

Arkansas

UNIFORM APPLICATION

FY 2020 Mental Health Block Grant Report

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 06/07/2017 - Expires 06/30/2020
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Center for Mental Health Services
Division of State and Community Systems Development

A. State Information

State Information

State DUNS Number

Number 119841336

Expiration Date

I. State Agency to be the Grantee for the Block Grant

Agency Name Arkansas Department of Human Services
Organizational Unit Division of Aging, Adult and Behavioral Health Services
Mailing Address Post Office Box 1437 Slot W-241
City Little Rock
Zip Code 72203-1437

II. Contact Person for the Grantee of the Block Grant

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Agency Name AR Department of Human Services, Division of Aging, Adult and Behavioral Health Services
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III. State Expenditure Period (Most recent State expenditure period that is closed out)

From 7/1/2018
To 6/30/2019

IV. Date Submitted

NOTE: This field will be automatically populated when the application is submitted.

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V. Contact Person Responsible for Report Submission

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0930-0168 Approved: 06/07/2017 Expires: 06/30/2020

Footnotes:

B. Implementation Report

MHBG Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1
Priority Area: Substance Abuse Treatment
Priority Type: SAT
Population(s): PWWDC, PP, PWID

Goal of the priority area:

Maintain and expand access to substance abuse services for the indigent and/or court involved population

Strategies to attain the goal:

- Contract with community based providers to provide services to the indigent populations. These contracts prioritize individuals who are intravenous drug users, women who are pregnant and/or parenting, military, and adolescents.
- Provide detoxification, outpatient services, partial day treatment, residential services, and Specialized Women Services.
- Substance abuse treatment providers will support faith-based organizations and community partners to develop a collaborative partnership

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of unduplicated individuals served
Baseline Measurement: 11476
First-year target/outcome measurement: A 1.5% increase from baseline.
Second-year target/outcome measurement: A 3% increase from baseline.
New Second-year target/outcome measurement(if needed):

Data Source:

Client specific treatment data reported from the state's substance use disorder treatment data system (Alcohol/Drug Management Information System: ADMIS).

New Data Source(if needed):

Description of Data:

The Baseline Measurement is the number of unduplicated individuals served from July 1, 2015 to June 30, 2016 (SFY 2016). The first-year target will include data from SFY 2017. The second-year target will include SFY 2018.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

The most current data available for establishing a baseline measurement is from SFY 2016. The first and second years data will be SFY 2017 and 2018, respectively.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 2

Indicator: Units of Services Provided

Baseline Measurement: Total Units for Residential Treatment = 1000,170 days; Total Units for Outpatient Treatment = 2901 hours; Total Detoxification Units = 3270 hours

First-year target/outcome measurement: First year target represents a 1.5% increase from baseline.

Second-year target/outcome measurement: Second year target represents a 3% increase from baseline.

New Second-year target/outcome measurement(if needed):

Data Source:

Client specific treatment data reported from the state's substance use disorder treatment data system (Alcohol/Drug Management Information System: ADMIS).

New Data Source(if needed):

Description of Data:

The Baseline Measurement is the number of unduplicated individuals served from July 1, 2015 to June 30, 2016 (SFY 2016). The first-year target will include data from SFY 2017. The second-year target will include SFY 2018.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The most current data available for establishing a baseline measurement is from SFY 2016. The first and second years data will be SFY 2017 and 2018, respectively.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

During Year 1, Arkansas saw a decrease in the number of residential treatment, outpatient treatment and detoxification days from our baseline measurements. Arkansas began utilizing discretionary grant funding that targeted opioid users, which allowed block grant funding to be used to cover other service gaps. Additionally, outpatient services have not been made available through the Arkansas Medicaid Program.

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Priority #: 2

Priority Area: Mental Health Treatment

Priority Type: MHS

Population(s): SMI, SED

Goal of the priority area:

Maintain or expand access to quality mental health services for the population of adults with serious mental illness and children with serious emotional disturbance.

Strategies to attain the goal:

Improve contracts with community based providers to provide mental health treatment to adults with serious mental illness and children with severe emotional disturbance.

Priority #: 3
Priority Area: Behavioral Health Medicaid transformation
Priority Type: SAT, MHS
Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Children/Youth at Risk for BH Disorder)

Goal of the priority area:

Promote and improve integrated care approaches, best practices, recovery-oriented services, and delivery and access to services for underserved communities within the Medicaid system.

Strategies to attain the goal:

Continue to meet with stakeholders to garner feedback and support.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Transition RSPMI Providers to BHA Certification in the OBHS system
Baseline Measurement: 56
First-year target/outcome measurement: 53
Second-year target/outcome measurement: 56

New Second-year target/outcome measurement(if needed):

Data Source:

Medicaid data warehouse; Provider database

New Data Source(if needed):

Description of Data:

The Medicaid data warehouse houses all information on Medicaid providers, clients and claims. The provider database houses demographic information on just the providers.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The first-year target outcome represents the existing Rehabilitative Services for Persons with Mental Illness (RSPMI) providers who will have from July 1, 2017 to June 30, 2018 to transition to the new Behavioral Health Agency (BHA) certification. The initial count, baseline measurement, of RSPMI providers is 56. The first year target of 53 represent 95% of providers who should transition during the first year. The second year target of 56 represents 100% of RSPMI providers making the transition.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 2

Indicator: Transition of LMHP providers to ILP providers

Baseline Measurement: 41

First-year target/outcome measurement: 43

Second-year target/outcome measurement: 45

New Second-year target/outcome measurement (if needed):

Data Source:

Medicaid data warehouse; provider database

New Data Source (if needed):

Description of Data:

The Medicaid data warehouse houses all information on Medicaid providers, clients and claims. The provider database houses demographic information on just the providers.

New Description of Data (if needed)

Data issues/caveats that affect outcome measures:

Currently certified Licensed Mental Health Practitioners (LMHPs) will need to apply and be approved as an Independently Licensed Practitioner (ILP) in the new Outpatient Behavioral Health Services (OBHS) system at any point between July 1, 2017 and June 30, 2018. The LMHP program will sundown on June 30, 2018.

The first year target represents 95% of currently certified LMHP providers (41) who will complete the application process with an increase of 5% (2) of new ILP applications being approved for a total of 43.

The second year target, 45 represents an 10% increase of new ILP providers who apply and are approved during the second year, July 1, 2018-June 1, 2019.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

At the end of SFY 2017 there was a total of 41 certified LMHPs. During SFY 2018, 55 individuals were certified as ILPs. Of these 55, 17 had converted from the former LMHP program to the new ILP program. Thus far in SFY 2019, 108 individuals have been certified as an ILP, bringing the total to 163 individuals. Our first year goal of converting 43 individuals to the ILP program was not met. We cannot say for sure why these individuals chose not to convert to the new program.

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

At the end of SFY 2017 there was a total of 41 certified LMHPs. During SFY 2019, 24 individuals had converted from the LMHP program to the ILP program. However as of this report, 287 individuals are currently certified in the ILP program.

How second year target was achieved (optional):

Priority #: 4
Priority Area: Children's System of Care
Priority Type: MHS
Population(s): SED

Goal of the priority area:

Build a family and youth involvement and leadership structure that will facilitate the family and youth voice and choice at every level of service planning, development, delivery, and evaluation

Strategies to attain the goal:

- * Partner with NAMI AR to develop youth and family capacity and hire Liaisons
- * Partner with UALR/MidSOUTH Center for Prevention and Training/University of Arkansas at Little Rock School of Social Work To provide funding to build capacity in workforce development, continuing education, resource development, and technical assistance to professionals and family members.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of Support Groups Held (Through NAMI AR)
Baseline Measurement: 4
First-year target/outcome measurement: 6
Second-year target/outcome measurement: 10

New Second-year target/outcome measurement(if needed):

Data Source:

NAMI AR

New Data Source(if needed):

Description of Data:

NAMI Support groups are funded by the Children's System of Care grant. DBHS has a sub grant with NAMI Arkansas to provide funds for these groups. Arkansas would like to have one group meet monthly in each of 14 sites.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The challenge has been in finding individuals who are consistently able to lead support groups as the leaders must be legacy family members who complete the NAMI support group trainings and be unpaid volunteers.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 2

Indicator: Number of Individuals Trained by UALR/MidSOUTH

Baseline Measurement: 426

First-year target/outcome measurement: 356

Second-year target/outcome measurement: 400

New Second-year target/outcome measurement(if needed):

Data Source:

UALR/MidSOUTH

New Data Source(if needed):

Description of Data:

Each year the Children's System of Care grant trainings have been made available to mental health staff and families. During SFY 2016, an exceptionally large number of family members were trained in Team Up for Your Child. Each year different subjects directly related to the grant are chosen and specific groups are targeted for the trainings.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

During the final years of the grant, less funds are available to be used for training.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

The Behavioral Health transformation in Arkansas was many years in the making. Many of the providers have been resistant to the system changes. It is this hesitancy that led to providers being more reluctant to hire and enroll employees into the Family Support Partner and Youth Support Specialist trainings until the transformation was approved by the legislature and implemented. Information has since been disbursed to garner more enthusiasm for the trainings while advising providers of the benefits of having Family Support Partners and Youth Support Specialists. We expect that since the transformation has been approved and is being implemented that the numbers of individuals being trained will increase in the years to come.

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 3

Indicator: Number of Youth and Family Affiliate Liaisons Hired

Baseline Measurement: 9 Youth and 5 Family Liaisons Hired

First-year target/outcome measurement: 11 youth and 11 family liaisons hired

Second-year target/outcome measurement: 14 youth and 14 family liaisons hired

New Second-year target/outcome measurement(if needed):

Data Source:

Mid-South Health Systems

New Data Source(if needed):

Description of Data:

Family and youth liaisons work within their community in the area of social marketing to inform families and youth about System of Care and encourage their participation in System of Care activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

All liaisons must have lived experiences and a desire to help others with similar backgrounds.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

The discretionary grant that funded this indicator ended 09/29/19. In the last year there were no new hires as the grant was operating on a no cost extension.

How second year target was achieved (optional):

Priority #: 5
Priority Area: Consumer Affairs
Priority Type: SAT, MHS
Population(s): SMI, SED, PWWDC, PP, PWID, Other (Adolescents w/SA and/or MH, LGBTQ, Rural, Criminal/Juvenile Justice, Persons with Disabilities, Homeless)

Goal of the priority area:

To assist and educate identified populations throughout the State of Arkansas in navigating the various social and behavioral health systems to access services

Strategies to attain the goal:

The Office of Community Affairs (OCA) will maintain a database regarding issues with access to services in a timely manner or lack of services available in primary counties of service.

