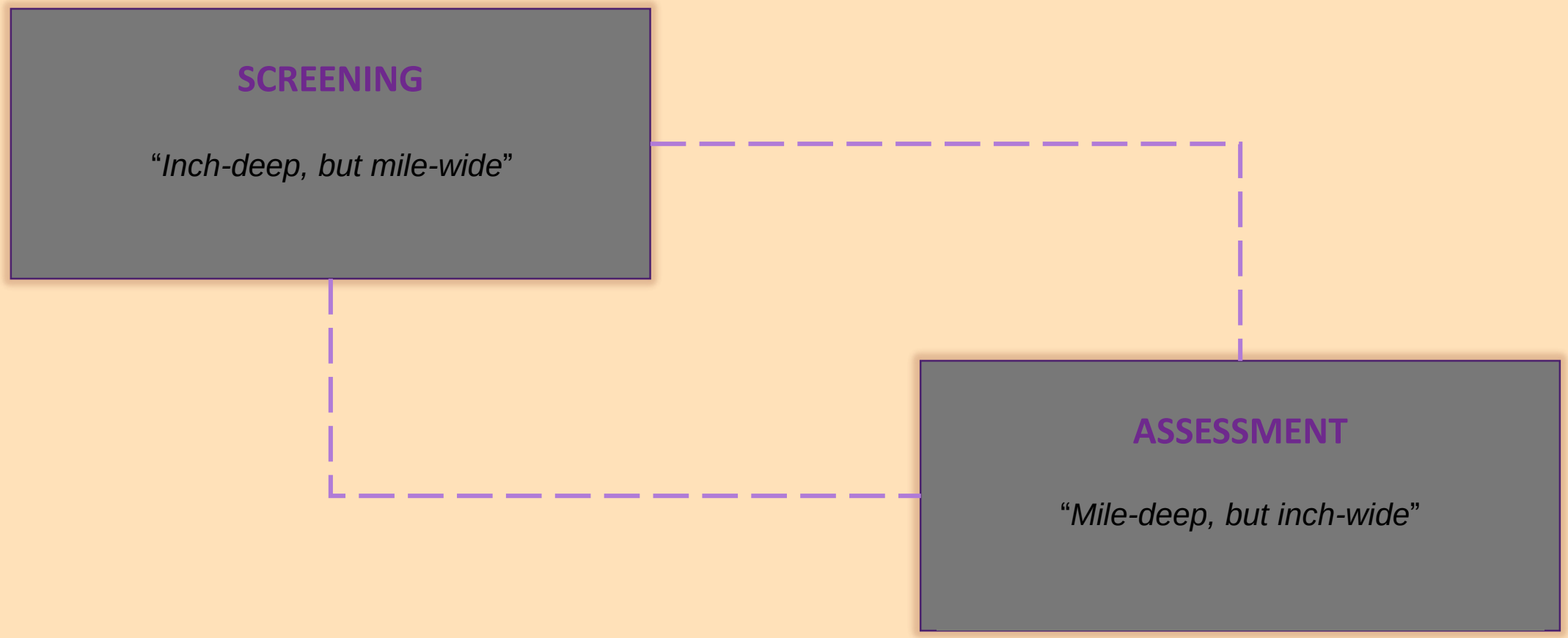

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Screening vs. Assessment

It's a screener if....

- Is brief and easy to administer/score
- Does not collect diagnostic information but:
  - Identifies individuals in need of further assistance (e.g. assessment and/or intervention) – identifies a problem
  - Provides a general sense of severity

It's an assessment if...

- Involves a more rigorous scoring process
- Must be interpreted by a trained/licensed professional
- Asks comprehensive questions that provide diagnostic information
- Can be used to create a detailed treatment plan

Screening = Inch deep and a mile wide
Assessment = A mile deep and an inch wide

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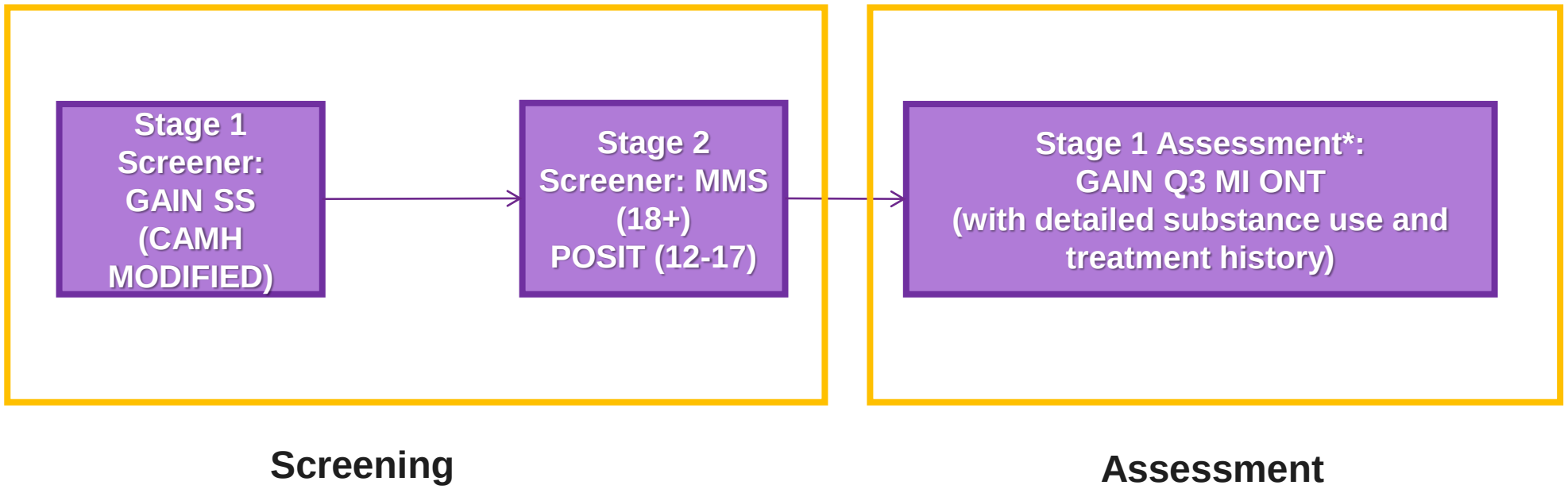
The SS&A Process in Ontario



