

KTOS Client Information System

A Collaboration between the Department for Behavioral Health,
Developmental and Intellectual Disabilities and the University of Kentucky
Center on Drug and Alcohol Research

Revised October 2014



What is the Kentucky Treatment Outcome Study?

KTOS is a research study designed to measure changes for several key risk factors for adults who participate in Kentucky's substance abuse treatment services using an evidence based assessment.

AKTOS is a similar research study designed to measure changes for adolescents who participate in Kentucky's substance abuse treatment services using an evidence based assessment.

These studies help to answer key questions posed by legislators, funding agencies, families, and clients on the status of clients 12 months after intake in regards to:

- ✓ Substance use
- ✓ Employment
- ✓ Mental health problems
- ✓ Victimization and trauma
- ✓ Criminal justice involvement
- ✓ Quality of life
- ✓ School attendance and performance
- ✓ Recovery supports

Why are you asked to do this?

- There are increasing demands from federal and state governments for **evidence that programs actually achieve desired outcomes.**
- Limited and inaccurate information circulates in the media about substance abuse treatment.
- **This data collection program will help counteract myths and misinformation. It will provide accurate ways to report Kentucky-specific findings to providers, the public, and to policymakers.**

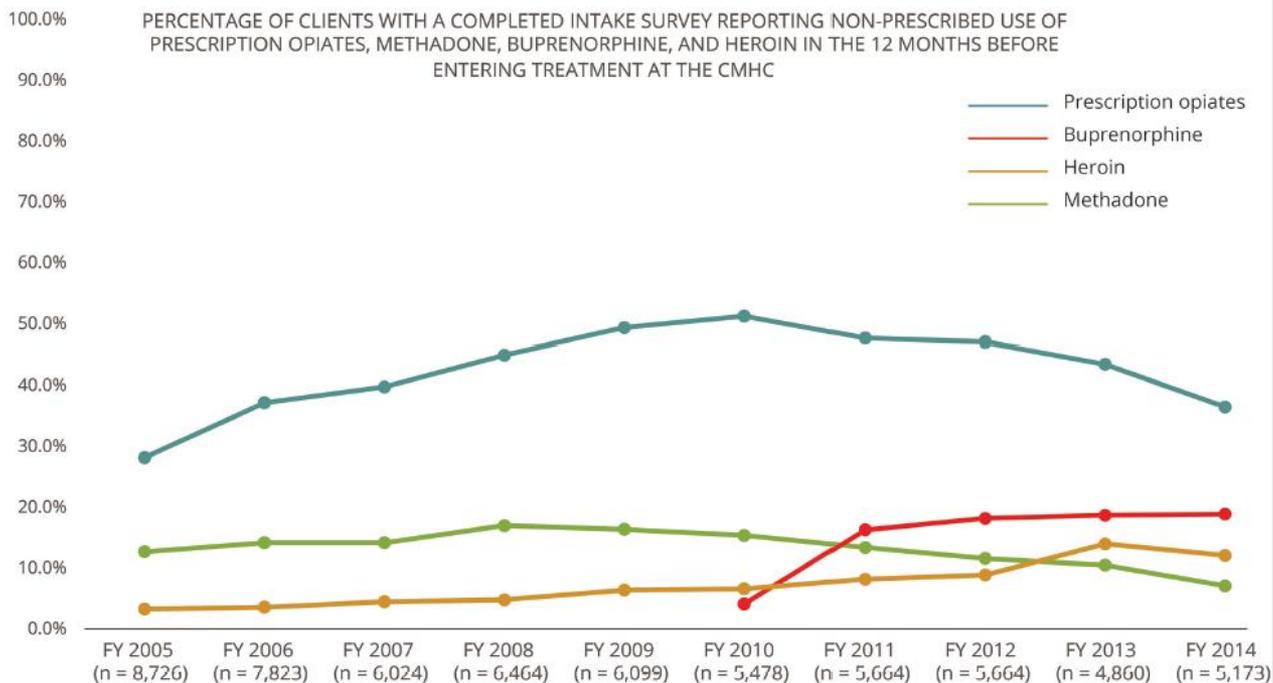
Why do this every year?