OCA will build relationships with community organizations, providers and stakeholder to address consumer identified concerns and assist with obtaining access to services.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: OCA receives calls regarding lack of access to services
Baseline Measurement: Average number of calls is 50 per month.
First-year target/outcome measurement: OCA will decrease the number of calls regarding a lack of access to services by 3%
Second-year target/outcome measurement: OCA will decrease the number of calls regarding a lack of access to services by 5%

New Second-year target/outcome measurement(if needed):

Data Source:

Monthly call log database

New Data Source(if needed):

Description of Data:

The Office of Consumer Affairs and the Division of Aging, Adult and Behavioral Health Services staff receive calls; identify need of the caller and provide caller with an outcome.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Priority #: 6
Priority Area: Alcohol Use Among Youth, Adults and the Military
Priority Type: SAP
Population(s): PP, Other (Adolescents w/SA and/or MH, Military Families)

Goal of the priority area:

Reduce use of alcohol drinking among persons under 21, adults and the military.

Strategies to attain the goal:

- Increase utilization of the Center for Substance Abuse Prevention (CSAP) strategies: information dissemination, education/training community-based, problem identification and referral.
- Coordinate services for veterans, families, and other impacted by combat to determine and fill gaps based on issues, geography, age, and gender.
- Increase leadership and advocacy training for youth.
- Increase training about prevention to physicians and other healthcare providers for a greater understanding of science of addiction and prescription drug issues related to over prescribing.
- Increase drug education and services to college age youth.
- Increase survey participation on college campuses.
- Increase public awareness of substance abuse and misuse.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of students surveyed who reported that they had drank alcohol in the past 30 days.

Baseline Measurement: 12%

First-year target/outcome measurement: Lower reported 30-day alcohol usage by 2%

Second-year target/outcome measurement: Lower reported 30-day alcohol usage by 3%

New Second-year target/outcome measurement(if needed):

Data Source:

Arkansas Prevention Needs Assessment Survey (APNA), State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

The Arkansas Prevention Needs Assessment (APNA) Survey measures the current student use of alcohol, tobacco, and other drugs (ATOD) for students in grades 6th, 8th, 10th & 12th. APNA Survey is grounded in the risk and protective factor model of substance abuse prevention.

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 2
Indicator: The population served and reported in the Arkansas Prevention WITS by CSAP Strategies
Baseline Measurement: 1,122,046
First-year target/outcome measurement: Increase number of population served by 2%
Second-year target/outcome measurement: Increase number of population served by 3%
New Second-year target/outcome measurement(if needed):

Data Source:

Arkansas Prevention Needs Assessment Survey (APNA), State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

The Arkansas Prevention Needs Assessment (APNA) Survey measures the current student use of alcohol, tobacco, and other drugs (ATOD) for students in grades 6th, 8th, 10th & 12th. APNA Survey is grounded in the risk and protective factor model of substance abuse prevention.

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 3
Indicator: Number of completed on-line trainings for Center for Prevention and Training for Military
Baseline Measurement: 0
First-year target/outcome measurement: Increase number of completed on-line trainings by 2%
Second-year target/outcome measurement: Increase number of completed on-line trainings by 3%
New Second-year target/outcome measurement(if needed):
Data Source:

State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Priority #: 7
Priority Area: Tobacco Use among the Youth, Adults and the Military
Priority Type: SAP
Population(s): PP, Other (Adolescents w/SA and/or MH, Military Families)

Goal of the priority area:

Reduction of cigarette use among the youth, Adults and the Military.

Strategies to attain the goal:

- Increase utilization of the Center for Substance Abuse Prevention (CSAP) strategies to promote information dissemination, education/training, alternatives, environmental, community-based, problem identification and referral
- Coordinate services for veterans, families, and other impacted by combat to determine and fill gaps based on issues, geography, age, and gender.
- Expand youth efforts for leadership and advocacy by increasing the knowledge and skills involved in prevention and community mobilization so that youth will become recognized advocates for themselves and their peers.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of students surveyed in APNA 2014 who reported smoking cigarettes in the past 30 days.

Baseline Measurement: 6%

First-year target/outcome measurement: Lower reported 30-day tobacco usage by 2%

Second-year target/outcome measurement: Lower reported 30-day tobacco usage by 3%

New Second-year target/outcome measurement(if needed):

Data Source:

Arkansas Prevention Needs Assessment Survey (APNA), State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

The Arkansas Prevention Needs Assessment (APNA) Survey measures the current student use of alcohol, tobacco, and other drugs (ATOD) for students in grades 6th 8th, 10th, and 12th. APNA Survey is grounded in the risk and protective factor model of substance abuse prevention.

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Prevention WITS directly supports efforts by State agencies, Tribal organizations, Providers and US territories to implement SAMHSA's Strategic Prevention Framework (SPF).

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #:

2

Indicator: The population served and reported in the WITS data system by CSAP Strategies.

Baseline Measurement: 1,122,046

First-year target/outcome measurement: Lower reported 30-day tobacco usage by 2%

Second-year target/outcome measurement: Lower reported 30-day tobacco usage by 3%

New Second-year target/outcome measurement(if needed):

Data Source:

Arkansas Prevention Needs Assessment (APNA), State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

The Arkansas Prevention Needs Assessment (APNA) Survey measures the current student use of alcohol, tobacco, and other drugs (ATOD) for students in grades 6th, 8th, 10th & 12th. APNA Survey is grounded in the risk and protective factor model of substance abuse prevention.

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Prevention WITS directly supports efforts by State agencies, Tribal organizations, Providers and US territories to implement SAMHSA's Strategic Prevention Framework (SPF).

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 3

Indicator: Number of completed on-line training for Center for Prevention and Training for Military

Baseline Measurement: 0
First-year target/outcome measurement: Increase number of on-line trainings completed by 2%
Second-year target/outcome measurement: Increase number of on-line trainings completed by 3%

New Second-year target/outcome measurement(if needed):

Data Source:

State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Prevention WITS directly supports efforts by State agencies, Tribal organizations, Providers and US territories to implement SAMHSA's Strategic Prevention Framework (SPF).

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Priority #: 8
Priority Area: Lower the Usage Rate for Prescription Drug Usage
Priority Type: SAP
Population(s): PP, Other (Adolescents w/SA and/or MH, Military Families)

Goal of the priority area:

Reduce misuse of prescription drugs among Youth, Adults and the Military.

Strategies to attain the goal:

- Increase utilization of the Center for Substance Abuse Prevention (CSAP) strategies: information dissemination, education/training community-based, problem identification and referral.
- Coordinate services for veterans, families, and other impacted by combat to determine and fill gaps based on issues, geography, age, and gender.
- Increase leadership and advocacy training for youth.
- Increase training about prevention to physicians and other healthcare providers for a greater understanding of science of addiction and prescription drug issues related to over prescribing.
- Increase drug education and services to college age youth.
- Increase survey participation on college campuses.
- Increase public awareness of substance abuse and misuse.

Annual Performance Indicators to measure goal success

Indicator #:	1
Indicator:	Number of students surveyed in APNA 2014 who reported using prescription drugs use in the past 30 days.
Baseline Measurement:	3.2%
First-year target/outcome measurement:	Lower reported 30-day prescription drug usage by 2%
Second-year target/outcome measurement:	Lower reported 30-day prescription drug usage by 3%

New Second-year target/outcome measurement(*if needed*):

Data Source:

Arkansas Prevention Needs Assessment Survey (APNA), State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(*if needed*):

Description of Data:

The Arkansas Prevention Needs Assessment (APNA) Survey measures the current student use of alcohol, tobacco, and other drugs (ATOD) for students in grades 6th, 8th, 10th & 12th. APNA Survey is grounded in the risk and protective factor model of substance abuse prevention.

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data(*if needed*):

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

Arkansas showed no change in the number of students who self-reported using prescription drugs in the past 30 days. Arkansas did not achieve its goal in year one due to an organizational change within the Substance Abuse Unit in the Division. In shifting focus for youth populations, Arkansas is utilizing additional discretionary grant funds to focus efforts on prescription drug use and misuse.

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 2

Indicator: The population served and reported in the Arkansas Prevention WITS System by CSAP Strategies.

Baseline Measurement: 1,122,046

First-year target/outcome measurement: Increase the population served by 2%

Second-year target/outcome measurement: Increase the population served by 3%

New Second-year target/outcome measurement(if needed):

Data Source:

Arkansas Prevention Needs Assessment Survey (APNA), State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

The Arkansas Prevention Needs Assessment (APNA) Survey measures the current student use of alcohol, tobacco, and other drugs (ATOD) for students in grades 6th, 8th, 10th & 12th. APNA Survey is grounded in the risk and protective factor model of substance abuse prevention.

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Indicator #: 3

Indicator: Number of completed on-line training for Center for Prevention and Training for Military

Baseline Measurement: 0%

First-year target/outcome measurement: Increase the number of completed online trainings by 2%

Second-year target/outcome measurement: Increase the number of completed online trainings by 3%

New Second-year target/outcome measurement(if needed):

Data Source:

State Epidemiological Outcome Workgroup (SEOW), Completed on-line training certificates, Arkansas Prevention WITS System

New Data Source(if needed):

Description of Data:

Enhance or expand data being collected by veteran serving organization for ATOD usage such as completed on-line training certificates.

State Epidemiological Outcome Workgroup: This report provides an overview of substance consumption and consequence at both statewide and county levels. The purpose of the profile is to provide state policy-makers with a comprehensive picture of substance abuse challenges faced in Arkansas.

Arkansas Prevention WITS provides full functionality for tracking all prevention activities within the state and its regions or service areas. WITS contain a multi-dimensional Prevention Plan and allow contracted agencies to implement appropriate interventions/activities according to the plan. Implementation data is collected based on the workflow of the users, allowing for rapid but thorough collection of data required by the Block Grant, PFS and other required reporting mechanisms. All data collected can be used for subsequent evaluation, assessment and planning activities.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Arkansas uses the WITS reporting system – a web-based application designed to meet the growing need to capture substance abuse, mental health and treatment data. WITS satisfies mandatory government reporting requirements for planning, administration and monitoring of prevention programs. The system captures demographic information, number of individuals served, ethnicity, risk and protective factors along with the CSAP strategies.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Second Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved *(optional)*:

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 2A (URS Table 7) - MHBG State Agency Expenditure Report

This table describes expenditures for public mental health services provided or funded by the State mental health agency by source of funding. Include ONLY funds expended by the executive branch agency administering the MH Block Grant.

Activity (See instructions for using Row 1.)	A. SA Block Grant	B. MH Block Grant	C. Medicaid (Federal, State, and Local)	D. Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other
1. Substance Abuse Prevention and Treatment							
a. Pregnant Women and Women with Dependent Children							
b. All Other							
2. Primary Prevention*		\$0	\$0	\$0	\$0	\$0	\$0
3. Evidence-Based Practices for Early Serious Mental Illness**		\$855,086	\$0	\$0	\$0	\$0	\$0
4. Tuberculosis Services							
5. HIV Early Intervention Services							
6. State Hospital			\$3,584,875	\$2,261,391	\$40,443,341	\$1,404,871	\$996,541
7. Other 24 Hour Care		\$0	\$0	\$0	\$36,328,341	\$0	\$0
8. Ambulatory/Community Non-24 Hour Care		\$5,551,591	\$0	\$1,748,145	\$24,147,775	\$0	\$0
9. Administration (Excluding Program and Provider Level)		\$140,360	\$0	\$0	\$1,176,189	\$0	\$0
10. Total	\$0	\$6,547,037	\$3,584,875	\$4,009,536	\$102,095,646	\$1,404,871	\$996,541

*States may only use MHBG funds to provide primary prevention services to the priority populations of adults with serious mental illness and children with severe emotional disturbance

**Column 3B is for expenditures related to ESMI including First Episode Psychosis programs funded through MHBG set-aside. These funds are not to be also counted in #8 Ambulatory/Community Non 24-Hour Care.