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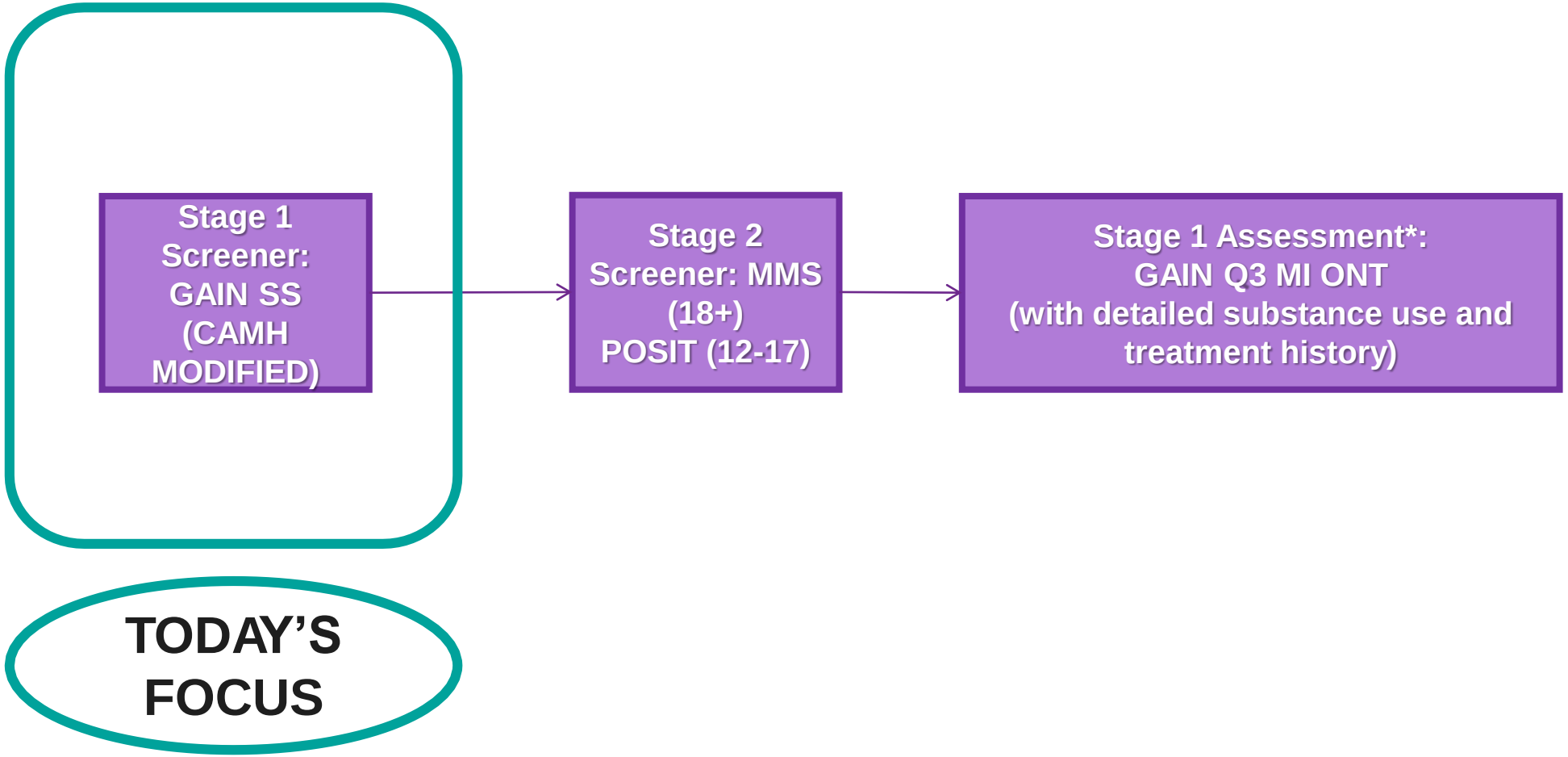
The SS&A Process in Ontario



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Why Screen for Mental Health and Addictions?

- ✓ Screening recognized as **best practice**
- ✓ Important part of **early identification and intervention**
- ✓ Early intervention makes **positive difference in quality of life** of those identified and on level of service use over time.
- ✓ Universal & consistent screening is a key step toward achieving **integrated service** for those with addiction and mental health issues
- ✓ Increases **referral to appropriate services** and use of appropriate level of intervention

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2

Overview of the GAIN-SS
(3.0.1 CAMH Modified)

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Global Appraisal of Individual Needs – Short Screener (CAMH Modified)

Applicable age range	12yr+
Length for administration	5-10 minutes
Items	23 items; 4 subscales; CAMH-MODIFIED: +6 items
Who can administer	Clinician or Self-administered
Languages available	English and French
Formal certification	Not required
Psychometric validation?	Yes

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Administration Guidelines

- Ask the items exactly as printed
- Ask every item (client can choose to say DK/RF)
- Read each item completely, including the introductions
- Read items at an appropriate tempo
- Explain words/phrases as needed, using neutral probes
- Do not suggest answers
- **Use common sense!**

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Preparation/Introducing the GAIN-SS

- Find a quiet, private place
- Explain why you need to ask the questions and how their responses will be used
- Address confidentiality and any exceptions to confidentiality
- Say how long it will take
- If self-administered, ask if client needs help

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1. Introduction (read to the participant)

To help us get a better understanding of any problems you might have, how those problems are related to each other, and what kind of services might help you the most, I would like to spend about 5 to 10 minutes asking you some questions as part of a short screener that we use with many of our clients. Your answers are private and will be used only for your treatment and to help us evaluate our own services.

Please answer each question as accurately as you can. If you are not sure about an answer, please give us your best guess. If you simply do not know the answer to a question, you can tell me and I'll enter "DK" for that item. You may also refuse to answer any question, and I'll enter "RF" for that item. Please ask if you do not understand a question or a word. At the end of the interview, I will check to make sure that everything is complete, and I'll answer any additional questions.

Do you have any questions before we begin?

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2. Cognitive Impairment Screener

Because we are going to ask you a lot of questions about when and how often things have happened, I need to start by getting a sense of how well your memory is working right now.

a. What year is it now?
(Circle 4 for any error) 0 4

b. What month is it now?
(Circle 3 for any error) 0 3

Please repeat this phrase after me: John Brown, 42 Mark Street, Detroit.
(No score—used for f below)

c. About what time is it?
(Circle 3 for any error) 0 3

d. Please count backwards from 20 to 1.
[20, 19, 18, 17, 16, 15, 14, 13, 12, 11, 10, 9, 8, 7, 6, 5, 4, 3, 2, 1]
(Circle 2 for one error, 4 for 2 or more errors).....0 2 4

e. Please say the days of the week in reverse order.
[Sat, Fri, Thurs, Wed, Tues, Mon, Sun]
(Circle 2 for one error, 4 for 2 or more errors).....0 2 4

f. Please repeat the phrase I asked you to repeat before.
[John / Brown / 42 / Mark Street / Detroit]
(Circle 2 for each subsection of /text/ missed) ...0 2 4 6 8 10

g. **(Add up scores from a through f and record)** ..... |__|__|

Or use an agency approved CIS

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3. Time frame anchoring

30-day anchor

Several questions will ask you about things that may have happened during the past month, 2 to 3 months ago, 4 to 12 months ago, or more than 12 months ago. To help you remember these time periods, please look at this calendar. First, we will establish a 30-day anchor date. Do you recall anything that was happening on [30-DAY ANCHOR DATE]?