- KTOS and AKTOS provide up-to-date regional and state data on substance abuse trends and treatment outcomes.
- Key trends in substance use and policy needs fluctuate annually depending on economic and sociopolitical issues.



Trends in Heroin and Prescription Opiate Use

In 2012, the state legislature passed House Bill 1 which requires physicians to use the KASPER prescription drug monitoring system in order to track how often and how much controlled substances are being prescribed. As a result of this recent drug control policy change, prescription opiates are more difficult to obtain. However, while heroin use has remained relatively low over the past several years, it is widely presumed that heroin is making a resurgence in many areas of the state because of its ease to access.



An average of **43%** of clients reported prescription opiate misuse

An average of **15%** of clients reported non-prescription buprenorphine use

An average of **7%** of clients reported heroin use

An average of **13%** of clients reported non-prescription methadone use

Note: Clients who reported being in a controlled environment all 12 months before entering treatment are not included in this analysis; Buprenorphine was added to the assessment in FY 10; therefore, only 1,633 were asked about buprenorphine use..

Suggested citation: Cole, J., Logan, TK, Miller, J., & Scrivner, A. (2016). *Adult Kentucky Treatment Outcome Study Trends in Heroin and Prescription Opiate Use*. Lexington, KY: University of Kentucky, Center on Drug and Alcohol Research.



Non-medical use of prescription drugs is a continuing health concern for the United States and especially for areas like Kentucky. In fact, **Kentucky is tied for second in the U.S. for the highest rate of deaths from drug overdose** (24.6 per 100,000^{a,b}), the majority stemming opioids.

Of the 765 drug-related death cases autopsied by the Kentucky Medical Examiner's Office in 2014^c:

Morphine was detected in **41%**

Heroin was detected in **29%**

Hydrocodone was detected in **21%**

^a Rates include drug overdose deaths, for 2011-2013, a three-year average.

^b Trust for America's Health. (June 2015). *The Facts Hurt: A State-by-State Injury Prevention Policy Report*. Retrieved August 22, 2016 from <http://healthyamericans.org/reports/injuryprevention15/>

^c Kentucky Office of Drug Control Policy. (2014). *2014 Overdose Fatality Report*. Justice and Public Safety Cabinet. Retrieved August 22, 2016 from <http://odcp.ky.gov/Pages/Overdose-Fatality-Report.aspx>

Reports and Data Analysis

- Annual reports are provided for the KTOS study with the sample of clients who complete a follow-up interview.
 - AKTOS reports are provided every two years.
- All annual reports, fact sheets, and at-a-glance findings can be downloaded from: <http://cdar.uky.edu/bhos>.
- Also available from the website are informational materials including:
 - Client Follow-Up Flyer (explaining study to clients)
 - Client consent form
 - Evidence based summary and report
 - PDF-version of intake interview
 - Website training information

Instrument Development

- KTOS and AKTOS are both robust, pragmatic, reliable, and valid **evidence-based assessments**.
- The instrument is made up of **five core components** each with strong reliability and validity research support and **three supplemental components**, most of which have strong reliability and validity research support
 - AKTOS is made up of five core components and two supplemental components
- KTOS and AKTOS focus on **dynamic or changeable factors** that are **sensitive to individual-level change** over time allowing recovery outcomes to be measured
- KTOS and AKTOS are appropriate for the **context of Kentucky** and include measures that consider the unique features of Kentucky and of an adult or adolescent substance abuse treatment population

Although Kentucky is represented in a few national datasets, those national studies **do not provide the state, county- and regional-level data** and those national surveys **do not consider or account for Kentucky's unique cultural context.**

Figure 1.

Kentucky in Context

The KTOS assessment was originally developed to consider the unique features of Kentucky and has been revised frequently after data analysis and feedback from users and other stakeholders to consider the unique context of Kentucky.