Please indicate the expenditures are actual or estimated.

Actual Estimated

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 2B (URS Table 7A) - MHBG State Agency Early Serious Mental Illness and First Episode Psychosis Expenditures Report

Source of Funds						
Activity (See instructions for using Row 1.)	A. Mental Health Block Grant	B. Medicaid (Federal State & Local)	C. Other Federal Funds (e.g. ACF (TANF), CDC, CMS (Medicare), SAMHSA, etc.)	D. State Funds	E. Local funds (excluding local Medicaid)	F. Other
1. CSC-Evidences-Based Practices for First Episode Psychosis*	\$855,086	\$0	\$0	\$0	\$0	\$0
Training for CSC Practices	\$0	\$0	\$0	\$0	\$0	\$0
Planning for CSC Practices	\$0	\$0	\$0	\$0	\$0	\$0
2. Other Early Serious Mental Illnesses programs (other than FEP or partial CSC programs)	\$0	\$0	\$0	\$0	\$0	\$0
3. Training for ESMI	\$0	\$0	\$0	\$0	\$0	\$0
4. Planning for ESMI	\$0	\$0	\$0	\$0	\$0	\$0
7. Total	\$855,086	\$0	\$0	\$0	\$0	\$0

**When reporting CSC-Evidences-Based Practices for First Episode Psychosis, report only those programs that are providing all the components of a CSC model. If the state uses certain components of a CSC model, please report them in 'Other Early Serious Mental Illness program (other than FEP or partial CSC programs)'.

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 3 - Set-aside for Children's Mental Health Services

Statewide Expenditures for Children's Mental Health Services			
Actual SFY 1994	Actual SFY 2018	Estimated/Actual SFY 2019	Expense Type
\$2,955,792	\$7,008,968	\$5,736,349	<input checked="" type="radio"/> Actual <input type="radio"/> Estimated

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

States and jurisdictions are required not to spend less than the amount expended in FY 1994.

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 4 (URS Table 8) - Profile Of Mental Health Block Grant Expenditures for Non-Direct Service Activities

This table is used to describe the use of MHBG funds for non-direct service activities that are sponsored, or conducted, by the State Mental Health Authority

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Activity	Total of Block Grant
1. Information Systems	\$
2. Infrastructure Support	\$
3. Partnerships, Community Outreach and Needs Assessment	\$
4. Planning Council Activities	\$25,000
5. Quality Assurance and Improvement	\$
6. Research and Evaluation	\$
7. Training and Education	\$140,150
Total Non-Direct Services	\$165,150
Comments on Data:	

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 5 (URS Table 10) - Profiles of Agencies Receiving Block Grant Funds Directly from the State MHA

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Amount of MH Block Grant Allocation to Agency										
Entity Number	Area Served (Statewide or Sub-State Planning Area)	Provider/Program Name	Street Address	City	State	Zip	Total Block Grant Funds	Adults with Serious Mental Illness	Children with Serious Emotional Disturbance	Set-aside for ESMI/FEP Programs
1	Sub-State Planning Area	Community Counseling Services (Ouachita Regional)	125 Dons Way	Hot Springs	AR	71923	\$692,309.00	\$558,132.00	\$71,240.00	
2	Sub-State Planning Area	Counseling Associates	350 Salem, Suite 1	Conway	AR	72032	\$818,299.00	\$630,180.00	\$113,728.00	
3	Sub-State Planning Area	Counseling Clinic	307 East Sevier Street	Benton	AR	72015	\$605,796.00	\$500,452.00	\$50,272.00	
4	Sub-State Planning Area	Delta Counseling Associates	790 Roberts Drive	Monticello	AR	71655	\$688,236.00	\$590,141.00	\$35,528.00	
14	Statewide Planning Area	GAIN Inc	712 W. 3rd Street STE 100	Little Rock	AR	72201	\$83,459.00	\$75,872.00	\$0.00	
5	Sub-State Planning Area	Health Resources of Arkansas/Preferred Family Healthcare, Inc.	25 Gap Road	Batesville	AR	72503	\$61,090.00	\$43,903.00	\$11,633.00	
6	Sub-State Planning Area	Little Rock CMHC	4400 Shuffield Drive	Little Rock	AR	72205	\$626,051.00	\$569,137.00	\$0.00	
7	Sub-State Planning Area	Mid-South Health Systems	2707 Browns Lane	Jonesboro	AR	72401	\$1,276,382.00	\$1,106,515.00	\$53,832.00	
8	Sub-State Planning Area	Ozark Guidance Center	2400 South 48th Street	Springdale	AR	72766	\$1,200,470.00	\$792,269.00	\$299,067.00	
9	Sub-State Planning Area	Professional Counseling Associates	3601 Richards Road	North Little Rock	AR	72117	\$775,527.00	\$576,547.00	\$128,478.00	
10	Sub-State Planning Area	South Arkansas Regional Health Center	715 North College	El Dorado	AR	71730	\$631,243.00	\$432,470.00	\$141,387.00	
11	Sub-State Planning Area	Southeast Arkansas Behavioral Healthcare System	2500 Rike Drive	Pine Bluff	AR	71613	\$611,316.00	\$494,078.00	\$61,664.00	
12	Sub-State Planning Area	Southwest Arkansas Counseling & Mental Health Center	2904 Arkansas Boulevard	Texarkana	AR	71854	\$604,955.00	\$497,243.00	\$52,716.00	
13	Sub-State Planning Area	Western Arkansas Counseling & Guidance Center	3111 South 70th Street	Fort Smith	AR	72917	\$730,809.00	\$548,406.00	\$115,966.00	
Total							\$9,405,942.00	\$7,415,345.00	\$1,135,511.00	\$0.00

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 6 - Maintenance of Effort for State Expenditures on Mental Health Services

Total Expenditures for SMHA		
Period (A)	Expenditures (B)	<u>B1(2017) + B2(2018)</u> 2 (C)
SFY 2017 (1)	\$64,195,128	
SFY 2018 (2)	\$61,802,243	\$62,998,686
SFY 2019 (3)	\$61,447,003	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2017 Yes X No _____
 SFY 2018 Yes X No _____
 SFY 2019 Yes X No _____

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

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Footnotes:

D. Population and Services Report

MHBG Table 7 (URS Table 1) - Profile of the State Population by Diagnosis

Expenditure Period Start Date: Expenditure Period End Date:

	Current Report Year	Three Years Forward
Adults with Serious Illness (SMI)	<input type="text"/>	<input type="text"/>
Children with Serious Emotional Disturbances (SED)	<input type="text"/>	<input type="text"/>

Note: This Table will be completed for the States by CMHS.

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Footnotes:

D. Population and Services Report

MHBG Table 8A and MHBG Table 8B (URS Tables 2A and 2B) - Profile of Persons Served, All Programs by Age, Gender and Race/Ethnicity

This table provides an aggregate profile of persons in the reporting year. The reporting year should be the latest state fiscal year for which data are available. This profile is based on a client receiving services in programs provided or funded by the state mental health agency. The client profile takes into account all institutional and community services for all such programs. Please provide unduplicated counts if possible.

Table 8A

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Total			American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic use only if data for MHBG Table 8B are not available			More Than One Race Reported			Race Not Available			
	Female	Male	Not Available	Total	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available
0-12 years	5,372	8,404	14	13,790	14	36	0	12	14	0	805	1,556	4	11	12	0	2,720	4,173	10	0	0	0	94	151	0	1,716	2,462	0
13-17 years	5,178	4,993	16	10,187	24	14	0	13	8	0	745	958	0	3	12	0	2,921	2,831	6	0	0	0	85	69	0	1,387	1,101	10
18-20 years	1,908	1,646	28	3,582	6	6	0	6	4	0	290	361	1	2	2	0	1,128	902	1	0	0	0	28	13	0	448	358	26
21-24 years	2,222	1,899	6	4,127	6	5	0	13	12	0	449	404	0	1	0	0	1,289	1,050	2	0	0	0	21	24	0	443	404	4
25-44 years	12,915	11,085	26	24,026	53	51	0	44	43	0	2,544	2,571	4	19	9	0	8,175	6,543	10	0	0	0	78	56	0	2,002	1,812	12
45-64 years	10,493	7,005	7	17,505	46	31	0	29	26	0	2,284	1,614	0	12	1	0	6,740	4,360	4	0	0	0	50	27	0	1,332	946	3
65-74 years	1,563	791	1	2,355	5	2	0	3	1	0	312	203	0	1	1	0	1,088	490	0	0	0	0	4	3	0	150	91	1
75+ years	387	180	0	567	0	0	0	0	0	0	55	22	0	1	0	0	281	126	0	0	0	0	0	0	0	50	32	0
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	40,038	36,003	98	76,139	154	145	0	120	108	0	7,484	7,689	9	50	37	0	24,342	20,475	33	0	0	0	360	343	0	7,528	7,206	56
Pregnant Women	0	0	0	0	0			0			0			0			0			0			0			0		

Are these numbers unduplicated?

Unduplicated

Duplicated : between Hospitals and Community

Duplicated : Among Community Programs

Duplicated between children and adults

Other : describe

Comments on Data (for Age):	
Comments on Data (for Gender):	
Comments on Data (for Race/Ethnicity):	
Comments on Data (Overall):	

Table 8B

Of the total persons served, please indicate the age, gender and the number of persons who are Hispanic/Latino or not Hispanic/Latino. Total persons served would be the total as indicated in Table 8A.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Not Hispanic or Latino			Hispanic or Latino			Hispanic or Latino Origin Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
0-12 years	3,964	6,326	14	440	654	0	968	1,424	0	5,372	8,404	14	13,790
13-17 years	4,030	4,072	6	425	363	0	723	558	10	5,178	4,993	16	10,187
18-20 years	1,560	1,332	5	99	89	0	249	225	23	1,908	1,646	28	3,582
21-24 years	1,901	1,552	4	69	101	1	252	246	1	2,222	1,899	6	4,127
25-44 years	11,357	9,638	23	335	313	0	1,223	1,134	3	12,915	11,085	26	24,026
45-64 years	9,595	6,344	6	154	113	0	744	548	1	10,493	7,005	7	17,505
65-74 years	1,455	721	1	14	6	0	94	64	0	1,563	791	1	2,355
75+ years	361	155	0	0	5	0	26	20	0	387	180	0	567
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	34,223	30,140	59	1,536	1,644	1	4,279	4,219	38	40,038	36,003	98	76,139
Pregnant Women	0			0			0			0	0	0	0

Comments on Data (for Age):	
Comments on Data (for Gender):	
Comments on Data (for Race/Ethnicity):	
Comments on Data (Overall):	

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Footnotes:

D. Population and Services Report

MHBG Table 9 (URS Table 3) - Profile of Persons served in the Community Mental Health Settings, State Psychiatric Hospitals and Other Settings

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

This table provides a profile for the clients that received public funded mental health services in community mental health settings, in state psychiatric hospitals, in other psychiatric inpatient programs, and in residential treatment centers for children. Note: Clients can be duplicated between Rows: e.g., The same client may be served in both state psychiatric hospitals and community mental health centers during the same year and thus would be reported in counts for both rows.