30-day anchor: v. _____

If the last time something happened was between [30-DAY ANCHOR] and now, please answer, "past month."

90-day anchor

Next, we'll establish a 90-day anchor date. Do you recall anything that was happening on [90-DAY ANCHOR DATE]?

90-day anchor: _____

If the last time something happened was between [90-DAY ANCHOR] and [30-DAY ANCHOR], please answer, "2 to 3 months ago."

12-month anchor

Finally, we'll establish a 12-month anchor date. Do you recall anything that was happening on [12-MONTH ANCHOR DATE]?

12-month anchor: v. _____

If the last time something happened was between [12-MONTH ANCHOR DATE] and [90-DAY ANCHOR DATE], please answer, "4 to 12 months ago." If the last time something happened was before [12-MONTH ANCHOR DATE], please answer, "More than 12 months ago." And if something never happened, please answer, "Never."

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Responses – Recency Codes

4. Response choices for the GAIN Short Screener

Please use these response choices when answering the questions on the GAIN Short Screener:

Past month 4
2 to 3 months ago.....3
4 to 12 months ago.....2
1+ years ago 1
Never 0

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Additional Administration Guidelines

- Choose only one response per item
- Read the stem at the beginning of each section
- Do not accept “sometimes”, “sort of” or “maybe” as answers – DK or RF is OK
- Clearly mark any corrections
- Write verbatim responses neatly
- Review the form for completion/accuracy

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When Screening May Not Be Appropriate

- Safety concerns
- Severe distress/crisis
- Cognitive impairments (temporary or permanent)
- Concerns with engagement
- Other medical concerns take precedence

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Domains of GAIN-SS…

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Comprised of Four Subscales

GAIN-SS Domain	Symptoms/Disorders
1. Internalizing Disorder Screener (IDScr)	Depression, Anxiety, Somatic disorder, Traumatic distress, Suicide
2. Externalizing Disorder Screener (EDScr)	Attention Deficit, Hyperactivity/Impulsivity, Conduct disorder, Other impulse control disorders
3. Substance Disorder Screener (SDScr)	Misuse, Dependence, Other substance induced health or psychiatric problems
4. Crime/Violence Disorder Screener (CVScr)	Interpersonal violence, Drug related crime, Property crime, Interpersonal crime

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Comprised of Four Subscales + CAMH Modified

GAIN-SS Domain	Symptoms/Disorders
1. Internalizing Disorder Screener (IDScr)	Depression, Anxiety, Somatic disorder, Traumatic distress, Suicide
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4. Crime/Violence Disorder Screener (CVScr)	Interpersonal violence, Drug related crime, Property crime, Interpersonal crime
5. CAMH Modified/Supplemental (AQ5)	**Problematic eating, traumatic distress, disordered thinking, problem gambling**

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Administration, Scoring and Interpretation

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Does your agency use Catalyst (DATIS) as an EMR?

Please complete the GAIN-SS on Catalyst (not on paper).

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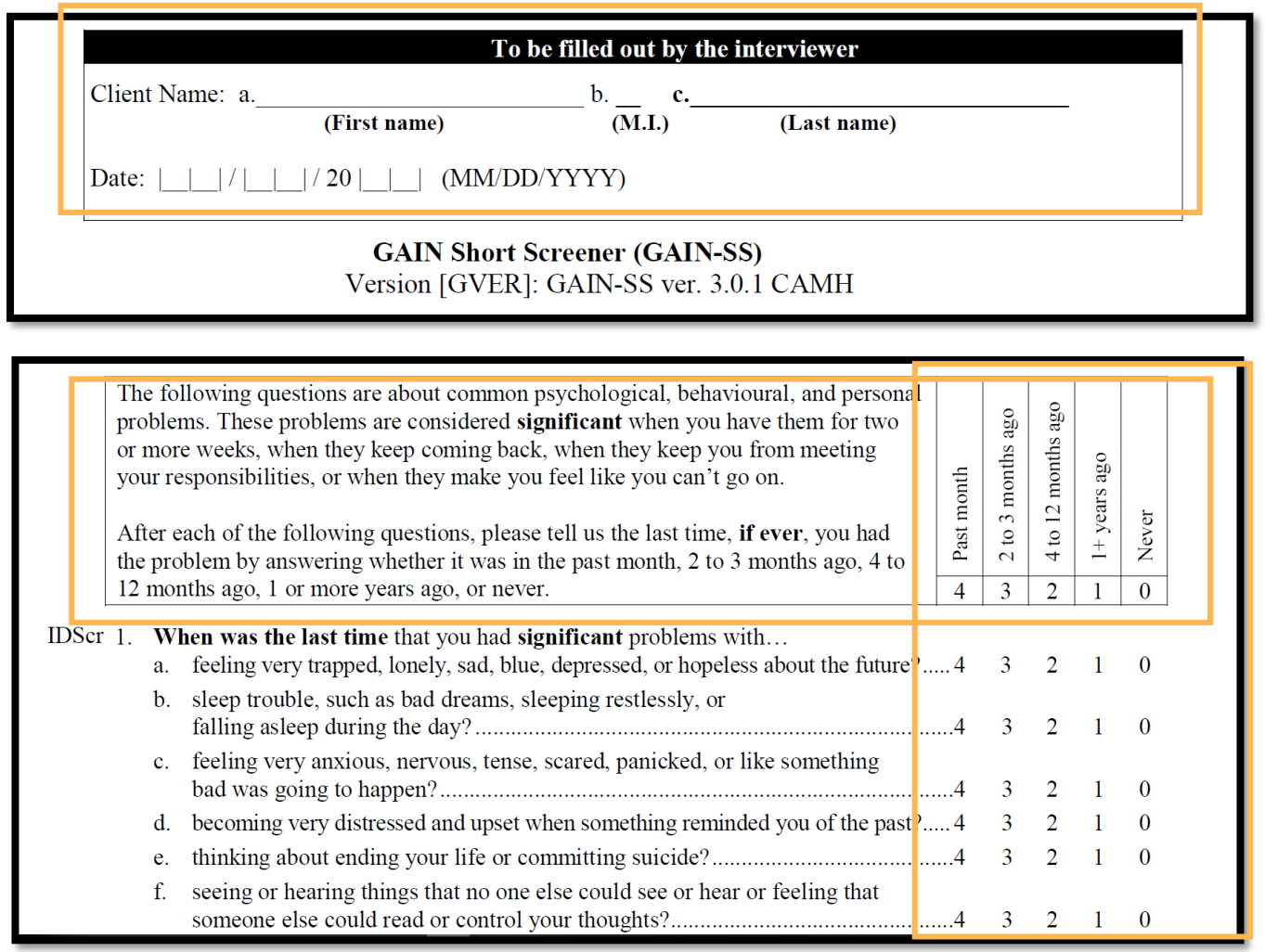
Administration – Introduction



To be filled out by the interviewer

Client Name: a._____ b. __ c._____
(First name) (M.I.) (Last name)

Date: |__|__| / |__|__| / 20 |__|__| (MM/DD/YYYY)

GAIN Short Screener (GAIN-SS)
Version [GVER]: GAIN-SS ver. 3.0.1 CAMH

The following questions are about common psychological, behavioural, and personal problems. These problems are considered **significant** when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on.