Kentucky ranks among the highest in the nation for drug overdose deaths and smoking:



Kentucky ranks as one of the unhealthiest states in the nation:



Kentucky also ranks as one of the highest in the nation for the number of disability recipients as well as the number of children in poverty:



Although Kentucky is represented in a few national datasets, those national studies **do not** provide the state, county- and regional-level data and those national surveys **do not** consider or account for Kentucky's unique cultural context.

Figure 1.

Kentucky in Context

The AKTOS assessment was originally developed to consider the unique features of Kentucky and has been revised frequently after data analysis and feedback from users and other stakeholders to consider the unique context of Kentucky.

Kentucky ranks among the highest in the nation for drug overdose deaths and smoking:



Source: United Health Foundation, 2015; CDC, 2016

7th highest
in the nation for

DRUG OVERDOSE DEATHS AMONG 12- TO 25-YEAR OLDS



3rd highest
in the nation for

SMOKING RATES AMONG HIGH SCHOOL STUDENTS

Kentucky ranks as one of the unhealthiest states in the nation:



Source: Gallup Poll, 2014, 2015; United Health Foundation, 2015

50th
in the nation for
PREVENTABLE HOSPITALIZATIONS

45th
in the nation for
DIABETES

50th
in the nation for
CANCER DEATHS

44th
in the nation for
OBESITY

47th
in the nation for
PREMATURE DEATHS

43rd
in the nation for
CARDIOVASCULAR DEATHS

Kentucky also ranks as one of the highest in the nation for the number of disability recipients as well as the number of children in poverty:



Source: Gallup Polls, 2014; Hess et al., 2015; Social Security Administration, 2011; United Health Foundation, 2015

4th highest
in the nation for
DISABILITY AMONG 15-20 YEAR OLDS

2nd highest
in the nation for
CHILDREN IN POVERTY

Kentucky ranks as one of the states with the lowest financial well-being (which considers having enough money for food, health care, and people's perceived standard of living) and economic opportunity.

46th
in the nation for
FINANCIAL WELL-BEING

48th
in the nation for
ECONOMIC OPPORTUNITY

Intake Interview Data: Key Elements

- **KTOS** takes about 30 mins and focuses on five core domains:
 - Substance use
 - Mental health
 - Victimization and Trauma
 - Criminal Justice Involvement
 - Quality of Life
- And three supplemental domains:
 - Health and Stress-Related Health Consequences
 - Economic and Living Circumstances
 - Recovery Supports
- **AKTOS** takes about 30 mins and focuses on five core domains:
 - Substance use
 - Mental health
 - School Attendance and Performance
 - Justice System Involvement
 - Adverse Childhood Experiences
- And two supplemental domains:
 - Parental Involvement
 - Recovery Supports

Intake Interview Data: Overview

Intake data are **collected once** on each client at the beginning of a NEW treatment episode

Per the Division, intakes should be completed:

- ❖ within the first **3 days of admission** for inpatient/residential services
- ❖ within the first **3 treatment sessions that are used for assessment and treatment planning** for outpatient/IOP services
- There is **NO compensation** and **NO research consent forms** for *intake interviews* since the interview is considered part of intake into treatment.
- Intake data is considered treatment program data.

Intake Interview Data: Overview

Intake interview data is entered into the Client Information System (CIS) website.

- The CIS is an online secure system that sends the intake information to UK CDAR electronically.
- All responses to the intake interview are separated in the database from client identifiers and are secured and encrypted.

For the research study, the intake interview data is combined with the follow-up data for those clients who complete a follow-up interview in order to generate the outcomes presented in the reports.

Follow-up Interviews

- At the end of the intake interview, clients are asked to volunteer for the follow-up part of the study which consists of a 15-20 minute telephone interview about 12 months later.
 - This is the “research” part of the study. Client participation is completely **voluntary**. There is **compensation** and a **consent form** for the follow-up interview.
 - Clients give their consent to participate using an electronic consent form on the web survey, which is approved by the UK Medical Institutional Review Board (IRB).
 - Questions on the follow-up survey are very similar to the questions on the intake interview.