Service Setting	Age 0-17			Age 18-20			Age 21-64			Age 65+			Age Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
Community Mental Health Programs	10,535	13,330	30	1,904	1,613	28	25,540	19,633	39	1,947	958	1	0	0	0	39,926	35,534	98	75,558
State Psychiatric Hospitals	15	67	0	4	33	0	90	356	0	3	13	0	0	0	0	112	469	0	581
Other Psychiatric Inpatient	4	0	0	21	32	0	206	353	0	5	2	0	0	0	0	236	387	0	623
Residential Treatment Centers	67	64	0	3	3	0	98	246	0	6	5	0	0	0	0	174	318	0	492

Comments on Data (for Age):

Comments on Data (for Gender):

Comments on Data (Overall):

0930-0168 Approved: 06/07/2017 Expires: 06/30/2020

Footnotes:

D. Population and Services Report

MHBG Table 10A and MHBG Table 10B (URS Tables 5A and 5B) - Profile of Clients by Type of Funding Support

0930-0168 Approved: 06/07/2017 Expires: 06/30/2020

Table 10A

This table provides a summary of clients by Medicaid coverage. Since the focus of the reporting is on clients of the public mental health service delivery system, this table focuses on the clientele serviced by public programs that are funded or operated by the State Mental Health Authority. Persons are to be counted in the Medicaid row if they received a service reimbursable through Medicaid.

Please note that the same person may be served in both Medicaid and Non-Medicaid programs during the same reporting period.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Total			American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic use only if data for MHBG Table 10B are not available			More Than One Race Reported			Race Not Available			
	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	
Medicaid (only Medicaid)	19,404	17,642	18	37,064	81	67	0	44	34	0	4,023	4,195	5	26	18	0	11,087	9,360	13	0	0	0	230	230	0	3,913	3,738	0
Non-Medicaid Sources (only)	18,084	15,836	22	33,942	67	66	0	70	66	0	3,131	3,079	3	21	18	0	11,517	9,614	9	0	0	0	121	105	0	3,157	2,888	10
People Served by Both Medicaid and Non-Medicaid Sources	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Medicaid Status Not Available	2,550	2,525	58	5,133	6	12	0	6	8	0	330	415	1	3	1	0	1,738	1,501	11	0	0	0	9	8	0	458	580	46
Total Served	40,038	36,003	98	76,139	154	145	0	120	108	0	7,484	7,689	9	50	37	0	24,342	20,475	33	0	0	0	360	343	0	7,528	7,206	56

Data Based on Medicaid Services Data Based on Medical Eligibility, not Medicaid Paid Services 'People Served By Both' includes people with any Medicaid

Comments on Data (for Race):
See General Notes

Comments on Data (for Gender):

Comments on Data (Overall):

Each row should have a unique (unduplicated) count of clients: (1) Medicaid Only, (2) Non-Medicaid Only, (3) Both Medicaid and Other Sources funded their treatment, and (4) Medicaid Status Not Available.

If a state is unable to unduplicate between people whose care is paid for by Medicaid only or Medicaid and other funds, then all data should be reported into the 'People Served by Both Medicaid and Non-Medicaid Sources' and the 'People Served by Both includes people with any Medicaid' check box should be checked.

Table 10B

Of the total persons covered by Medicaid, please indicate the gender and number of persons who are Hispanic/Latino or not Hispanic/Latino. Total persons covered by Medicaid would be the total indicated in Table 10A.

Please note that the same person may be served in both Medicaid and Non-Medicaid programs during the same reporting period.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Not Hispanic or Latino			Hispanic or Latino			Hispanic or Latino Origin Unknown			Total			
	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Total
Medicaid Only	16,308	14,558	18	980	1,063	0	2,116	2,021	0	19,404	17,642	18	37,064
Non-Medicaid Only	15,854	13,741	18	479	501	1	1,751	1,594	3	18,084	15,836	22	33,942
People Served by Both Medicaid and Non-Medicaid Sources	0	0	0	0	0	0	0	0	0	0	0	0	0
Medicaid Status Unknown	2,061	1,841	23	77	80	0	412	604	35	2,550	2,525	58	5,133
Total Served	34,223	30,140	59	1,536	1,644	1	4,279	4,219	38	40,038	36,003	98	76,139

Comments on Data (for Ethnicity):

Comments on Data (for Gender):

Comments on Data (Overall):

See General Notes

Each row should have a unique (unduplicated) count of clients: (1) Medicaid Only, (2) Non-Medicaid Only, (3) Both Medicaid and Other Sources funded their treatment, and (4) Medicaid Status Unknown.

Footnotes:

D. Population and Services Report

MHBG Table 11 (URS Table 6) - Profile of Client Turnover

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Profile of Service Utilization	Total Served at Beginning of Year (unduplicated)	Admissions During the year (duplicated)	Discharges During the year (duplicated)	Length of Stay (in Days): Discharged Patients		For Clients in Facility for 1 Year or Less: Average Length of Stay (in Days): Residents at end of year		For Clients in Facility More Than 1 Year: Average Length of Stay (in Days): Residents at end of year	
				Average (Mean)	Median	Average (Mean)	Median	Average (Mean)	Median
State Hospitals	207	377	367	0	0	0	0	0	0
Children (0 to 17 years)	21	26	14	196	125	138	101	541	401
Adults (18 yrs and over)	186	351	353	162	86	105	71	668	495
Age Not Available	0	0	0	0	0	0	0	0	0
Other Psychiatric Inpatient	128	1,452	1,364	0	0	0	0	0	0
Children (0 to 17 years)	0	4	4	26	24	0	0	0	0
Adults (18 yrs and over)	128	1,448	1,360	14	7	14	7	0	0
Age Not Available	0	0	0	0	0	0	0	0	0
Residential Tx Centers	155	381	335	0	0	0	0	0	0
Children (0 to 17 years)	155	381	335	74	66	74	66	0	0
Adults (18 yrs and over)	0	0	0	0	0	0	0	0	0
Age Not Available	0	0	0	0	0	0	0	0	0
Community Programs	44,883	24,035	0	0	0	0	0	0	0
Children (0 to 17 years)	14,406	7,613							
Adults (18 yrs and over)	30,477	16,422							
Age Not Available	0	0							

Comments on Data (State Hospital):

Comments on Data (Other Inpatient):

Comments on Data (Residential Treatment):

Comments on Data (Community Programs):

Footnotes:

D. Population and Services Report

MHBG Table 12 (URS Table 12) - State Mental Health Agency Profile

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Populations Served

1. Which of the following populations receive services operated or funded by the state mental health agency? Please indicate if they are included in the data provided in the tables. (Check all that apply.)

	Populations Covered:		Included in Data	
	State Hospitals	Community Programs	State Hospitals	Community Programs
1. Aged 0 to 3	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
2. Aged 4 to 17	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
3. Adults Aged 18 and over	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
4. Forensics	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
Comments on Data:				

2. Do all of the adults and children served through the state mental health agency meet the Federal definitions of serious mental illness and serious emotional disturbances?

- Serious Mental Illness
 Serious Emotional Disturbances

2.a. If no, please indicate the percentage of persons served for the reporting period who met the federal definitions of serious mental illness and serious emotional disturbance?

2.a.1. Percent of adults meeting Federal definition of SMI:

51.3 %

2.a.2. Percentage of children/adolescents meeting Federal definition of SED:

54.4 %

3. Co-Occurring Mental Health and Substance Abuse:

3.a. What percentage of persons served by the SMHA for the reporting period have a dual diagnosis of mental illness and substance abuse?

3.a.1. Percentage of adults served by the SMHA who also have a diagnosis of substance abuse problem:

12.4 %

3.a.2. Percentage of children/adolescents served by the SMHA who also have a diagnosis of substance abuse problem:

1.8 %

3.b. What percentage of persons served for the reporting period who met the Federal definitions of adults with SMI and children/adolescents with SED have a dual diagnosis of mental illness and substance abuse?

3.b.1. Percentage of adults meeting Federal definition of SMI who also have a diagnosis of substance abuse problem:

12.5 %

3.b.2. Percentage of children/adolescents meeting the Federal definition of SED who also have a diagnosis of substance abuse problem:

1.8 %

3.b.3. Please describe how you calculate and count the number of persons with co-occurring disorders. The state reporting system has a specific reporting field for "co-occurring substance abuse disorder."

4. State Mental Health Agency Responsibilities

a. Medicaid: Does the State Mental Health Agency have any of the following responsibilities for mental health services provided through Medicaid? (Check All that Apply)

1. State Medicaid Operating Agency
 2. Setting Standards

-

- 3. Quality Improvement/Program Compliance
- 4. Resolving Consumer Complaints
- 5. Licensing
- 6. Sanctions
- 7. Other

b. Managed Care (Mental Health Managed Care)

Are Data for these programs reported on URS Tables?

- 4.b.1 Does the State have a Medicaid Managed Care initiative? Yes Yes
- 4.b.2 Does the State Mental Health Agency have any responsibilities for mental health services provided through Medicaid Managed Care? Yes
- If yes, please check the responsibilities the SMHA has:
- 4.b.3 Direct contractual responsibility and oversight of the MCOs or BHOs Yes
- 4.b.4 Setting Standards for mental health services Yes
- 4.b.5 Coordination with state health and Medicaid agencies Yes
- 4.b.6 Resolving mental health consumer complaints Yes
- 4.b.7 Input in contract development Yes
- 4.b.8 Performance monitoring Yes
- 4.b.9 Other

5. Data Reporting: Please describe the extent to which your information systems allows the generation of unduplicated client counts between different parts of your mental health system. Please respond in particular for Table 2, which requires unduplicated counts of clients served across your entire mental health system.

Are the data reporting in the tables?

- 5.a. **Unduplicated:** counted once even if they were served in both State hospitals and community programs and if they were served in community mental health agencies responsible for different geographic or programmatic areas.
- 5.b. **Duplicated:** across state hospital and community programs
- 5.c. **Duplicated:** within community programs
- 5.d. **Duplicated:** Between Child and Adult Agencies
- 5.e. **Plans for Unduplication:** If you are not currently able to provide unduplicated client counts across all parts of your mental health system, please describe your plans to get unduplicated client counts by the end of your Data Infrastructure Grant.