After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.

	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0
IDScr 1. **When was the last time** that you had **significant** problems with…					
a. feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	4	3	2	1	0
b. sleep trouble, such as bad dreams, sleeping restlessly, or falling asleep during the day?	4	3	2	1	0
c. feeling very anxious, nervous, tense, scared, panicked, or like something bad was going to happen?	4	3	2	1	0
d. becoming very distressed and upset when something reminded you of the past?	4	3	2	1	0
e. thinking about ending your life or committing suicide?	4	3	2	1	0
f. seeing or hearing things that no one else could see or hear or feeling that someone else could read or control your thoughts?	4	3	2	1	0

- Complete client name and date of interview.
- Read introduction. Unlike previous set of instructions, these instructions, and each item, should be administered **verbatim**.
- Provide client with **written response options and/or read response options** to Client with each item.

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IDScr: Internalizing Disorder Screen

Depression, Anxiety, Somatic disorder, Traumatic distress, Suicide

	The following questions are about common psychological, behavioural, and personal problems. These problems are considered **significant** when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on. After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
		4	3	2	1	0
IDScr	1. **When was the last time** that you had **significant** problems with…					
	a. feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	4	3	2	1	0
	b. sleep trouble, such as bad dreams, sleeping restlessly, or falling asleep during the day?	4	3	2	1	0
	c. feeling very anxious, nervous, tense, scared, panicked, or like something bad was going to happen?	4	3	2	1	0
	d. becoming very distressed and upset when something reminded you of the past?	4	3	2	1	0
	e. thinking about ending your life or committing suicide?	4	3	2	1	0
	f. seeing or hearing things that no one else could see or hear or feeling that someone else could read or control your thoughts?	4	3	2	1	0

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EDScr: Externalizing Disorder Screener

Attention Deficit, Hyperactivity/Impulsivity, Conduct disorder, Other impulse control disorders

	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0
EDScr 2. **When was the last time** that you did the following things **two or more times**?					
a. Lied or conned to get things you wanted or to avoid having to do something	4	3	**2**	1	0
b. Had a hard time paying attention at school, work, or home.	**4**	3	2	1	0
c. Had a hard time listening to instructions at school, work, or home.	**4**	3	2	1	0
d. Had a hard time waiting for your turn.	4	3	2	1	**0**
e. Were a bully or threatened other people.	4	3	2	1	**0**
f. Started physical fights with other people	4	3	2	1	**0**
g. Tried to win back your gambling losses by going back another day.	4	3	2	1	**0**

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SDScr: Substance Disorder Screener

Misuse, dependence, other substance induced health or psychiatric problems

Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
4	3	2	1	0

SDScr 3. **When was the last time** that…

a.	you used alcohol or other drugs weekly or more often?	**4**	3	2	1	0
b.	you spent a lot of time either getting alcohol or other drugs, using alcohol or other drugs, or recovering from the effects of alcohol or other drugs (e.g., feeling sick)?	**4**	3	2	1	0
c.	you kept using alcohol or other drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	4	3	2	**1**	0
d.	your use of alcohol or other drugs caused you to give up or reduce your involvement in activities at work, school, home, or social events?	4	**3**	2	1	0
e.	you had withdrawal problems from alcohol or other drugs like shaky hands, throwing up, having trouble sitting still or sleeping, or you used any alcohol or other drugs to stop being sick or avoid withdrawal problems?	4	3	2	1	**0**

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CVScr: Crime/Violence Disorder Screener

Interpersonal violence, drug related crime, property crime, interpersonal crime

(Continued)

After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0

CVScr 4. **When was the last time** that you…

a.	had a disagreement in which you pushed, grabbed, or shoved someone?	4	3	2	1	0
b.	took something from a store without paying for it?	4	3	2	1	0
c.	sold, distributed, or helped to make illegal drugs?	4	3	2	1	0
d.	drove a vehicle while under the influence of alcohol or illegal drugs?	4	3	2	1	0
e.	purposely damaged or destroyed property that did not belong to you?	4	3	2	1	0

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AQ: Supplemental Questions

Problematic eating
Traumatic distress
Disordered thinking
Gambling

Additional questions (CAMH modified)

After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0

AQ5. **When was the last time** you had **significant** problems with… **(not related to alcohol/drug use)**

a.	missing meals or throwing up much of what you did eat to control your weight?	4	3	2	1	0
b.	eating binges or times when you ate a very large amount of food within a short period of time and then felt guilty?	4	3	2	1	0
c.	being disturbed by memories or dreams of distressing things from the past that you did, saw, or had happen to you?	4	3	2	1	0
d.	thinking or feeling that people are watching you, following you, or out to get you?	4	3	2	1	0
e.	videogame playing or internet use that caused you to give up, reduce, or have problems with important activities or people of work, school, home or social events?	4	3	2	1	0
f.	gambling that caused you to give up, reduce, or have problems with important activities or people at work, school, home, or social events?	4	3	2	1	0

5. Do you have other **significant** psychological, behavioural, or personal problems that you want treatment for or help with? (If yes, please describe below) ..... Yes 1 No 0

v1. _____

_____

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AQ: Supplemental Questions

Problematic eating
Traumatic distress
Disordered thinking
Gambling

Additional questions (CAMH modified)

After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0

AQ5. **When was the last time** you had **significant** problems with… **(not related to alcohol/drug use)**

a. missing meals or throwing up much of what you did eat to control your weight?	4	3	2	1	**0**
b. eating binges or times when you ate a very large amount of food within a short period of time and then felt guilty?	4	3	2	1	**0**
c. being disturbed by memories or dreams of distressing things from the past that you did, saw, or had happen to you?	**4**	3	2	1	0
d. thinking or feeling that people are watching you, following you, or out to get you?	4	3	2	1	**0**
e. videogame playing or internet use that caused you to give up, reduce, or have problems with important activities or people of work, school, home or social events?	4	3	2	1	**0**
f. gambling that caused you to give up, reduce, or have problems with important activities or people at work, school, home, or social events?	4	3	2	1	**0**

