SOC V National Outcome Measure (NOMs) Tip Sheet

The NOM tool should be administered in an interview format with the client at the start of services, every 6-months, and at discharge. It is voluntary. The client can refuse to answer any question or any section. The data will be reported collectively and not on an individual level.

Link the internal online form of the NOM: https://uky.az1.qualtrics.com/jfe/form/SV_eOJIwChjgEpaB2I

Link to the paper copy: https://spars.samhsa.gov/sites/default/files/CMHSNOMSChildTool.pdf

Unique ID

Every client needs to be assigned a unique ID which can be linked to their contact information. Following are the sections that need to be completed.

Administrative

This section contains information about the form being completed such as the client's ID, the type of assessment, whether an interview was conducted, whether the respondent is the child or caregiver, and behavioral health diagnoses.

A. Demographic Data

This section contains questions about the child such as their gender, racial background, and age.

B. Functioning

This section contains questions about the child's physical and mental health. If the respondent is the child, additional questions are included about the child's feelings and their use of alcohol, cigarettes, and other drugs.

B. Military Family and Deployment

This section contains questions about the child and their family's involvement with the military.

C. Stability in Housing

This section contains questions about the child's housing situation and where they have been staying.

D. Education

This section contains questions about the child's current level of education and any absenteeism from school.

E. Crime and Criminal Justice Status

This section contains only one question about how many times the child may have been arrested in the past 30 days.

F. Perception of Care

This section contains questions about the respondent's perception of the care they received by the program.

G. Social Connectedness

This section contains questions about the respondent's social connections and if they have a network of support.

H. Program-Specific Questions

This section contains questions asking if the child has broached the subject of or attempted suicide, as well as what funding sources were or will be used to pay for the child's services. If you are using the paper survey, only section H1 should be completed. Sections H2, H3, and H4 should be skipped.

I. Reassessment Status

This section contains questions asking about the child's access to services recently.

J. Clinical Discharge Status

This section contains questions about when the child was discharged from services and for what reason.

K. Services Received

This section contains questions asking which services were provided to the child since their previous interview.

When to Fill Out Each Section

Certain sections of the NOMs are filled out for certain types of interviews (if you are using the online tool, you will automatically be taken to the correct sections based on your responses). The following chart shows when to complete each section. The blue boxes are sections of the survey, the gray boxes represent what type of survey is being filled out (a baseline, reassessment, or discharge), and the orange boxes represent whether or not an interview was completed.