6. Summary Administrative Data

6.a. Report Year:	2018
6.b. State Identifier:	AR

Summary Information on Data Submitted by SMHA:

- 6.c. Year being reported: 7/1/2018 12:00:00 AM to 6/30/2019 12:00:00 AM
- 6.d. Person Responsible for Submission: Eric Tedford
- 6.e. Contact Phone Number: 5016869037
- 6.f. Contact Address: 700 Main St. Little Rock, AR 72201
- 6.g. E-mail: eric.tedford@dhs.arkansas.gov

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Footnotes:

D. Population and Services Report

MHBG Tables 13A and 13B (URS Tables 14A and 14B) - Profile of Persons with SM/SED Served By Age, Gender and Race/Ethnicity

Table 13A

This table requests counts for persons with SMI or SED using the definitions provided by the CMHS. URS Table's 2A and 2B included all clients served by publicly operated or funded programs. This table counts only clients who meet the CMHS definition of SMI or SED. For many states, this table may be the same as URS Table's 2A and 2B. For 2007, states should report using the Federal Definitions of SMI and SED if they can report them, if not, please report using your state's definitions of SMI and SED and provide information below describing your state's definition.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Total			American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic use only if data for MHBG Table 13b are not available			More Than One Race Reported			Race Not Available			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	
0-12 years	2,768	4,721	4	7,493	8	28	0	4	5	0	417	873	0	6	3	0	1,579	2,514	4	0	0	0	55	101	0	699	1,197	0
13-17 years	2,792	2,759	3	5,554	11	9	0	2	4	0	422	574	0	2	9	0	1,683	1,649	3	0	0	0	51	37	0	621	477	0
18-20 years	834	756	0	1,590	2	4	0	2	1	0	147	201	0	0	0	0	530	444	0	0	0	0	14	7	0	139	99	0
21-24 years	916	805	0	1,721	3	2	0	6	5	0	195	208	0	0	0	0	573	466	0	0	0	0	7	12	0	132	112	0
25-44 years	6,336	5,308	10	11,654	21	22	0	20	15	0	1,480	1,560	2	8	3	0	4,151	3,248	7	0	0	0	34	25	0	622	435	1
45-64 years	6,292	3,941	4	10,237	20	12	0	13	20	0	1,659	1,090	0	7	1	0	4,062	2,531	3	0	0	0	29	16	0	502	271	1
65-74 years	893	428	0	1,321	2	0	0	1	1	0	231	148	0	1	1	0	605	252	0	0	0	0	2	1	0	51	25	0
75+ years	172	74	0	246	0	0	0	0	0	0	37	16	0	0	0	0	127	51	0	0	0	0	0	0	0	8	7	0
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pregnant Women	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	21,003	18,792	21	39,816	67	77	0	48	51	0	4,588	4,670	2	24	17	0	13,310	11,155	17	0	0	0	192	199	0	2,774	2,623	2
Comments on Data (for Age):																												
Comments on Data (for Gender):																												
Comments on Data (for Race/Ethnicity):																												

Comments on Data (Overall):

1. State Definitions Match the Federal Definitions

Yes No Adults with SMI, if No describe or attach state definition:

Diagnoses included in the state SMI definition:

Yes No Children with SED, if No describe or attach state definition:

Diagnoses included in the state SED definition:

	^
	^
	^

Table 13B

Of the total persons served, please indicate the age, gender and the number of persons who meet the Federal definition of SMI and SED and who are Hispanic/Latino or not Hispanic/Latino. The total persons served who meet the Federal definition of SMI or SED should be the total as indicated in Table 14A. Please report the data under the categories listed - "Total" are calculated automatically.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Not Hispanic or Latino			Hispanic or Latino			Hispanic or Latino Origin Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
0-12 years	2,207	3,697	4	175	310	0	386	714	0	2,768	4,721	4	7,493
13-17 years	2,244	2,328	3	211	173	0	337	258	0	2,792	2,759	3	5,554
18-20 years	698	639	0	46	42	0	90	75	0	834	756	0	1,590
21-24 years	793	679	0	32	47	0	91	79	0	916	805	0	1,721
25-44 years	5,686	4,783	10	139	154	0	511	371	0	6,336	5,308	10	11,654
45-64 years	5,838	3,666	3	82	57	0	372	218	1	6,292	3,941	4	10,237
65-74 years	843	408	0	8	3	0	42	17	0	893	428	0	1,321
75+ years	165	68	0	0	3	0	7	3	0	172	74	0	246
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0
Pregnant Women	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	18,474	16,268	20	693	789	0	1,836	1,735	1	21,003	18,792	21	39,816

Comments on Data (for Age):

Comments on Data (for Gender):

Comments on Data (for Race/Ethnicity):	
Comments on Data (Overall):	

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D. Population and Services Report

MHBG Table 14 (URS Table 15A) - Profile of Persons served in the community mental health setting, State Psychiatric Hospitals and Other Settings for Adults with SMI and Children with SED

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Service Setting	Age 0-17			Age 18-20			Age 21-64			Age 65+			Age Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
Community Mental Health Programs	5,545	7,413	7	830	723	0	13,454	9,698	14	1,062	489	0	0	0	0	20,891	18,323	21	39,235
State Psychiatric Hospitals	15	67	0	4	33	0	90	356	0	3	13	0	0	0	0	112	469	0	581
Other Psychiatric Inpatient	3	0	0	10	14	0	66	83	0	3	2	0	0	0	0	82	99	0	181
Residential Treatment Centers	18	12	0	0	3	0	98	245	0	6	5	0	0	0	0	122	265	0	387

Comments on Data (for Age):

Comments on Data (for Gender):

Comments on Data (Overall):

Note: Clients can be duplicated between Rows (e.g. The same client may be served in both state psychiatric hospitals and community mental health centers during the same year and thus would be reported in counts for both rows).

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E. Performance Indicators and Accomplishments

MHBG Table 15A (URS Table 4) - Profile of Adult Clients by Employment Status

This table describes the status of adult clients served in the reporting year by the public mental health system, in terms of employment status. The focus is on employment for the working age population, recognizing, however, there are clients who are disabled, retired, or who are homemakers, care-givers, etc., and not a part of the workforce. These persons should be reported in the "Not in Labor Force" category. Unemployed refers to persons who are looking for work but have not found employment. Data should be reported for clients in non-institutional settings at time of discharge or last evaluation.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Adults Served	18-20			21-64			65+			Age Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Avail	Total
Employed: Competitively Employed Full or Part Time (includes Supported Employment)	318	192	1	4,910	4,014	4	95	63	0	0	0	0	5,323	4,269	5	9,597
Unemployed	416	361	1	9,246	6,975	11	389	151	0	0	0	0	10,051	7,487	12	17,550
Not In Labor Force: Retired, Sheltered Employment, Sheltered Workshops, Other (homemaker, student, volunteer, disabled, etc.)	834	770	0	6,962	5,151	2	1,072	549	0	0	0	0	8,868	6,470	2	15,340
Not Available	336	290	26	4,422	3,493	22	391	195	1	0	0	0	5,149	3,978	49	9,176
Total	1,904	1,613	28	25,540	19,633	39	1,947	958	1	0	0	0	29,391	22,204	68	51,663

How Often Does your State Measure Employment Status? At Admission At Discharge Monthly Quarterly Other, describe:

Varies by provider

What populations are included: All clients Only selected groups, describe:

Comments on Data (for Age):

Comments on Data (for Gender):

Comments on Data (Overall):

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E. Performance Indicators and Accomplishments

MHBG Table 15B (URS Table 4A) - Optional Profile of Adult Clients by Employment Status by Primary Diagnosis Reported

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Clients Primary Diagnosis	Employed: Competitively Employed Full or Part Time (includes Supported Employment)	Unemployed	Not In Labor Force: Retired, Sheltered Employment, Sheltered Workshops, Other (homemaker, student, volunteer, disabled, etc.)	Employment Status Not Available	Total
Schizophrenia & Related Disorders (F20, F25)	301	2,118	3,103	1,033	6,555
Bipolar and Mood Disorders (F30,F31,F32,F33,F34.1,F60.89,F34.0,F32.9)	4,614	8,718	7,351	4,212	24,895
Other Psychoses (F22,F23,F24,F28,F29)	105	553	550	294	1,502
All Other Diagnoses	4,434	5,988	4,247	3,320	17,989
No DX and Deferred DX (R69,R99,Z03.89)	143	173	89	317	722
Diagnosis Total	9,597	17,550	15,340	9,176	51,663

Comments on Data (for Diagnosis):

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E. Performance Indicators and Accomplishments

MHBG Table 16 (URS Table 9) - Social Connectedness and Improved Functioning

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Adult Consumer Survey Results		Number of Positive Responses	Responses	Percent Positive (calculated)
1. Social Connectedness		235	410	57%
2. Functioning		249	418	60%
Child/Adolescent Consumer Survey Results		Number of Positive Responses	Responses	Percent Positive (calculated)
3. Social Connectedness		301	416	72%
4. Functioning		282	415	68%
Comments on Data:				

Adult Social Connectedness and Functioning Measures

- Did you use the recommended new Social Connectedness Questions? Yes No
Measure used
- Did you use the recommended new Functioning Domain Questions? Yes No
Measure used
- Did you collect these as part of your MHSIP Adult Consumer Survey? Yes No
If No, what source did you use?

Child/Family Social Connectedness and Functioning Measures

- Did you use the recommended new Social Connectedness Questions? Yes No
Measure used
- Did you use the recommended new Functioning Domain Questions? Yes No
Measure used
- Did you collect these as part of your YSS-F Survey? Yes No
If No, what source did you use?

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E. Performance Indicators and Accomplishments

MHBG Table 17A (URS Table 11) - Summary Profile of Client Evaluation of Care

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Adult Consumer Survey Results:	Number of Positive Responses	Responses	Confidence Interval*
1. Reporting Positively about Access.	336	430	4
2. Reporting Positively about Quality and Appropriateness for Adults.	335	422	4
3. Reporting Positively about Outcomes.	236	405	5
4. Adults Reporting on Participation In Treatment Planning.	281	404	4
5. Adults Positively about General Satisfaction with Services.	349	430	4

Child/Adolescent Consumer Survey Results:	Number of Positive Responses	Responses	Confidence Interval*
1. Reporting Positively about Access.	343	418	4
2. Reporting Positively about General Satisfaction for Children.	313	421	4
3. Reporting Positively about Outcomes for Children.	267	417	5
4. Family Members Reporting on Participation In Treatment Planning for their Children.	348	419	4
5. Family Members Reporting High Cultural Sensitivity of Staff.	382	418	3

Please enter the number of persons responding positively to the questions and the number of total responses within each group. Percent positive will be calculated from these data.

** Please report Confidence Intervals at the 95% level. See directions below regarding the calculation of confidence intervals.*

Comments on Data:

Adult Consumer Surveys

1. Was the Official 28 Item MHSIP Adult Outpatient Consumer Survey Used? Yes No

1.a. If no, which version:

- 1. Original 40 Item Version Yes
- 2. 21-Item Version Yes
- 3. State Variation of MHSIP Yes
- 4. Other Consumer Survey Yes

1.b. If other, please attach instrument used.