5. Do you have other **significant** psychological, behavioural, or personal problems that you want treatment for or help with? (If yes, please describe below) ..... Yes 1 No **0**

v1. _____

_____

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6. What is your gender? (If other, please describe below) 1 - Male 2 - Female 99 - Other

v1. _____

7. How old are you today? |3|6| Age

7a. How many minutes did it take you to complete this survey? |__|__|__| Minutes

Staff Use Only

8. Site ID: _____ Site name v. _____

9. Staff ID: _____ Staff initials v. _____

10. Client ID: _____ Comment v. _____

11. Mode: 1 - Administered by staff 2 - Administered by other 3 - Self-administered

13. Referral: MH ____ SA ____ ANG ____ Other ____ 14. Referral codes: _____

15. Referral comments: v1. _____

Scoring

Screener	Items	Past month (4)	Past 90 days (4, 3)	Past year (4, 3, 2)	Ever (4, 3, 2, 1)
IDScr	1a – 1f				
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

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Scoring…

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GAIN-SS Scoring

The GAIN-SS generates two types of scores:

DOMAIN scores:
One score for each of the four domains or subscreeners

TOTAL score:
Score for the entire tool *(with the exception of supplemental questions)*

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The following questions are about common psychological, behavioural, and personal problems. These problems are considered **significant** when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on. After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0
IDScr 1. **When was the last time** that you had **significant** problems with…					
a. feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	4	3	2	1	0
b. sleep trouble, such as bad dreams, sleeping restlessly, or falling asleep during the day?	4	3	2	1	0
c. feeling very anxious, nervous, tense, scared, panicked, or like something bad was going to happen?	4	3	2	1	0
d. becoming very distressed and upset when something reminded you of the past?	4	3	2	1	0
e. thinking about ending your life or committing suicide?	4	3	2	1	0
f. seeing or hearing things that no one else could see or hear or feeling that someone else could read or control your thoughts?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f	3			
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

Each subscale is separately validated and scored, by recency (time-frame).

Score for each subscale = tally number of times client endorsed that subscale + tallied score in earlier time-frames in same subscale.

Do not add numeric values of the scores.

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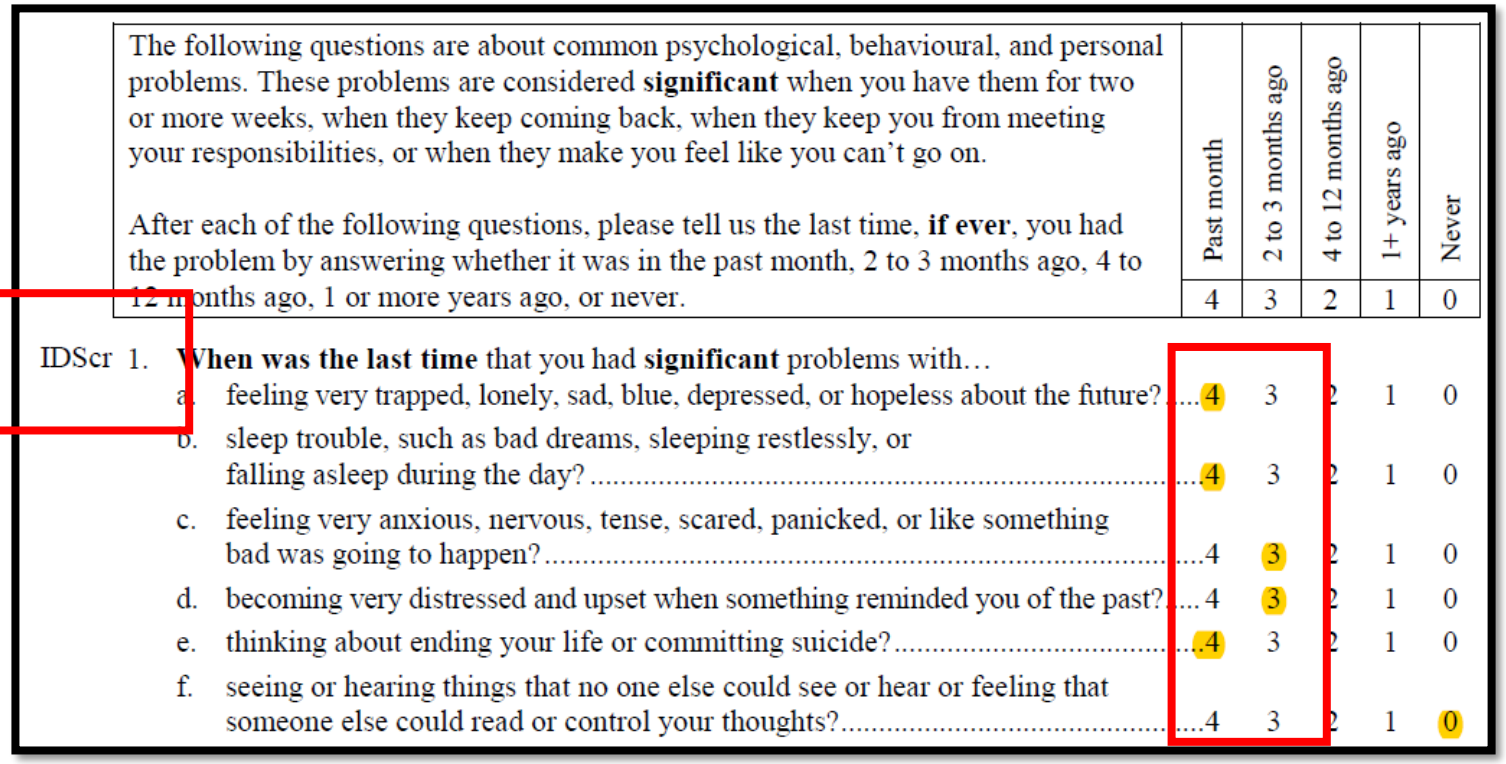

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	4	3	2	1	0
IDScr 1. **When was the last time** that you had **significant** problems with…					
a. feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	4	3	2	1	0
b. sleep trouble, such as bad dreams, sleeping restlessly, or falling asleep during the day?	4	3	2	1	0
c. feeling very anxious, nervous, tense, scared, panicked, or like something bad was going to happen?	4	3	2	1	0
d. becoming very distressed and upset when something reminded you of the past?	4	3	2	1	0
e. thinking about ending your life or committing suicide?	4	3	2	1	0
f. seeing or hearing things that no one else could see or hear or feeling that someone else could read or control your thoughts?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f	3	5		
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

Each subscale is separately validated and scored, by recency (time-frame).

Score for each subscale = tally number of times client endorsed that subscae + tallied score in earlier time-frames in same subscale.

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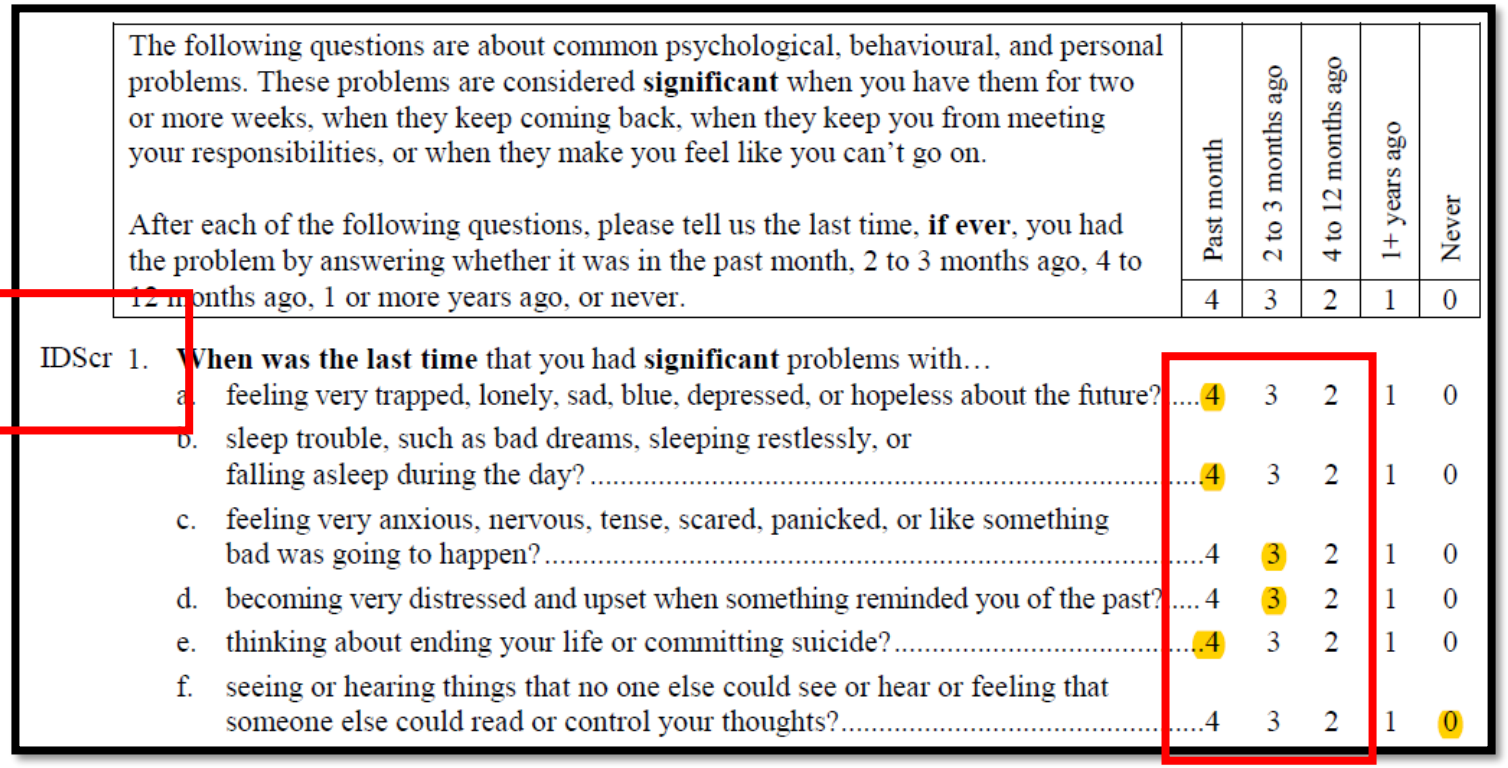

The following questions are about common psychological, behavioural, and personal problems. These problems are considered **significant** when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on. After each of the following questions, please tell us the last time, **if ever**, you had the problem by answering whether it was in the past month, 2 to 3 months ago, 4 to 12 months ago, 1 or more years ago, or never.	Past month	2 to 3 months ago	4 to 12 months ago	1+ years ago	Never
	4	3	2	1	0
IDScr 1. **When was the last time** that you had **significant** problems with…					
a. feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	4	3	2	1	0
b. sleep trouble, such as bad dreams, sleeping restlessly, or falling asleep during the day?	4	3	2	1	0
c. feeling very anxious, nervous, tense, scared, panicked, or like something bad was going to happen?	4	3	2	1	0
d. becoming very distressed and upset when something reminded you of the past?	4	3	2	1	0
e. thinking about ending your life or committing suicide?	4	3	2	1	0
f. seeing or hearing things that no one else could see or hear or feeling that someone else could read or control your thoughts?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f	3	5	5	
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

Each subscale is separately validated and scored, by recency (time-frame).

Score for each subscale = tally number of times client endorsed that subscale + tallied score in earlier time-frames in same subscale.

Do not add numeric values of the scores.

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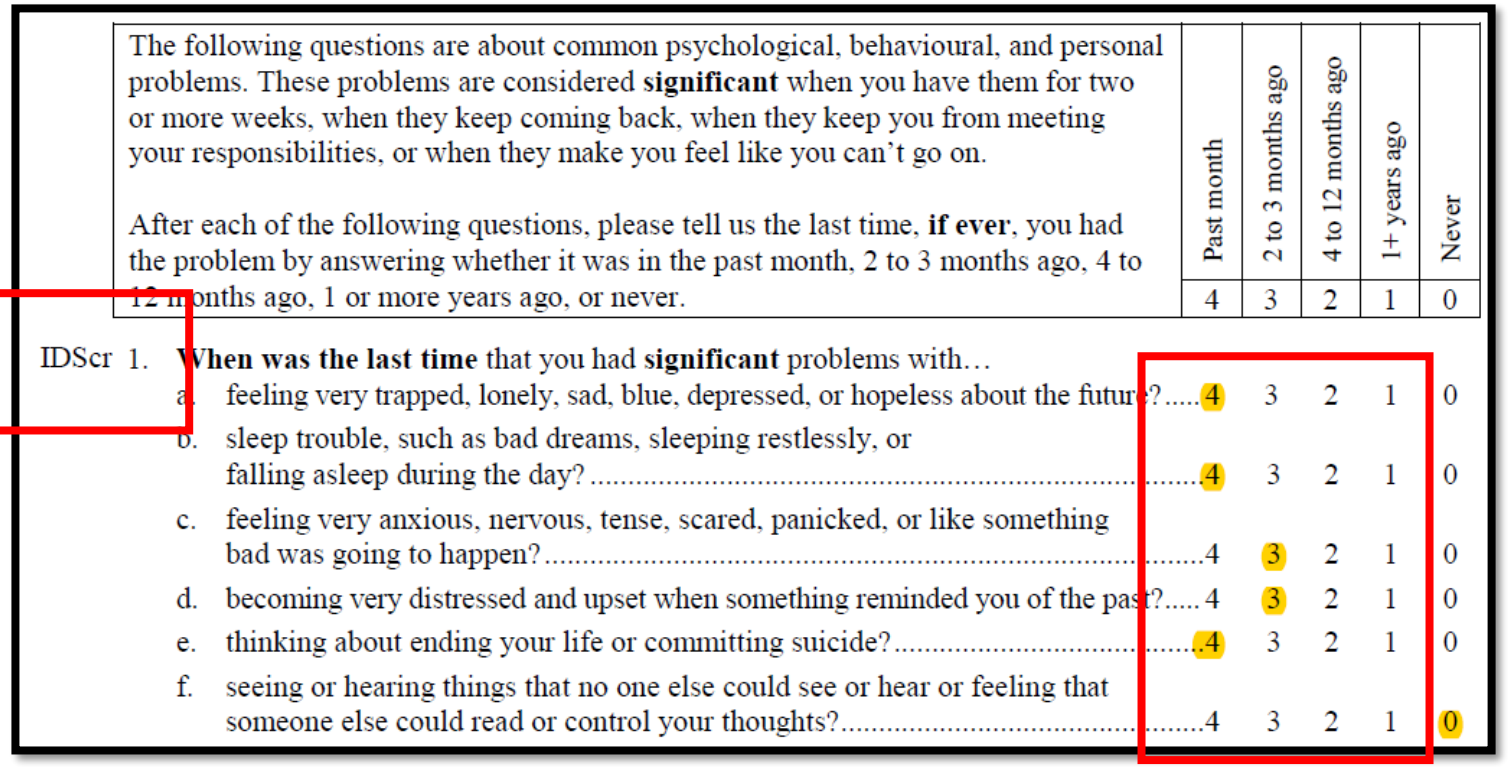

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	4	3	2	1	0
IDScr 1. **When was the last time** that you had **significant** problems with…					
a. feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	4	3	2	1	0
b. sleep trouble, such as bad dreams, sleeping restlessly, or falling asleep during the day?	4	3	2	1	0
c. feeling very anxious, nervous, tense, scared, panicked, or like something bad was going to happen?	4	3	2	1	0
d. becoming very distressed and upset when something reminded you of the past?	4	3	2	1	0
e. thinking about ending your life or committing suicide?	4	3	2	1	0
f. seeing or hearing things that no one else could see or hear or feeling that someone else could read or control your thoughts?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f	3	5	5	5
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

Each subscale is separately validated and scored, by recency (time-frame).

Score for each subscale = tally number of times client endorsed that subscale + tallied score in earlier time-frames in same subscale.

Do not add numeric values of the scores.

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EDScr 2.	**When was the last time** that you did the following things **two or more times**?					
	a. Lied or conned to get things you wanted or to avoid having to do something...	...4	3	2	1	0
	b. Had a hard time paying attention at school, work, or home.	...4	3	2	1	0
	c. Had a hard time listening to instructions at school, work, or home.	...4	3	2	1	0
	d. Had a hard time waiting for your turn.	...4	3	2	1	0
	e. Were a bully or threatened other people.....	...4	3	2	1	0
	f. Started physical fights with other people	...4	3	2	1	0
	g. Tried to win back your gambling losses by going back another day.	...4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f				
EDScr	2a – 2g	2	2	3	3
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

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SDScr 3.	**When was the last time** that…					
	a. you used alcohol or other drugs weekly or more often?	4	3	2	1	0
	b. you spent a lot of time either getting alcohol or other drugs, using alcohol or other drugs, or recovering from the effects of alcohol or other drugs (e.g., feeling sick)?	4	3	2	1	0
	c. you kept using alcohol or other drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	4	3	2	1	0
	d. your use of alcohol or other drugs caused you to give up or reduce your involvement in activities at work, school, home, or social events?	4	3	2	1	0
	e. you had withdrawal problems from alcohol or other drugs like shaky hands, throwing up, having trouble sitting still or sleeping, or you used any alcohol or other drugs to stop being sick or avoid withdrawal problems?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f				
EDScr	2a – 2g				
SDScr	3a – 3e	2	3	3	4
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

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CVScr 4.	**When was the last time** that you…					
	a. had a disagreement in which you pushed, grabbed, or shoved someone?	4	3	2	1	0
	b. took something from a store without paying for it?	4	3	2	1	0
	c. sold, distributed, or helped to make illegal drugs?	4	3	2	1	0
	d. drove a vehicle while under the influence of alcohol or illegal drugs?	4	3	2	1	0
	e. purposely damaged or destroyed property that did not belong to you?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f				
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e	0	0	0	0
TDScr	1a – 4e				
Supplemental questions	AQ5a-f				

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Scoring					
Screener	Items	Past month (4)	Past 90 days (4, 3)	Past year (4, 3, 2)	Ever (4, 3, 2, 1)
IDScr	1a – 1f	3	5	5	5
EDScr	2a – 2g	2	2	3	3
SDScr	3a – 3e	2	3	3	4
CVScr	4a – 4e	0	0	0	0
TDScr	1a – 4e	7	10	11	12
Supplemental questions	AQ5a-f				

- Adding the four domain (subscreener) scores yields the **TOTAL Score**.
- Record the score for each subscreener and the Total Disorder Screener in the Staff Use Box.

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AQ5. **When was the last time** you had **significant** problems with… **(not related to alcohol/drug use)**

a.	missing meals or throwing up much of what you did eat to control your weight?	4	3	2	1	0
b.	eating binges or times when you ate a very large amount of food within a short period of time and then felt guilty?	4	3	2	1	0
c.	being disturbed by memories or dreams of distressing things from the past that you did, saw, or had happen to you?	4	3	2	1	0
d.	thinking or feeling that people are watching you, following you, or out to get you?	4	3	2	1	0
e.	videogame playing or internet use that caused you to give up, reduce, or have problems with important activities or people of work, school, home or social events?	4	3	2	1	0
f.	gambling that caused you to give up, reduce, or have problems with important activities or people at work, school, home, or social events?	4	3	2	1	0

Scoring					
Screener	**Items**	**Past month (4)**	**Past 90 days (4, 3)**	**Past year (4, 3, 2)**	**Ever (4, 3, 2, 1)**
IDScr	1a – 1f				
EDScr	2a – 2g				
SDScr	3a – 3e				
CVScr	4a – 4e				
TDScr	1a – 4e				
Supplemental questions	AQ5a-f	1	1	1	1

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Scoring					
Screener	Items	Past month (4)	Past 90 days (4, 3)	Past year (4, 3, 2)	Ever (4, 3, 2, 1)
IDScr	1a – 1f	3	5	5	5
EDScr	2a – 2g	2	2	3	3
SDScr	3a – 3e	2	3	3	4
CVScr	4a – 4e	0	0	0	0
TDScr	1a – 4e	7	10	11	12
Supplemental questions	AQ5a-f	1	1	1	1

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Interpretation…

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Interpreting the GAIN-SS Scores

PAST YEAR Score per subscale	Interpretation
Low (0)	Unlikely to have a diagnosis and/or need service
Moderate (1 to 2)	Possible diagnosis; client likely to benefit from brief assessment and intervention
High (3-5 on subscales OR 3+ on total screener)	High probability of diagnosis; client likely needs more formal assessment and intervention

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Interpretation at the Individual Level

- **Moderate/high on Internalizing (IDScr):** suggests a need for mental health treatment related to somatic complaints, depression, anxiety, trauma, suicide, etc.

- **Moderate/high on Externalizing (EDScr):** suggests a need for mental health treatment related to attention deficits, hyperactivity, impulsivity, conduct problems, etc.

- **Moderate/high on Substance Use (SDScr):** suggests a need for substance use/dependence treatment

- **Moderate/high on Crime/Violence (CVScr):** suggests a need for help with interpersonal violence, drug-related crimes, property crimes, etc.

- **High Score** on **Total Disorder (TDScr):** will most likely have a diagnosis when for concurrent disorders

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Interpretation as a Measure of Change

- **Past month** symptom count in the TDScr or any of the four sub screeners can be used as a simple measure of change after intervals of a month or more
  - **Early Remission:** 3+ lifetime problems, no past month
  - **Sustained Remission:** 3+ lifetime problems, no past year
- Has been validated for recovery monitoring

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Interpretation for Quality Assurance and Program Planning

- Can be used as a simple form of needs assessment to guide program development
- Can compare staff or sites on the extent to which expected diagnosis/referral turn into actual cases
- Gives an objective guidepost to compare performance and track it over time

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What would your next steps be for our client?

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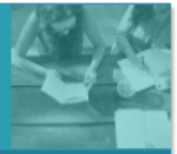
Staged Screening and Assessment (SS&A)

GAIN-SS Scoring and Interpretation



The GAIN-SS is scored by counting the number of participant responses for each time frame, not by summing the response values.

To screen for possible diagnoses, it is recommended that the domain and total scores from the completed GAIN-SS be triaged into three groups based on the number of reported **past-year** symptoms:

Low (0): Unlikely to have a diagnosis or need services.

Moderate (1 to 2): A possible diagnosis; the client is likely to benefit from a brief assessment and outpatient intervention.

High (3+ on the total screener; 3 to 5 on the subscales): High probabilities of a diagnosis; the client is likely to need more formal assessment and intervention.

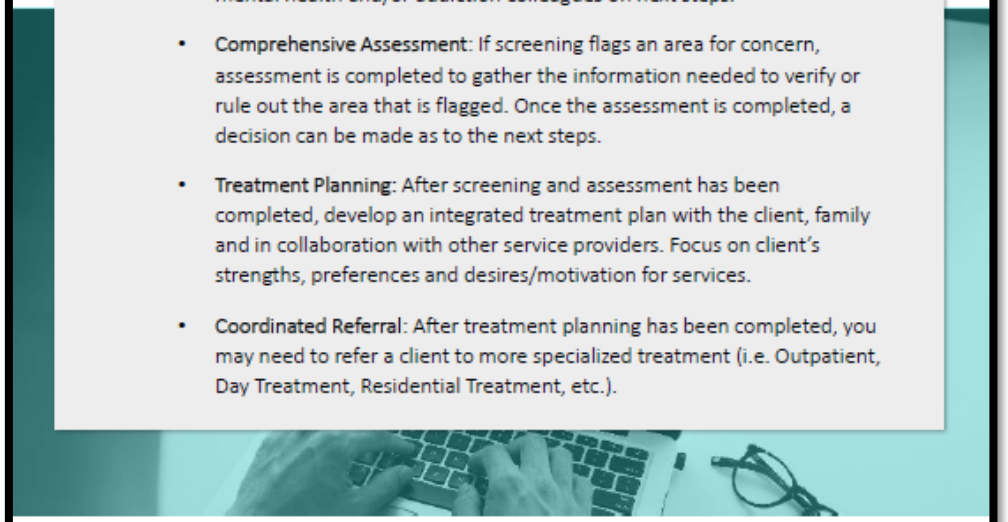
Interpretation by individual subscale

Moderate (1 or 2) to high (3+) scores on the **Internalizing Disorder Screener** [IDScr]:	Suggest the need for mental health treatment related to somatic complaints, depression, anxiety, trauma, suicide, and, at extreme levels, more serious mental illness (e.g., bipolar, schizoaffective, schizophrenia). If score is 3+, recommendation is to administer the Stage 2 Screening tools (MMS/POSIT).
Moderate (1 or 2) to high (3+) scores on the **Externalizing Disorder Screener** [EDScr]:	Suggest the need for mental health treatment related to attention deficits, hyperactivity, impulsivity, conduct problems, and, in rarer cases, for gambling or other impulse control disorders.
Moderate (1 or 2) to high (3+) scores on the **Substance Disorder Screener** [SDScr]:	Suggest the need for substance use disorder treatment and, in more extreme cases, the need for detoxification or maintenance services. If score is 3+, recommendation is to administer the Stage 1 Assessment (GAIN Q3 MI ONT).
Moderate (1 or 2) to high (3+) scores on the **Crime and Violence Screener** [CVScr]:	Suggest the need for help with interpersonal violence, drug-related crimes, property crimes, and, in more extreme cases, interpersonal/violent crime.
CAMH Supplemental/Modified Subscale [AQ5]:	Provide additional information on the need for help with eating disorders, psychotic symptoms, problem gambling, and trauma experiences.

1

What to do after scoring the GAIN-SS

- Review the scores with your client. Explain what the scores mean, answer any questions and inform the client of next steps.
- Decide on the next steps in the Staged Screening and Assessment process (i.e. Stage 2 Screener, Stage 1 Assessment).
- Decide on next steps in treatment process:
  - **Brief Intervention**: If screening shows no evidence of a disorder/concern, answering any questions and providing requested information may be all that is needed. Brief intervention can also include solution-focused intervention, crisis intervention, and relapse prevention.
  - **Consult and Collaborate with Colleague**: Consult and collaborate with mental health and/or addiction colleagues on next steps.
  - **Comprehensive Assessment**: If screening flags an area for concern, assessment is completed to gather the information needed to verify or rule out the area that is flagged. Once the assessment is completed, a decision can be made as to the next steps.
  - **Treatment Planning**: After screening and assessment has been completed, develop an integrated treatment plan with the client, family and in collaboration with other service providers. Focus on client's strengths, preferences and desires/motivation for services.
  - **Coordinated Referral**: After treatment planning has been completed, you may need to refer a client to more specialized treatment (i.e. Outpatient, Day Treatment, Residential Treatment, etc.).



For more information, contact your PSSP Implementation Specialist

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February 2020

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Summary

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Benefits of using GAIN-SS

- Similar language around multiple sectors
- Improved client outcomes
- Improved follow up and early intervention
- Better match to treatment
- Better use of resources
- Consistent data collection, which can be used at agency and system level
- Consistent with the *Ontario Roadmap to Wellness*

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For more information on using the GAIN-SS in Ontario:

http://improvingsystems.ca/projects/provincial-screening-and-assessment

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