Follow-up Interviews

- UK CDAR contacts clients for the “UK Health Follow-up Study” to see how they are doing after treatment.
 - No information is revealed about the client as UK tries to reach individuals for the interview. We do not tell anyone that the client was in treatment. It is just referred to as the **UK Health Follow-up Study**.
 - Those clients who **volunteer and complete the follow-up interview** are paid \$20 by check from UK.
- One way to provide information about the follow-up interview to clients is to distribute participant flyers.

Follow-up Interview

- Follow-up interviews are conducted by staff at UK CDAR, who inform clients that they operate independently from the treatment program
 - Lack of affiliation with the interviewers ensures more accurate reporting
- Staff are highly trained and monitored on an ongoing basis by Dr. Logan
- Follow-up study is voluntary but has a high follow-up rate
 - Every client's treatment experience is unique and important to be included in the study, and the interviewers invest substantial time and effort to reach every client who agrees to participate and who was selected for the study
 - Upon making contact with the client, the interviewers will re-consent the client, making sure that they still want to participate in the study

Follow-up Interview Protections

- Confidentiality protections
 - The study is approved by the UK Human Subjects Review Board and the Cabinet for Health and Family Services Human Subjects Review Board
 - All responses to the follow-up interview are separated in the database from client identifiers and are secured and encrypted.
 - A **Federal Certificate of Confidentiality** ensures identifying information about clients can never be revealed, even under a subpoena. The data are completely anonymous and secure.

Follow-up Consent – Contact Information

- If the client wants to participate in the follow-up it is important to:
 - Accurately record maiden names/nicknames for client as well as an address where they receive mail, a home or cell phone number they can be reached on, and an email address.
 - Accurately record names, addresses, home and cell phone numbers, email addresses, and relationship to client for at least one and preferably two contacts.
 - A female relative usually knows where the client is
 - *Be sure to let clients know that contacts are only made with these individuals as a way to locate the client, not to discuss any aspect of the survey or treatment.*
- As of 2019, new security questions have been added to allow interviewers to confirm the client's identity multiple ways at follow-up.

KTOS Client Information System (CIS)

KTOS Client Information System Overview

Purpose

- The next group of slides provides an overview of the KTOS Client Information System and the Client Self-Report Substance Abuse Assessment with ASAM Recommended Levels of Care

This PowerPoint will show you:

- how to acquire an ID and password for the Client Information System
- how to enter a KTOS Intake Interview for a client
- how to use features in the KTOS Client Information System
- how to download Client Self-Report Substance Abuse Assessments

Logging In

- The KTOS Client Information System requires users to have a **unique case-sensitive ID and password**
- To obtain an ID and password, you must contact your Regional Manager, Supervisor or Program Director who is responsible for assignments.
- Once you have your ID and password, you may log on to the system using your assigned ID and password at <https://ukcdar.uky.edu/KTOSBaseline/>



[Home](#) / [Login](#)

Login

Please fill out the following fields to login:

Username

Username cannot be blank.

Password

Remember Me



If you forgot your password you can [reset it](#).

Login

Client Self-Report Substance Use Assessment Terms of Use

By logging on and accessing the Client Self-Report Substance Use Assessment, you agree to the following conditions:

1. You are an authorized user with permission to access and view client files and are bound by your agency's rules regarding protection of personal client information.
2. Though every effort has been made to provide accurate information and suggest appropriate ASAM recommendations, *the user is responsible* for verifying accuracy and appropriateness of the information in the assessment.
3. You understand that assessments produce an editable word document that can be saved locally on an agency computer, though any edits made locally to the saved document are not saved in the database at CDAR.
4. Information in the assessment was entered by the clinical or staff person interviewing the client at treatment intake. UK CDAR disclaims liability of any kind for quality or fitness for a particular purpose arising out of the use, or inability to use the data.

Terms of Use

By logging into the Client Information System, you agree to the **Terms of Use** for the system. These terms describe who is allowed to use the system and highlight that the ASAM recommendation is based on user entered information.



Login

Please fill out the following fields to login:

Username

Username cannot be blank.

Password

Remember Me

If you forgot your password you can reset it.

Login

Client Self-Report Substance Use Assessment Terms of Use

By logging on and accessing the Client Self-Report Substance Use Assessment, you agree to the following conditions:

1. You are an authorized user with permission to access and view client files and are bound by your agency's rules regarding protection of personal client information.
2. Though every effort has been made to provide accurate information and suggest appropriate ASAM recommendations, *the user is responsible* for verifying accuracy and appropriateness of the information in the assessment.
3. You understand that assessments produce an editable word document that can be saved locally on an agency computer, though any edits made locally to the saved document are not saved in the database at CDAR.
4. Information in the assessment was entered by the clinical or staff person interviewing the client at treatment intake. UK CDAR disclaims liability of any kind for quality or fitness for a particular purpose arising out of the use, or inability to use the data.

Home Screen

After logging in, the Home Screen appears. The Home Screen provides links to useful areas of the website and also provides **notifications and system alerts** on the right-hand side of the page.



Clients

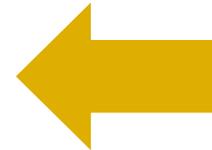
- [Completed Intakes](#)
- [Incomplete Intakes](#)
- [Enter a New Intake](#)

Project Resources

- [PDF Intake Interview](#)
- [Printable Consent Form](#)
- [KTOS Project Web Site](#)

Notifications & Alerts

No notifications at this time.



Home Screen – New Intake Interview

From the Home Screen, you may enter a new intake interview by clicking on the link **Enter a new Intake** under “Clients” in the list on the left side of the page.



Clients

- Completed Intakes
- Incomplete Intakes
- Enter a New Intake



Project Resources

- PDF Intake Interview
- Printable Consent Form
- KTOS Project Web Site

KTOS Intake Interview

Here you will enter the client information into the KTOS Intake Interview just like you did before.



[Resume later](#) [Exit and clear survey](#)

Create New Client

Counselor, please answer the following questions before beginning the interview with the client. If your client is 17 or younger, please exit and open the Adolescent KTOS program instead.

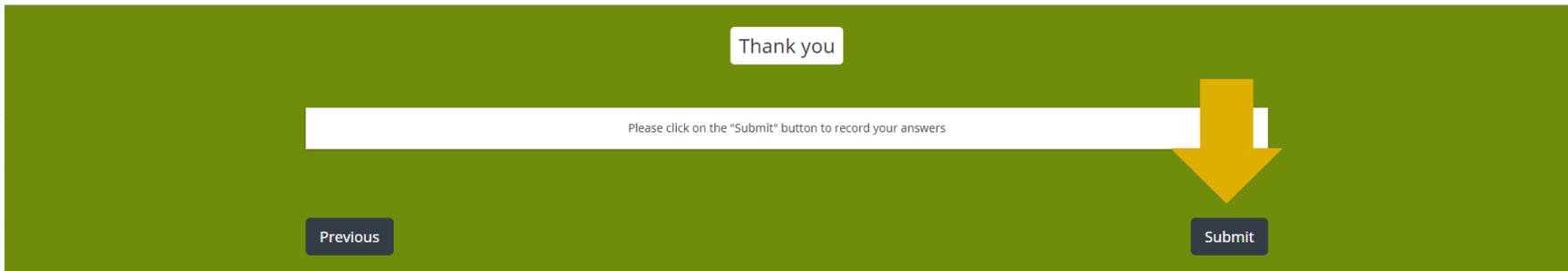
All client information is confidential (with identifiers stored separately from intake responses), is encrypted (or scrambled) such that only those with a specific key can read them, and can only be accessed by authorized staff. This information is used for matching service event data.

Client's name:

	First Name	Last Name
	<input type="text"/>	<input type="text"/>

KTOS Intake Interview

At the conclusion of the interview be sure to click the **Submit** button to record all of the interview responses.



KTOS Intake Interview

Once you complete a KTOS Intake Interview, you can click on the **Home** link that appears on the final submission screen to return you to the Home Screen. You may also immediately **request the narrative report** for the client or **enter another intake interview** from this screen.

Intake Submitted

The client intake has been submitted. [Request the client narrative report](#) for this intake.

You may also [submit a intake for a new client](#).



Home Screen

From the Home Screen you can also access the Client List. The client list is also called **Completed Intakes** and will show you a list of those clients for whom you have completed an intake interview.



- ## Clients
- 
- [Completed Intakes](#)
 - [Incomplete Intakes](#)
 - [Enter a New Intake](#)

Project Resources

- [PDF Intake Interview](#)
- [Printable Consent Form](#)
- [KTOS Project Web Site](#)

Home Screen - Client List

From the Client List (or Completed Intakes) screen, you can see each client that has completed an intake interview.



[Home](#) / [Complete Intakes](#)

Complete Intakes

In any of the filter fields below, type in a whole or partial value and hit ENTER to search.
Erasing the text in the field and hitting ENTER will reset the search.
Type in multiple fields and hit ENTER for an advanced search.

[Incomplete Intakes](#)

Showing 1-20 of 32 items.

Record Time	First Name	Last Name	SSN	Organization	Reports
	<input type="text"/>	<input type="text"/>	<input type="text"/>	Practice Region ▾	
2019-07-11 11:18:01	Ashley			Practice Region	Narrative Report
2018-05-18 14:04:32	Update	Test	000337777	Practice Region	Narrative Report
2018-04-30 12:59:24	Compairson	Test	333557777	Practice Region	Narrative Report

Home Screen – Incomplete Intakes

A feature of the KTOS Client Information System is the **Incomplete Intakes** screen. This list will show you those interviews that you chose to “Resume Later.”



Clients



- Completed Intakes
- **Incomplete Intakes**
- Enter a New Intake

Project Resources

- PDF Intake Interview
- Printable Consent Form
- KTOS Project Web Site

Resuming an Interview Later

At the top-right of each interview question page, you will see a button called **Resume later**. Clicking this button will save all of the interview responses up to that point and place the client on the “Incomplete Intakes” screen.

You may return to an incomplete intake and complete it within 14 days of when you chose to resume later. After 14 days, the interview will not appear on the Incomplete Intakes screen anymore, and you will need to begin the interview from the beginning with the client.



Resume later Exit and clear survey

Create New Client

Counselor, please answer the following questions before beginning the interview with the client. If your client is 17 or younger, please exit and open the Adolescent KTOS program instead.

All client information is confidential (with identifiers stored separately from intake responses), is encrypted (or scrambled) such that only those with a specific key can read them, and can only be accessed by authorized staff. This information is used for matching service event data.

Client's name:

	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Resuming an Interview Later

After clicking the “Resume later” button, you will see the “Intake Saved” screen, which will indicate that the interview was saved on the “Incomplete Intakes” screen. Again, the interview will only be saved for 14 days from the day you chose to resume later.



Intake Saved

The client intake has been saved for future completion. If not completed in 14 days, this survey will be removed from the system. To resume this survey, view [Incomplete Intakes](#) in the Client List.

You may also [submit a intake for a new client](#).

Resuming an Interview Later

To resume the interview within 14 days, go to the Incomplete Intakes screen, locate the client, and then click **Resume** in the far-right column of the client list.

The interview will begin from the page where you left off.

Once the interview is completed, the client will now be listed on the “Completed Intakes” screen.



Incomplete Intakes

In any of the filter fields below, type in a whole or partial value and hit ENTER to search.
Erasing the text in the field and hitting ENTER will reset the search.
Type in multiple fields and hit ENTER for an advanced search.

[Complete Intakes](#)

Showing 1-20 of 54 items.

Record Time	First Name	Last Name	SSN	Organization	Resume Intake
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
2019-07-18 13:39:11	Updates	Test	000557777	Practice Region	Resume



Home Screen - Client List

Also from the Client List screen, you can access the **narrative report** for each client that has completed an intake interview. Clicking this link will send a request to the system to generate that client's Self-Report Substance Abuse Assessment based on the client's KTOS interview responses.



[Home](#) / [Complete Intakes](#)

Complete Intakes

In any of the filter fields below, type in a whole or partial value and hit ENTER to search. Erasing the text in the field and hitting ENTER will reset the search. Type in multiple fields and hit ENTER for an advanced search.

[Incomplete Intakes](#)

Showing 1-20 of 32 items.

Record Time	First Name	Last Name	SSN	Organization	Reports
	<input type="text"/>	<input type="text"/>	<input type="text"/>	Practice Region <input type="button" value="v"/>	
2019-07-11 11:18:01	Ashley			Practice Region	<input type="button" value="Narrative Report"/>
2018-05-18 14:04:32	Update	Test	000337777	Practice Region	<input type="button" value="Narrative Report"/>
2018-04-30 12:59:24	Comparison	Test	333557777	Practice Region	<input type="button" value="Narrative Report"/>



Generating the Report

Once you select the report link, the Client Self-Report Substance Abuse Assessment will be requested from the system. For security purposes, each report is generated upon request, thus it can take up to 5 minutes to generate the report. On average it takes around 1 minute for the report to be generated.



Requesting KTOS Baseline Narrative Report for user Update Test



It will take up to 5 minutes for the report to be generated. This page will automatically update once the report is ready to download.

Saving the Client Self-Report Substance Abuse Assessment

After the report generation has completed, a link will appear titled **KTOS Baseline Narrative Report**. To save this file to your computer, right click on the link “Save link as...” or “Save target as...” and select a location on your computer to save the file.



Home Actions ▾ Logout (jaimetest)

Home / Report Request

Download KTOS Baseline Narrative Report for user

[KTOS Baseline Narrative Report](#)

Right-click on the link above and choose "Save Link As..."



Report Timing Out

For security and confidentiality reasons, the Client Self-Report Substance Abuse Assessment report is only available to download for 10 minutes. If you do not download and save it within 10 minutes of creating the report, you will need to go back through the process to **request and generate the report** again.



Report KTOS Baseline Narrative Report for user Expired

To protect sensitive client information, reports expire 10 minutes after the initial request.
Request a new KTOS Baseline Narrative Report for this client.



Locating a Client - Searching

Clients are listed in order by most recent intake interview date to oldest intake interview date.

To search for a specific client, you can enter first name, last name, or SSN into the **white boxes** below each of the column names. Type some or all of the information that you know into the box for the column that you're searching and then press the ENTER key or click out of the white box to run the search.



[Home](#) / Complete Intakes

Complete Intakes

In any of the filter fields below, type in a whole or partial value and hit ENTER to search.
Erasing the text in the field and hitting ENTER will reset the search.
Type in multiple fields and hit ENTER for an advanced search.

[Incomplete Intakes](#)

Showing 1-20 of 32 items.

Record Time	First Name	Last Name	SSN	Organization	Reports
	<input type="text"/>	<input type="text"/>	<input type="text"/>	Practice Region <input type="text"/>	
2019-07-11 11:18:01	Ashley			Practice Region	Narrative Report
2018-05-18 14:04:32	Update	Test	000337777	Practice Region	Narrative Report
2018-04-30 12:59:24	Compairson	Test	333557777	Practice Region	Narrative Report

Program Management Elements

Program Manager Options – Home Screen

- When you log in as Program Manager, the home screen displays the same way it does for clinicians.
- You can perform the same functions from the client lists as described in the training for clinicians.
- In addition, there are several administrative functions which can be accessed and performed from this screen.



Clients

- [Completed Intakes](#)
- [Incomplete Intakes](#)
- [Enter a New Intake](#)

Project Resources

- [PDF Intake Interview](#)
- [Printable Consent Form](#)
- [KTOS Project Web Site](#)

Notifications & Alerts

No notifications at this time.

User Management

- Clicking on the **Actions** tab at the top of the screen brings down a list of options.
- Clicking on **User Management** brings up a screen of authorized users for the site. The list includes all clinicians and administrators.
- From here, you can view, edit, and add authorized users for the system.



Clients

- Completed Baselines
- Incomplete Baselines
- Enter New Baseline Interview

Project Resources

- PDF Intake Interview
- Printable Consent Form
- Participant Flyer
- KTOS Project Web Site

Notifications & Alerts

No notifications at this time.

- Client List
- Enter New Baseline Interview
- Mid-Level Reports
- User Management
- Account Settings



User Management – Create New Users

- When you click on **Create User** from the User Management screen, you will see the screen below. You must fill out all fields completely and then click on **Create** to add the new user.
- User name should be First Initial and Last name with no spaces, and passwords should be at least 8 characters with some mixture of capital and lower case letters (they are case sensitive!). **We highly recommend using a random password generator for maximum security.** www.freepasswordgenerator.com is a reliable source.

The screenshot shows the 'Create User' form in the Center on Drug and Alcohol Research system. The form is titled 'Create User' and is located at the URL 'Home / Users / Create User'. The form includes the following fields:

- Username:** A text input field with a red border and a message below it stating 'Username cannot be blank'.
- Firstname:** A text input field.
- Lastname:** A text input field.
- Email:** A text input field.
- Password:** A text input field.
- Repeat Password:** A text input field.
- Organization:** A dropdown menu with '1: Four Rivers' selected.
- Role:** A dropdown menu with 'Select role...' selected.

At the bottom left of the form is a blue 'Create' button, which is highlighted by a red arrow. On the right side of the form, there is an 'Operations' menu with a 'Manage Users' link. Below the 'Operations' menu is a password generator tool with a 'Generate' button. The password generator tool includes the following instructions:

- Password must contain at least 8 characters
- Password may NOT exceed 40 characters
- Password may NOT include spaces
- Password must contain a letter, a number, and a special character (#, @, \$, %, ^, &, *)
- Password may NOT have more than two identical characters a row

To automatically generate a password that meets these rules, click the "Generate" button below. This will generate a new password for you that meets our requirements, and automatically copy it over into the "Password" and "Password Repeat" fields. The password will be displayed below. Please make a note of it.

User Management – Deleting Users

- To delete a current user (as in the case of a staff resignation), locate the desired clinician from the user list displayed under the **User Management** tab and click on the **Delete** icon (small trashcan icon shown below)
- The system will NOT ask if you are sure you want to delete the user so be sure you are deleting the correct user before clicking.

of 22 items.

Lastname	Username	Email	Organization	Role	Status	Action
<input type="text"/>	test	<input type="text"/>	<input type="text"/>		<input type="text"/>	
Test	stateadmintest	test@me.com	No Region	Authority	Active	   
User 2	testuser2	testuser2@uky.edu	1: Four Rivers	Clinician	Active	   
User 1	testbg1	testuser4@uky.edu	15: Bluegrass	Clinician	Active	   

Mid-Level Reporting

View Mid-Level Reports to see summary counts of all completed intakes and the number of clients who have agreed to be contacted for the follow-up. You can specify certain date ranges or select the last 30, 90 or 180 days using the **pre-set buttons**.

Home / Mid Level Reports

Mid Level Reports

Start Date

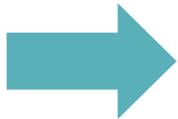
  2019-04-19

End Date

  2019-07-18

[Search Date Range](#) [Last 30 days](#) [Last 90 days](#) [Last 180 days](#) [Reset](#)

Organization Name	Completed Intakes	Agreed to Follow Up



Questions? Need more help?

Contact us and we'll be glad to help you!

KTOS Technical Questions

- Jeb Messer 859-257-1400 or jeb.messer@uky.edu

Programmatic or KTOS Questions

- TK Logan 859-257-8248 or tklogan@uky.edu

Need a unique log-on ID and/or password

- Contact your administrator, regional supervisor or Program Director

Web address for KTOS Client Information System
<https://ukcdar.uky.edu/KTOSBaseline>