- 1.c. Did you use any translations of the MHSIP into another language? 1. Spanish
 2. Other Language:

Adult Survey Approach

2. Populations covered in survey? (Note all surveys should cover all regions of state) 1. All Consumers In State 2. Sample of MH Consumers

- 2.a. If a sample was used, what sample methodology was used? 1. Random Sample
 2. Stratified / Random Stratified Sample
 3. Convenience Sample
 4. Other Sample:

- 2.b. Do you survey only people currently in services, or do you also survey persons no longer in service? 1. Persons Currently Receiving Services
 2. Persons No Longer Receiving Services

3. Please describe the populations included in your sample: (e.g., all adults, only adults with SMI, etc.) 1. All Adult Consumers In State
 2. Adults With Serious Mental Illness
 3. Adults Who Were Medicaid Eligible Or In Medicaid Managed Care
 4. Other (for example, if you survey anyone served in the last 3 months, describe that here):

4. Methodology of collecting data? (Check all that apply)

	Self-Administered	Interview
Phone	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Mail	<input checked="" type="checkbox"/> Yes	
Face-to-face	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Web-Based	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

- 4.b. Who administered the survey? (Check all that apply) 1. MH Consumers
 2. Family Members
 3. Professional Interviewers
 4. MH Clinicians
 5. Non Direct Treatment Staff
 6. Other, describe:
Vendor

5. Are Responses Anonymous, Confidential and/or Linked to other Patient Databases? 1. Responses are Anonymous

- 2. Responses are Confidential
- 3. Responses are Matched to Client Databases

6. Sample Size and Response Rate

- 6.a. How Many surveys were Attempted (sent out or calls initiated)? 1,998
- 6.b. How many survey Contacts were made? (surveys to valid phone numbers or addresses)? 1,701
- 6.c. How many surveys were completed? (survey forms returned or calls completed) 448
- 6.d. What was your response rate? (number of Completed surveys divided by number of Contacts) 26.0 %
- 6.e. If you receive "blank" surveys back from consumers (surveys with no responses on them), did you count these surveys as "completed" for the calculation of response rates? Yes No

7. Who Conducted the survey

- 7.a. SMHA Conducted or contracted for the survey (survey done at state level) Yes No
- 7.b. Local Mental Health Providers/County mental health providers conducted or contracted for the survey (survey was done at the local or regional level) Yes No
- 7.c. Other, describe:

* Report Confidence Intervals at the 95% confidence level

Note: The confidence interval is the plus-or-minus figure usually reported in newspaper or television opinion poll results. For example, if you use a confidence interval of 4 and 47% percent of your sample picks an answer you can be "sure" that if you had asked the question of the entire relevant population between 43% (47-4) and 51% (47+4) would have picked that answer. The confidence level tells you how sure you can be. It is expressed as a percentage and represents how often the true percentage of the population who would pick an answer lies within the confidence interval. The 95% confidence level means you can be 95% certain; the 99% confidence level means you can be 99% certain. Most researchers use the 95% confidence level. When you put the confidence level and the confidence interval together, you can say that you are 95% sure that the true percentage of the population is between 43% and 51%. (From www.surveysystem.com)

Child / Family Consumer Surveys

- 1. Was the MHSIP Children / Family Survey (YSS-F) Used? Yes
- If no, what survey did you use?

If no, please attach instrument used.

- 1.c. Did you use any translations of the Child MHSIP into another language? 1. Spanish 2. Other Language:

Child Survey Approach

- 2. Populations covered in survey? (Note all surveys should cover all regions of state) 1. All Consumers In State 2. Sample of MH Consumers
 - 2.a. If a sample was used, what sample methodology was used? 1. Random Sample 2. Stratified / Random Stratified Sample 3. Convenience Sample 4. Other Sample:
 - 2.b. Do you survey only people currently in services, or do you also survey persons no longer in service? 1. Persons Currently Receiving Services 2. Persons No Longer Receiving Services

2a. If yes to 2, please describe how your survey persons no longer receiving services.

- 3. Please describe the populations included in your sample: (e.g., all children, only children with SED, etc.) 1. All Child Consumers In State

- 2. Children with Serious Emotional Disturbances
- 3. Children who were Medicaid Eligible or in Medicaid Managed Care
- 4. Other (for example, if you survey anyone served in the last 3 months, describe that here):

4. Methodology of collecting data? (Check all that apply)

	Self-Administered	Interview
Phone	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Mail	<input checked="" type="checkbox"/> Yes	
Face-to-face	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Web-Based	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

4.b. Who administered the survey? (Check all that apply)

- 1. MH Consumers
- 2. Family Members
- 3. Professional Interviewers
- 4. MH Clinicians
- 5. Non Direct Treatment Staff
- 6. Other, describe:
Vendor

5. Are Responses Anonymous, Confidential and/or Linked to other Patient Databases?
- 1. Responses are Anonymous
 - 2. Responses are Confidential
 - 3. Responses are Matched to Client Databases

6. Sample Size and Response Rate

- 6.a. How Many surveys were Attempted (sent out or calls initiated)? 2,200
- 6.b. How many survey Contacts were made? (surveys to valid phone numbers or addresses)? 1,869
- 6.c. How many surveys were completed? (survey forms returned or calls completed) 423
- 6.d. What was your response rate? (number of Completed surveys divided by number of Contacts) 23.0 %
- 6.e. If you receive "blank" surveys back from consumers (surveys with no responses on them), did you count these surveys as "completed" for the calculation of response rates? Yes No

7. Who Conducted the survey

- 7.a. SMHA Conducted or contracted for the survey (survey done at state level) Yes No
- 7.b. Local Mental Health Providers/County mental health providers conducted or contracted for the survey (survey was done at the local or regional level) Yes No
- 7.c. Other, describe: Vendor

Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 17B (URS Table 11A) - Consumer Evaluation of Care by Consumer Characteristics: (Optional Table by Race/Ethnicity)

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Adult Consumer Survey Results:

*State used the 2 question version for Yes No Please check the appropriate box on the left. The "Totals" formula will automatically adjust to account for which method your state used to ask about Hispanic Origin/Status

Indicators	Total		American Indian or Alaska Native		Asian		Black or African American		Native Hawaiian or Other Pacific Islander		White		More Than One Race Reported		Other / Not Available		Hispanic Origin	
	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses
1. Reporting Positively About Access.	336	430	4	5	2	2	78	97	0	0	242	308	8	14	2	4	13	16
2. Reporting Positively About Quality and Appropriateness.	335	422	4	5	2	2	75	94	0	0	239	300	10	14	5	7	11	16
3. Reporting Positively About Outcomes.	236	405	2	5	2	2	58	91	0	0	164	287	7	12	3	8	6	14
4. Reporting Positively about Participation in Treatment Planning	281	404	4	5	2	2	64	93	0	0	199	285	8	14	4	5	10	14
5. Reporting Positively about General Satisfaction	349	430	4	5	2	2	83	97	0	0	249	309	9	13	2	4	13	16
6. Social Connectedness	235	410	3	5	2	2	58	91	0	0	164	292	5	12	3	8	4	14
7. Functioning	249	418	3	5	2	2	57	91	0	0	176	298	7	13	4	9	5	15

Child/Adolescent Family Survey Results:

*State used the 2 question version for Yes No Please check the appropriate box on the left. The "Totals" formula will automatically adjust to account for which method your state used to ask about Hispanic Origin/Status

Indicators	Total		American Indian or Alaska Native		Asian		Black or African American		Native Hawaiian or Other Pacific Islander		White		More Than One Race Reported		Other / Not Available		Hispanic Origin	
	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses
1. Reporting Positively About Access.	343	418	4	5	1	2	75	84	2	2	222	279	21	27	18	19	46	53

2. Reporting Positively About General Satisfaction	313	421	3	5	2	2	71	85	1	2	199	281	21	27	16	19	41	53
3. Reporting Positively About Outcomes.	267	417	2	5	2	2	57	84	0	2	170	278	21	27	15	19	38	53
4. Reporting Positively Participation in Treatment Planning for their Children.	348	419	4	5	2	2	69	85	1	2	232	279	24	27	16	19	42	52
5. Reporting Positively About Cultural Sensitivity of Staff.	382	418	3	5	2	2	81	85	2	2	252	278	26	27	16	19	46	53
6. Social Connectedness	301	416	2	5	1	2	66	84	2	2	196	278	18	26	16	19	41	52
7. Functioning	282	415	3	5	2	2	57	84	0	2	184	276	21	27	15	19	39	53

Comments on Data:

Please enter the number of persons responding positively to the questions and the number of total responses within each group. Percent positive will be calculated from these data.

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 18 (URS Table 15) - Living Situation Profile

Number of Clients in Each Living Situation as Collected by the Most Recent Assessment in the Reporting Period

All Mental Health Programs by Age, Gender, and Race/Ethnicity

Please provide unduplicated counts, if possible. This table provides an aggregate profile of persons served in the reporting year. The reporting year should be the latest state fiscal year for which data are available. This profile is based on a client's last known Living Situation.

Please report the data under the Living Situation categories listed - "Total" are calculated automatically.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Private Residence	Foster Home	Residential Care	Crisis Residence	Children's Residential Treatment	Institutional Setting	Jail / Correctional Facility	Homeless / Shelter	Other	NA	Total
0-17	20,850	1,479	248	8	60	9	185	112	195	831	23,977
18-64	40,519	143	1,541	59	9	277	1,089	971	924	3,708	49,240
65+	2,515	4	137	2	0	18	22	17	60	147	2,922
Not Available	0	0	0	0	0	0	0	0	0	0	0
TOTAL	63,884	1,626	1,926	69	69	304	1,296	1,100	1,179	4,686	76,139
Female	34,297	838	841	38	43	84	263	505	598	2,531	40,038
Male	29,545	787	1,085	31	26	219	1,005	594	580	2,131	36,003
Not Available	42	1	0	0	0	1	28	1	1	24	98
TOTAL	63,884	1,626	1,926	69	69	304	1,296	1,100	1,179	4,686	76,139
American Indian/Alaska Native	256	8	5	0	0	1	3	8	3	15	299
Asian	193	3	5	0	0	2	3	5	3	14	228
Black/African American	12,661	224	559	20	11	121	409	231	280	666	15,182
Hawaiian/Pacific Islander	74	2	1	1	0	0	5	1	2	1	87
White/Caucasian	38,217	875	1,160	42	51	151	609	664	723	2,358	44,850
Hispanic *	0	0	0	0	0	0	0	0	0	0	0

More than One Race Reported	624	27	7	0	0	1	6	10	15	13	703
Race/Ethnicity Not Available	11,859	487	189	6	7	28	261	181	153	1,619	14,790
TOTAL	63,884	1,626	1,926	69	69	304	1,296	1,100	1,179	4,686	76,139

	Private Residence	Foster Home	Residential Care	Crisis Residence	Children's Residential Treatment	Institutional Setting	Jail / Correctional Facility	Homeless / Shelter	Other	NA	Total
Hispanic or Latino Origin	2,820	72	26	3	2	6	34	34	45	139	3,181
Non Hispanic or Latino Origin	55,492	1,206	1,798	64	63	291	1,065	918	1,027	2,498	64,422
Hispanic or Latino Origin Not Available	5,572	348	102	2	4	7	197	148	107	2,049	8,536
TOTAL	63,884	1,626	1,926	69	69	304	1,296	1,100	1,179	4,686	76,139

Comments on Data:	
How Often Does your State Measure Living Situation?	<input type="checkbox"/> At Admission <input type="checkbox"/> At Discharge <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other: Describe <div style="border: 1px solid black; padding: 2px; display: inline-block;">Varies by provider</div>

*Hispanic: Only use the "Hispanic" row under Race if data for Hispanic as an Ethnic Origin are not available

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 19 (URS Table 16) - Profile of Adults With Serious Mental Illnesses And Children With Serious Emotional Disturbances Receiving Specific Services

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Age	Adults with Serious Mental Illnesses (SMI)				Children with Serious Emotional Disturbances (SED)			
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
0-12 years					0	0	0	0
13-17 years					0	0	0	0
18-20 years	0	0	0	0	0	0	0	0
21-64 years	0	0	0	0				
65-74 years	0	0	0	0				
75+ years	0	0	0	0				
Not Available	242	54	131	26,769	348	0	0	13,047
Total	242	54	131	26,769	348	0	0	13,047

Gender	Adults with Serious Mental Illnesses (SMI)				Children with Serious Emotional Disturbances (SED)			
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
Female	0	0	0	0	0	0	0	0
Male	0	0	0	0	0	0	0	0
Not Available	242	54	131	26,769	348	0	0	13,047

Race/Ethnicity	Adults with Serious Mental Illnesses (SMI)				Children with Serious Emotional Disturbances (SED)			
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED

	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
American Indian / Alaska Native	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	0	0
Black / African American	0	0	0	0	0	0	0	0
Hawaiian / Pacific Islander	0	0	0	0	0	0	0	0
White	0	0	0	0	0	0	0	0
Hispanic *	0	0	0	0	0	0	0	0
More than one race	0	0	0	0	0	0	0	0
Not Available	242	54	131	26,769	348	0	0	13,047

Hispanic/Latino Origin	Adults with Serious Mental Illnesses (SMI)				Children with Serious Emotional Disturbances (SED)			
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
Hispanic / Latino origin	0	0	0	0	0	0	0	0
Non Hispanic / Latino	0	0	0	0	0	0	0	0
Not Available	242	54	131	26,769	348	0	0	13,047

	Adults with Serious Mental Illnesses (SMI)				Children with Serious Emotional Disturbances (SED)			
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
Do you monitor fidelity for this service?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
IF YES,								
What fidelity measure do you use?	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	

Who measures fidelity?	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
How often is fidelity measured?	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
Is the SAMHSA EBP Toolkit used to guide EBP Implementation?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
Have staff been specifically trained to implement the EBP?	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	

* Hispanic is part of the total served. Yes No

Comments on Data (overall):
See General Notes

Comments on Data (Supported Housing):

Comments on Data (Supported Employment):

Comments on Data (Assertive Community Treatment):

Comments on Data (Therapeutic Foster Care):

Comments on Data (Multi-Systemic Therapy):

Comments on Data (Family Functional Therapy):

* Hispanic: Only use the "Hispanic" row under Race if data for Hispanic as a Ethnic Origin are not available

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 19A (URS Table 16A) - Adults with Serious Mental Illness and Children with Serious Emotional Disturbances Receiving Evidence-Based Services for First Episode Psychosis

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

Program Name	Number of Adult Admissions into CSC Services During FY	Current Number of Adults with FEP Receiving CSC FEP Services	Number of Child/Adolescents Admissions into CSC Services During FY	Current number of Children/Adolecents with FEP Receiving CSC FEP Services	Do you monitor fidelity for this service?	What fidelity measure do you use?	Who measures fidelity?	How often is fidelity measured?	Has staff been specifically trained to implement the CSC EBP?
Western Arkansas Counseling and Guidance Center	12	2	2	0	Yes <input checked="" type="radio"/> No <input type="radio"/>				Yes <input type="radio"/> No <input checked="" type="radio"/>

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 20 (URS Table 17) - Profile of Adults with Serious Mental Illnesses Receiving Specific Services during the Year

This table provides a profile of adults with serious mental illness receiving specific evidence-based practices in the reporting year. The reporting year should be the latest state fiscal year for which data are available.

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

ADULTS WITH SERIOUS MENTAL ILLNESS				
	Receiving Family Psychoeducation	Receiving Integrated Treatment for Co-occurring Disorders (MH/SA)	Receiving Illness Self Management and Recovery	Receiving Medication Management
Age				
18-20	0	0	0	0
21-64	0	0	0	0
65-74	0	0	0	0
75+	0	0	0	0
Not Available	48	1,329	2,286	30
TOTAL	48	1,329	2,286	30

Gender				
Female	0	0	0	0
Male	0	0	0	0
Not Available	48	1,329	2,286	30

Race				
American Indian or Alaska Native	0	0	0	0
Asian	0	0	0	0
Black or African American	0	0	0	0
Native Hawaiian or Pacific Islander	0	0	0	0
White	0	0	0	0
Hispanic*	0	0	0	0
More Than One Race	0	0	0	0
Unknown	48	1,329	2,286	30

Hispanic / Latino Origin

Hispanic / Latino origin	0	0	0	0
Non Hispanic / Latino	0	0	0	0
Not Available	48	1,329	2,286	30

Do you monitor fidelity for this service?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
IF YES,				
What fidelity measure do you use?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who measures fidelity?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
How often is fidelity measured?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the SAMHSA EBP Toolkit used to guide EBP Implementation?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Have staff been specifically trained to implement the EBP?	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

*Hispanic is part of the total served. Yes No

Comments on Data (overall):
<input type="text" value="See General Notes"/>
Comments on Data (Family Psychoeducation):
<input type="text"/>
Comments on Data (Integrated Treatment for Co-occurring Disorders):

Comments on Data (Illness Self Management and Recovery):

Comments on Data (Medication Management):

**Hispanic: Only use the "Hispanic" row under Race if data for Hispanic as a Ethnic Origin are not available*

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 21 (URS Table 19A) - Profile of Criminal Justice or Juvenile Justice Involvement

1. The SAMHSA National Outcome Measure for Criminal Justice measures the change in Arrests over time. The DIG Outcomes Workgroup pilot tested 3 consumer self-report items that can be used to provide this information. If your state has used the 3 Consumer self-report items on criminal justice, you may report them here.
2. If your SMHA has data on Arrest records from alternatives sources, you may also report that here. If you only have data for arrests for consumers in this year, please report that in the T2 columns. If you can calculate the change in Arrests from T1 to T2, please use all those columns.
3. Please complete the check boxes at the bottom of the table to help explain the data sources that you used to complete this table.
4. Please tell us anything else that would help us to understand your indicator (e.g., list survey or MIS questions; describe linking methodology and data sources; specify time period for criminal justice involvement; explain whether treatment data are collected).

Expenditure Period Start Date: Expenditure Period End Date:

For Consumers in Service for at least 12 months

	T1			T2			T1 to T2 Change						Assessment of the Impact of Services					
	"T1" Prior 12 months (more than 1 year ago)			"T2" Most Recent 12 months (this year)			If Arrested at T1 (Prior 12 Months)			If Not Arrested at T1 (Prior 12 Months)			Over the last 12 months, my encounters with the police have...					
	Arrested	Not Arrested	No Response	Arrested	Not Arrested	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# Reduced (fewer encounters)	# Stayed the Same	# Increased	# Not Applicable	No Response	Total Responses
Total	13	456	78	13	453	81	7	5	1	6	443	7	45	20	7	380	95	547
Total Children/Youth (under age 18)	4	185	32	3	182	36	2	2	0	1	178	6	16	6	4	157	38	221
Male	1	80	10	1	78	12	0	1	0	1	77	2	6	1	2	71	11	91
Female	3	105	22	2	104	24	2	1	0	0	101	4	10	5	2	86	27	130
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Adults (age 18 and over)	9	271	46	10	271	45	5	3	1	5	265	1	29	14	3	223	57	326
Male	5	186	30	7	185	29	3	2	0	4	181	1	11	6	2	163	39	221
Female	2	82	16	1	83	16	0	1	1	1	81	0	15	8	0	59	18	100
Not Available	2	3	0	2	3	0	2	0	0	0	3	0	3	0	1	1	0	5

For Consumers Who Began Mental Health Services during the past 12 months

	T1	T2	T1 to T2 Change	Assessment of the Impact of Services
--	----	----	-----------------	--------------------------------------

	"T1" 12 months prior to beginning services			"T2" Since Beginning Services (this year)			If Arrested at T1 (Prior 12 Months)			If Not Arrested at T1 (Prior 12 Months)			Since starting to receive MH Services, my encounters with the police have...					
	Arrested	Not Arrested	No Response	Arrested	Not Arrested	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# Reduced (fewer encounters)	# Stayed the Same	# Increased	# Not Applicable	No Response	Total Responses
Total	20	231	4	10	246	0	4	16	0	4	227	0	21	15	2	201	15	254
Total Children/Youth (under age 18)	7	155	0	3	160	0	0	7	0	3	152	0	10	8	1	134	8	161
Male	3	76	0	2	77	0	0	3	0	2	74	0	4	6	0	65	3	78
Female	4	79	0	1	83	0	0	4	0	1	78	0	6	2	1	69	5	83
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Adults (age 18 and over)	13	76	4	7	86	0	4	9	0	1	75	0	11	7	1	67	7	93
Male	4	56	1	1	60	0	0	4	0	1	55	0	6	5	0	46	4	61
Female	8	18	3	6	23	0	4	4	0	0	18	0	4	2	1	19	3	29
Not Available	1	2	0	0	3	0	0	1	0	0	2	0	1	0	0	2	0	3

Time period in which services were received:

Please Describe the Sources of your Criminal Justice Data

Source of adult criminal justice information:

- 1. Consumer survey (recommended questions)
- 2. Other Consumer Survey: Please send copy of questions
- 3. Mental health MIS
- 4. State criminal justice agency
- 5. Local criminal justice agency
- 6. Other (specify)

Sources of children/youth criminal justice information:

- 1. Consumer survey (recommended questions)
- 2. Other Consumer Survey: Please send copy of questions
- 3. Mental health MIS
- 4. State criminal/juvenile justice agency
- 5. Local criminal/juvenile justice agency
- 6. Other (specify)

Measure of adult criminal justice involvement:

- 1. Arrests
- 2. Other (specify)

Measure of children/youth criminal justice involvement:

- 1. Arrests
- 2. Other (specify)

Mental health programs included:

- 1. Adults with SMI only
- 2. Other adults (specify)
- 3. Both (all adults)
- 1. Children with SED only
- 2. Other Children (specify)
- 3. Both (all Children)

Region for which adult data are reported:

- 1. The whole state
- 2. Less than the whole state (please describe)

Region for which children/youth data are reported:

- 1. The whole state
- 2. Less than the whole state (please describe)

What is the Total Number of Persons Surveyed or for whom Criminal Justice Data Are Reported

	Child/Adolescents	Adults
1. If data is from a survey, What is the total Number of people from which the sample was drawn?	18,300	37,833
2. What was your sample size? (How many individuals were selected for the sample)?	2,200	1,998
3. How many survey Contacts were made? (surveys to valid phone numbers or addresses)	1,869	1,701
4. How many surveys were completed? (survey forms returned or calls completed) If data source was not a Survey, How many persons were CJ data available for?	423	448
5. What was your response rate? (number of Completed surveys divided by number of Contacts)	23.0 %	26.0 %

State Comments/Notes:

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 22 (URS Table 19B) - Profile of Change in School Attendance

- The SAMHSA National Outcome Measure for School Attendance measures the change in days attended over time. The DIG Outcomes Workgroup pilot tested 3 consumer self-report items that can be used to provide this information. If your state has used the 3 Consumer Self-Report items on School Attendance, you may report them here.
- If your SMHA has data on School Attendance from alternative sources, you may also report that here. If you only have data for School attendance for consumers in this year, please report that in the T2 columns. If you can calculate the change in the Attendance from T1 to T2, please use all these columns.
- Please complete the check boxes at the bottom of the table to help explain the data sources that you used to complete this table.
- Please tell us anything else that would help us to understand your indicator (e. g., list survey or MIS questions; describe linking methodology and data sources; specify time period for criminal justice involvement; explain whether treatment data are collected).

Expenditure Period Start Date: Expenditure Period End Date:

For Consumers in Service for at least 12 months

T1			T2			T1 to T2 Change						Impact of Services						
"T1" Prior 12 months (more than 1 year ago)			"T2" Most Recent 12 months (this year)			If Suspended at T1 (Prior 12 Months)			If Not Suspended at T1 (Prior 12 Months)			Over the last 12 months, the number of days my child was in school have						
# Suspended or Expelled	# Not Suspended or Expelled	No Response	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# Greater (Improved)	# Stayed the Same	# Fewer days (gotten worse)	# Not Applicable	No Response	Total Responses	
20	167	38	25	163	37	12	8	0	13	154	0	38	47	9	70	61	225	
Gender																		
Male	6	74	13	7	74	12	4	2	0	3	71	0	13	23	5	31	21	93
Female	14	93	25	18	89	25	8	6	0	10	83	0	25	24	4	39	40	132
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Age																		
Under 18	20	163	38	24	160	37	12	8	0	12	151	0	37	46	9	68	61	221

For Consumers Who Began Mental Health Services during the past 12 months

T1			T2			T1 to T2 Change						Impact of Services						
"T1" 12 months prior to beginning services			"T2" Since Beginning Services (this year)			If Suspended at T1 (Prior 12 Months)			If Not Suspended at T1 (Prior 12 Months)			Since starting to receive MH Services, the number of days my child was in school have						
# Suspended or Expelled	# Not Suspended or Expelled	No Response	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# Greater (Improved)	# Stayed the Same	# Fewer days (gotten worse)	# Not Applicable	No Response	Total Responses	
25	142	1	15	151	2	11	13	1	4	138	0	40	37	5	68	18	168	
Gender																		
Male	9	72	0	3	78	0	3	6	0	0	72	0	17	17	3	37	7	81
Female	16	69	1	12	72	2	8	7	1	4	65	0	22	20	2	31	11	86
Not Available	0	1	0	0	1	0	0	0	0	0	1	0	1	0	0	0	0	1
Age																		
Under 18	25	137	1	15	146	2	11	13	1	4	133	0	38	37	5	66	17	163

- Source of School Attendance Information:**
1. Consumer survey (recommended items) 2. Other Survey: Please send us items 3. Mental health MIS
4. State Education Department 5. Local Schools/Education Agencies 6. Other (specify) _____
- Measure of School Attendance:**
1. School Attendance 2. Other (specify): _____
- Mental health programs include:**
1. Children with SED only 2. Other Children (specify) _____ 3. Both
- Region for which data are reported:**
1. The whole state 2. Less than the whole state (please describe) _____

What is the Total Number of Persons Surveyed or for whom School Attendance Data Are Reported?

Child/Adolescents:

- If data is from a survey, what is the total number of people from which the sample was drawn?

18,300

2. What was your sample size? (How many individuals were selected for the sample)?
3. How many survey contacts were made? (surveys to valid phone numbers or addresses)
4. How many surveys were completed? (survey forms returned or calls completed) If data source was not a Survey, how many persons were data available for?
5. What was your response rate? (number of Completed surveys divided by number of Contacts)

2,200
1,869
423
23.0 %

State Comments/Notes:

0930-0168 Approved: 06/07/2017 Expires: 06/30/2020

Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 23A (URS Table 20A) - Profile of Non-Forensic (Voluntary and Civil-Involuntary) Patients Readmission to Any State Psychiatric Inpatient Hospital within 30/180 Days of Discharge

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Total number of Discharges in Year	Number of Readmissions to ANY STATE Hospital within		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	146	10	13	6.85 %	8.90 %
Age					
0-12 years	0	0	0	0.00 %	0.00 %
13-17 years	12	1	1	8.33 %	8.33 %
18-20 years	17	0	1	0.00 %	5.88 %
21-64 years	112	8	10	7.14 %	8.93 %
65-74 years	5	1	1	20.00 %	20.00 %
75+ years	0	0	0	0.00 %	0.00 %
Not Available	0	0	0	0.00 %	0.00 %
Gender					
Female	49	3	4	6.12 %	8.16 %
Male	97	7	9	7.22 %	9.28 %
Gender Not Available	0	0	0	0.00 %	0.00 %
Race					
American Indian/Alaska Native	0	0	0	0.00 %	0.00 %
Asian	0	0	0	0.00 %	0.00 %
Black/African American	93	7	9	7.53 %	9.68 %
Hawaiian/Pacific Islander	0	0	0	0.00 %	0.00 %
White	47	3	4	6.38 %	8.51 %

Hispanic *	0	0	0	0.00 %	0.00 %
More than one race	1	0	0	0.00 %	0.00 %
Race Not Available	5	0	0	0.00 %	0.00 %
Hispanic/Latino Origin					
Hispanic/Latino Origin	3	0	0	0.00 %	0.00 %
Non Hispanic/Latino	140	10	13	7.14 %	9.29 %
Hispanic/Latino Origin Not Available	3	0	0	0.00 %	0.00 %

Are Forensic Patients Included? Yes No

Comments on Data:

**Hispanic: Only use the "Hispanic" row under Race if data for Hispanic as a Ethnic Origin are not available*

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 23B (URS Table 20B) - Profile of Forensic Patients Readmission to Any State Psychiatric Inpatient Hospital within 30/180 Days of Discharge

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Total number of Discharges in Year	Number of Readmissions to ANY STATE Hospital within		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	244	8	12	3.28 %	4.92 %
Age					
0-12 years	5	0	0	0.00 %	0.00 %
13-17 years	4	0	0	0.00 %	0.00 %
18-20 years	11	1	1	9.09 %	9.09 %
21-64 years	215	7	11	3.26 %	5.12 %
65-74 years	6	0	0	0.00 %	0.00 %
75+ years	3	0	0	0.00 %	0.00 %
Not Available	0	0	0	0.00 %	0.00 %
Gender					
Female	51	1	3	1.96 %	5.88 %
Male	193	7	9	3.63 %	4.66 %
Gender Not Available	0	0	0	0.00 %	0.00 %
Race					
American Indian/Alaska Native	0	0	0	0.00 %	0.00 %
Asian	0	0	0	0.00 %	0.00 %
Black/African American	111	5	8	4.50 %	7.21 %
Hawaiian/Pacific Islander	0	0	0	0.00 %	0.00 %
White	125	3	4	2.40 %	3.20 %

Hispanic *	0	0	0	0.00 %	0.00 %
More than one race	0	0	0	0.00 %	0.00 %
Race Not Available	8	0	0	0.00 %	0.00 %
Hispanic/Latino Origin					
Hispanic/Latino Origin	7	0	0	0.00 %	0.00 %
Non Hispanic/Latino	235	8	12	3.40 %	5.11 %
Hispanic/Latino Origin Not Available	2	0	0	0.00 %	0.00 %

Comments on Data:

**Hispanic: Only use the "Hispanic" row under Race if data for Hispanic as a Ethnic Origin are not available*

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Footnotes:

E. Performance Indicators and Accomplishments

MHBG Table 24 (URS Table 21) - Profile of Non-Forensic (Voluntary and Civil-Involuntary Patients) Readmission to Any Psychiatric Inpatient Care Unit (State Operated or Other Psychiatric Inpatient Unit) within 30/180 Days of Discharge

Expenditure Period Start Date: 7/1/2018 Expenditure Period End Date: 6/30/2019

	Total number of Discharges in Year	Number of Readmissions to ANY Psychiatric Inpatient Care Unit Hospital within		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	0	0	0	0.00 %	0.00 %
Age					
0-12 years	0	0	0	0.00 %	0.00 %
13-17 years	0	0	0	0.00 %	0.00 %
18-20 years	0	0	0	0.00 %	0.00 %
21-64 years	0	0	0	0.00 %	0.00 %
65-74 years	0	0	0	0.00 %	0.00 %
75+ years	0	0	0	0.00 %	0.00 %

Not Available	0	0	0	0.00 %	0.00 %
Gender					
Female	0	0	0	0.00 %	0.00 %
Male	0	0	0	0.00 %	0.00 %
Gender Not Available	0	0	0	0.00 %	0.00 %
Race					
American Indian/Alaska Native	0	0	0	0.00 %	0.00 %
Asian	0	0	0	0.00 %	0.00 %
Black/African American	0	0	0	0.00 %	0.00 %
Hawaiian/Pacific Islander	0	0	0	0.00 %	0.00 %
White	0	0	0	0.00 %	0.00 %
Hispanic *	0	0	0	0.00 %	0.00 %
More than one race	0	0	0	0.00 %	0.00 %
Race Not Available	0	0	0	0.00 %	0.00 %

Hispanic/Latino Origin					
Hispanic/Latino Origin	0	0	0	0.00 %	0.00 %
Non Hispanic/Latino	0	0	0	0.00 %	0.00 %
Hispanic/Latino Origin Not Available	0	0	0	0.00 %	0.00 %

1. Does this table include readmission from state Yes No
psychiatric hospitals?

2. Are Forensic Patients Included? Yes No

Comments on Data:

**Hispanic: Only use the "Hispanic" row under Race if data for Hispanic as a Ethnic Origin are not available*

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Footnotes: