I: State Information

State Information

State DUNS Number Number 825201486 **Expiration Date** I. State Agency to be the Grantee for the Block Grant Agency Name Idaho Department of Health and Welfare Organizational Unit Division of Behavioral Health Mailing Address POB 83720/3rd City Boise Zip Code 83720-0036 II. Contact Person for the Grantee of the Block Grant First Name Richard Last Name Armstrong Agency Name Idaho Department of Health and Welfare Mailing Address 450 West State Street Boise City Zip Code 83720-0036 Telephone 208-334-5500 Fax 208-334-6558 **Email Address** OsbornJ@dhw.idaho.gov III. State Expenditure Period (Most recent State exependiture period that is closed out) 7/1/2013 From 6/30/2014 To IV. Date Submitted NOTE: This field will be automatically populated when the application is submitted. Submission Date **Revision Date** V. Contact Person Responsible for Report Submission First Name Anne Last Name Bloxham Telephone 208-334-5527 Fax 208-332-5998 **Email Address** bloxhama@dhw.idaho.gov footnote:

II: Annual Report

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

Priority #: 1

Priority Area: Evidence-based Programming

Priority Type: SAP

Population(s): Other (Primary Prevention - General Population)

Goal of the priority area:

All recurring services/strategies funded with the Idaho 2014 and 2015 SAPT Block Grant will be from Idaho's Substance Abuse Prevention Evidence-Based Program List.

Strategies to attain the goal:

Priority will be given to funding prevention programs and practices on the approved list.

Indicator #:	1
Indicator:	Percentage of programs funded which are on the Idaho approved list.
Baseline Measurement:	Percentage of programs funded from list in 2013
First-year target/outcome measurement:	75% of programs funded are on list.
Second-year target/outcome measurement:	100% of programs funded are on list.
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
Idaho substance abuse prevention data syste	em
New Data Source(if needed):	
Description of Data:	
Name of program funded	
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target: 6 Achiev	ed Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cha	anges proposed to meet target:

Priority #: 2

Priority Area: Community-based processes

Priority Type: SAP

Population(s): Other

Goal of the priority area:

Idaho will increase the number of underage drinking prevention coalitions by 5% by June 30, 2015.

Strategies to attain the goal:

Provide technical assistance, leadership development training and underage drinking prevention resources to all community groups willing to address underage alcohol use.

nual Performance Indicators to measu	re goal success
Indicator #:	1
Indicator:	Number of Idaho coalitions undertaking underage drinking prevention activities.
Baseline Measurement:	Number of active Idaho coalitions as of October 1, 2013, is 15.
First-year target/outcome measurement:	Number of active Idaho coalitiosn as of June 1, 2014 will be 18.
Second-year target/outcome measurement:	Number of Idaho coalitions undertaking underage drinking activities as of June 1, 2014 wi be 21.
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
Community Coalitions of Idaho activities rep	oort.
New Data Source(if needed):	
Description of Data:	
Coalition activity Reports	
New Description of Data: (if needed)	
Data issues/caveats that affect outcome mea	sures:
No data issues foreseen.	
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target:	
Reason why target was not achieved, and cha	anges proposed to meet target
Reason will target was not achieved, and the	anges proposed to meet target.
How first year target was achieved (optional)	:

Priority #: 3

Priority Area: Pregnant Women and Women with Dependent Children

Priority Type: SAT

Population(s): PWWDC

Goal of the priority area:

Idaho will develop formal tracking systems and reports to record the number of Pregnant Women and Women with Dependent Children receiving specialized care, as established under the SAPT Block Grant and the cost of such care.

Idaho will establish electronic data collection and reporting systems to capture data on PWWC clients.

Priority #: 4

Priority Area: Pregnant Women and Women with Dependent Children

Priority Type: SAT

Population(s): PWWDC

Goal of the priority area:

Idaho will identify a new specialized Pregnant Women and Women with Dependent Children (PWWC) Provider by June 30, 2014

Strategies to attain the goal:

Idaho will contact providers serving pregnant women and women involved in child protection to identify an agency willing to deliver this specialty service.

Annual Performance Indicators to measure goal success Indicator #: Indicator: Increase number of PWWC specialty providers Baseline Measurement: Number of PWWC specialty providers as of July 1, 2013 An evaluation of network providers is completed to identify agencies willing and able to First-year target/outcome measurement: meet PWWDC requirements. Second-year target/outcome measurement: Select one network and supply technical assistance needed to enable agency to meet all PWWDC requirements. New Second-year target/outcome measurement (if needed): Data Source: Operations Unit, Substance Use Disorders (SUD) Report New Data Source (if needed): Description of Data: Number of SUD providers contacted Number of PWWC specialty providers 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 Achieved Not Achieved (if not achieved, explain why) First Year Target: Reason why target was not achieved, and changes proposed to meet target: How first year target was achieved (optional):

Priority #: 5

Priority Area: Substance Use Disorder Treatment Clients

Priority Type: SAT

Population(s): HIV EIS

Goal of the priority area:

The Division of Behavioral Health will require that all individuals seeking substance use disorder treatment services to be assessed for HIV/AIDs risks.

Strategies to attain the goal:

Require all Division of Behavioral Health-funded providers assess substance use disorder treatment clients for HIV/AIDS.

Indicator: All SSA-funded Substance Use Disorders clients are assessed for HIV/AIDS. Baseline Measurement: Percentage of clients assessed for HIV/AIDS in Idaho Fiscal Year 2013. First-year target/outcome measurement: 50% of clients will be assessed for HIV/AIDS. Second-year target/outcome measurement: 100% of clients assessed for HIV/AIDS. New Second-year target/outcome measurement (if needed): Data Source: WITS data system New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDS New Description of Data: (if needed) Data issues/caveats that affect outcome measures: New Data issues/caveats that affect outcome measures:		Indicator #:
First-year target/outcome measurement: 50% of clients will be assessed for HIV/AIDS. Second-year target/outcome measurement: 100% of clients assessed for HIV/AIDS. New Second-year target/outcome measurement (if needed): Data Source: WITS data system New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDS New Description of Data:(if needed) Data issues/caveats that affect outcome measures:	rs clients are assessed for HIV/AIDS.	Indicator:
Second-year target/outcome measurement: 100% of clients assessed for HIV/AIDS. New Second-year target/outcome measurement(if needed): Data Source: WITS data system New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDS New Description of Data:(if needed) Data issues/caveats that affect outcome measures:	'AIDS in Idaho Fiscal Year 2013.	Baseline Measurement:
New Second-year target/outcome measurement (if needed): Data Source: WITS data system New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDs New Description of Data: (if needed) Data issues/caveats that affect outcome measures:	/AIDS.	First-year target/outcome measurement:
Data Source: WITS data system New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDs New Description of Data:(if needed) Data issues/caveats that affect outcome measures:		Second-year target/outcome measurement:
WITS data system New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDs New Description of Data:(if needed) Data issues/caveats that affect outcome measures:		New Second-year target/outcome measuren
New Data Source(if needed): Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDs New Description of Data: (if needed) Data issues/caveats that affect outcome measures:		Data Source:
Description of Data: Number of clients whose assessment record indicates they were assessed for HIV/AIDs New Description of Data: (if needed) Data issues/caveats that affect outcome measures:		WITS data system
Number of clients whose assessment record indicates they were assessed for HIV/AIDs New Description of Data: (if needed) Data issues/caveats that affect outcome measures:		New Data Source(if needed):
New Description of Data: (if needed) Data issues/caveats that affect outcome measures:		Description of Data:
Data issues/caveats that affect outcome measures:	Ds	Number of clients whose assessment record
		New Description of Data:(if needed)
New Data issues/caveats that affect outcome measures:		Data issues/caveats that affect outcome mea
		New Data issues/caveats that affect outcome
Report of Progress Toward Goal Attainment		Report of Progress Toward Go
First Year Target: Sometimes Achieved (if not achieved, explain why)	hieved (if not achieved,explain why)	First Year Target: 6 Achie
Reason why target was not achieved, and changes proposed to meet target:		Reason why target was not achieved, and ch
How first year target was achieved <i>(optional)</i> :		How first year target was achieved <i>(optional</i>

Priority #: 6

Priority Area: All Substance Use Disorder Clients

Priority Type: SAT

Population(s): TB

Goal of the priority area:

The Division of Behavioral Health will require that all individuals seeking substance use disorder treatment services to be assessed for tuberculosis.

Strategies to attain the goal:

Require all Division of Behavioral Health-funded providers assess substance use disorder treatment clients for tuberculosis.

Annual Performance Indicators to measure goal success

1 1 1 1	
Indicator #:	1
Indicator:	Percentage of Substance Use Disorders clients who are assessed for TB.
Baseline Measurement:	Percentage of clients assessed for TB in Idaho State Fiscal Year 2013.
First-year target/outcome measurement:	50% of clients assessed for TB in Idaho State Fiscal Year 2014.
Second-year target/outcome measurement:	100 % of clients assessed for TB in Idaho State Fiscal Year 2015.
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
WITS data system	
New Data Source(if needed):	
Description of Data:	
Number of clients assessed for TB	
New Description of Data: (if needed)	
Data issues/caveats that affect outcome mea	sures:
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target: 6 Achiev	ed Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved (optional)	:

Priority #: 7

Priority Area: IV Drug Users

Priority Type: SAP
Population(s): IVDUs

Goal of the priority area:

Idaho will develop a process to ensure that individuals served as IVDU clients meet established requirements by June 30, 2015.

Strategies to attain the goal:

Develop a process for evaluating client intravenous drug use by June 30, 2014.

Annual Performance Indicators to measure goal success

Indicator #:

Indicator: A process for evaluating client intravenous drug use is developed by June 30, 2014. 50% of

SUD clients will be assessed for IV drug use in FY 2014.

Baseline Measurement: No process exitst

First-year target/outcome measurement: Develop a process for evaluating client intravenous drug use by June 30, 2014.

Second-year target/outcome measurement:

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

Data Source:

New Data Source(<i>if neede</i>	ed):		
Description of Data:			
Written process is comple	eted.		
New Description of Data:((if needed)		
Data issues/caveats that a	ffect outcome measures:		
New Data issues/caveats t	hat affect outcome measures:		
Report of Progres	s Toward Goal Attainm	nent	
First Year Target:	Achieved	Not Achieved (if not achieved,explain why)	
Reason why target was no	ot achieved, and changes propose	ed to meet target:	

Priority #: 8

Priority Area:

Priority Type: MHS

Population(s): SMI, SED

Goal of the priority area:

Idaho's suicide hotline will expand its capacity to serve Idaho citizens who are in crisis.

Strategies to attain the goal:

Suicide hotline capacity will be expanded through increased hours of operation and increased staff during peak operating hours.

Annual Performance Indicators to measure goal success:

Indicator #: 1

Indicator: Suicide hotline days of operation and number of staff per shift.

Baseline Measurement: Suicide hotline operates for four days a week with two staff as of March 2013.

First-year target/outcome measurement: Idaho's suicide hotline hours of operation will expand from Monday through Friday, 9 a.m.

to 5 p.m. to seven days a week by June 30, 2014.

Second-year target/outcome measurement: Idaho's suicide hotline number of staff per shift will expand from two to three by June 30,

2015.

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

Data Source:

Mountain States Group runs the suicide hotline program.

New Data Source (if needed):

Description of Data:

Mountain States Group will provide information as to suicide hotline hours and days of operation. Mountain States Group will provide information as to number of staff per shift.

NA			
New Data issues/caveats t	hat affect outcome measures:		
Dan ant of Duagues	a Tayyand Caal Attains		
Report of Progres	s Toward Goal Attainr	ment	
First Year Target:	Achieved	Not Achieved (if not achieved,explain why)	
Reason why target was no	t achieved, and changes propos	sed to meet target:	
How first year target was a	achieved (optional)		
	(

Priority Area:

MHS Priority Type: Population(s): SMI

Goal of the priority area:

The Division of Behavioral Health will enhance the implementation of Assertive Community Treatment (ACT) by providing training to ACT staff and community partners.

Strategies to attain the goal:

The Division of Behavioral Health will sponsor an ACT conference to provide evidence based training opportunities for ACT staff and community partners.

Annual Performance Indicators to measure goal success:

Indicator #:

Indicator: Training provided to Assertive Community Treatment staff and community partners.

Baseline Measurement: No statewide Assertive Community Treatment training has been provided for the past four

years.

First-year target/outcome measurement: The Division of Behavioral Health will implement a statewide Assertive Community

Treatment (ACT) conference for behavioral health, corrections and court personnel with

workshop tracks related to ACT, recovery and trauma by January 1, 2014.

Second-year target/outcome measurement: NA

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

Data Source:

Division of Behavioral Health.

New Data Source (if needed):

Description of Data:

Implementation of a statewide Assertive Community Treatment (ACT) conference to provide evidence based training opportunities to ACT staff and community partners.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

None

	al Attainment
First Year Target: 6 Achiev	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	anges proposed to meet target:
How first year target was achieved (optional)):
prity #: 10	
ority Area:	
ority Type: MHS	
oulation(s): SED	
al of the priority area:	
e Division of Behavioral Health will improve the co thout payment resources.	onsistency and standardization of Children's Mental Health services delivery to eligible childre
ategies to attain the goal:	
e Division of Behavioral Health will contract with rvices to eligible children without payment resour	a Children's Mental Health Management Services Contractor to provide Children's Mental Heaces.
Annual Performance Indicators to measu	re goal success
Annual Performance Indicators to measu	
Indicator #:	1
Indicator #:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other
Indicator #: Indicator:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources . As of March 2013, the Division of Behavioral Health did not contract with a CMH Services
Indicator #: Indicator: Baseline Measurement:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources. As of March 2013, the Division of Behavioral Health did not contract with a CMH Services contractor for CMH services. The Division of Behavioral Health will create a Request for Proposals and award a contract to a Children's Mental Health Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses
Indicator #: Indicator: Baseline Measurement: First-year target/outcome measurement:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources. As of March 2013, the Division of Behavioral Health did not contract with a CMH Services contractor for CMH services. The Division of Behavioral Health will create a Request for Proposals and award a contract to a Children's Mental Health Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by January 1, 2014. The Division of Behavioral Health will transition Children's Mental Health service delivery to the Children's Mental Health Services contractor and implement written quality assurance strategies to guide service delivery to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by June 30, 2015.
Indicator #: Indicator: Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources. As of March 2013, the Division of Behavioral Health did not contract with a CMH Services contractor for CMH services. The Division of Behavioral Health will create a Request for Proposals and award a contract to a Children's Mental Health Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by January 1, 2014. The Division of Behavioral Health will transition Children's Mental Health service delivery to the Children's Mental Health Services contractor and implement written quality assurance strategies to guide service delivery to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by June 30, 2015.
Indicator #: Indicator: Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources. As of March 2013, the Division of Behavioral Health did not contract with a CMH Services contractor for CMH services. The Division of Behavioral Health will create a Request for Proposals and award a contract to a Children's Mental Health Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by January 1, 2014. The Division of Behavioral Health will transition Children's Mental Health service delivery to the Children's Mental Health Services contractor and implement written quality assurance strategies to guide service delivery to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by June 30, 2015. Thent (if needed):
Indicator #: Indicator: Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement: Data Source:	The Division of Behavioral Health will contract with a Children's Mental Health (CMH) Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources. As of March 2013, the Division of Behavioral Health did not contract with a CMH Services contractor for CMH services. The Division of Behavioral Health will create a Request for Proposals and award a contract to a Children's Mental Health Management Services Contractor to provide Children's Mental Health services to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by January 1, 2014. The Division of Behavioral Health will transition Children's Mental Health service delivery to the Children's Mental Health Services contractor and implement written quality assurance strategies to guide service delivery to eligible children with serious emotional disturbance diagnoses who have no insurance or other payment resources by June 30, 2015. Thent (if needed):

Data issues/caveats that affect outcome measures:

New Description of Data: (if needed)

New Data iss	sues/caveats that affect outcome	e measures:
Report o	f Progress Toward Go	al Attainment
First Year T	· ·	
Reason why	target was not achieved, and ch	langes proposed to meet target:
however the negotiation Health will p approval of negotiation	e Request for Proposal has not b is related to the Jeff D Lawsuit w proceed with releasing the Requ the settlement agreement. The I	oped a Request for Proposal for a Children's Mental Health Management Services Contractor been published. The Request for Proposal is being held due to the ongoing settlement which have not yet been finalized. The decision as to whether the Division of Behavioral lest for Proposal as it is currently written will be contingent upon the negotiations and final Division of Behavioral Health remains an active participant in the Jeff D Lawsuit settlement aluating and planning for the provision of Children's Mental Health Services for eligible
How first year	ar target was achieved (optional)):
ity #:	11	
ity Area:	Substance Use Disorders (SUE	D) Professionals Training
ity Type:	SAT	
ılation(s):	Other	
of the priority a	nrea:	
Division of Beha	avioral Health will implement a re	esource portal to provide treatment professionals with current research and resources on trauma
egies to attain t	he goal:	
egies to attain t		
tal is developed.		ire goal success
tal is developed.		ire goal success
tal is developed. Annual Perfor		
tal is developed. Annual Perfor Indicator #:	mance Indicators to measu	1
Annual Perfor Indicator #: Indicator: Baseline Mea	mance Indicators to measu	1 Portal is available for Substance Use Disorders (SUD) Professionals to access
Annual Perfor Indicator #: Indicator: Baseline Mea	mance Indicators to measu	1 Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year	mance Indicators to measu asurement: get/outcome measurement:	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year	mance Indicators to measurasurement: get/outcome measurement: target/outcome measurement: -year target/outcome measurem	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year New Second Data Source:	mance Indicators to measurasurement: get/outcome measurement: target/outcome measurement: -year target/outcome measurem	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals ment (if needed):
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year New Second Data Source: Operations	mance Indicators to measurement: get/outcome measurement: target/outcome measurement: -year target/outcome measurem	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals ment (if needed):
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year New Second Data Source: Operations	mance Indicators to measurement: get/outcome measurement: target/outcome measurement: -year target/outcome measurem Unit, Substance Use Disorders Augurce (if needed):	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals ment (if needed):
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year New Second Data Source: Operations New Data So	mance Indicators to measurement: get/outcome measurement: target/outcome measurement: -year target/outcome measurem Unit, Substance Use Disorders Acource(if needed): of Data:	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals ment (if needed):
Annual Perfor Indicator #: Indicator: Baseline Mea First-year tar Second-year New Second Data Source: Operations New Data So Description of	mance Indicators to measurement: get/outcome measurement: target/outcome measurement: -year target/outcome measurem Unit, Substance Use Disorders Acource(if needed): of Data:	Portal is available for Substance Use Disorders (SUD) Professionals to access No portal currently exists Portal is developed Portal is accessable to SUD Professionals ment (if needed):

New Data issues/caveats that affect outcome measures:

First Year Target:	s Toward Goal Attainment B Achieved Not Achieved (if not achieved,explain why)	
_	t achieved, and changes proposed to meet target:	
How first year target was		
ity #: 12		
ity Area: ity Type: SAP		
llation(s): Other		
of the priority area:		
	in collaboration with the Idaho State Police, Office of Drug Policy, Supreme Court, Department of Juvenile Complement an alcohol and other drug use youth survey system by June 30, 2015.	re
egies to attain the goal:		
vey will be developed and te	ed	
vey implementation plan wit		
Annual Performance Ind	cators to measure goal success	
Indicator #:	1	
Indicator:	Youth survey is implemented	
Baseline Measurement:	No youth survey exists in Idaho	
First-year target/outcom	measurement: Survey is developed and tested	
Second-year target/outcome	me measurement: Survey implementation plan is established and survey is implemented	
New Second-year target	utcome measurement (if needed):	
Data Source:		
State Epidemiological C	tcomes Workgroup Report	
New Data Source(if need	d):	
Description of Data:		
Survey sites and respons	summary data.	
New Description of Data	if needed)	
Data issues/caveats that	fect outcome measures:	_
	nat affect outcome measures:	
New Data issues/caveats		
New Data issues/caveats		
	s Toward Goal Attainment	
	S Toward Goal Attainment B Achieved (If not achieved,explain why)	

Priority #: 13

Priority Area:

Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, adults and children with substance use disorder diagnoses)

Goal of the priority area:

The Division of Behavioral Health will support the establishment/infrastructure development of a behavioral health planning council and regional behavioral health boards that include representation from both mental health and substance use disorders stakeholders.

Strategies to attain the goal:

The Division of Behavioral Health will provide support and consultation to the State Councils and regional boards as they work to merge into combined behavioral health entities.

Indicator #:	1
Indicator:	Establishment of a behavioral health council and behavioral health regional boards with mental health and substance use disorder representation.
Baseline Measurement:	Separate mental health and substance use disorder councils and regional boards.
First-year target/outcome measurement:	The State Planning Council on Mental Health will transition to the State Behavioral Health Council with representation from mental health and substance use disorders by June 30, 2014.
Second-year target/outcome measurement:	The State Behavioral Health Council will develop readiness criteria to assess Regional Behavioral Health Boards and their ability to provide guidance on behavioral health servic delivery in their respective regions, and the Council will assess each regional Board with this criteria by June 30, 2015.
New Second-year target/outcome measurem	nent(if needed):
Data Source:	
Division of Behavioral Health, Behavioral He	ealth Planning Council, regional behavioral health boards.
New Data Source(if needed):	
Description of Data:	
Establishment of council and regional beharments Behavioral Health boards.	vioral health boards. Council development of readiness criteria to assess Regional
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	isures:
None.	
New Data issues/caveats that affect outcome	e measures:
Device the filtren T	-1 ^11-!
Report of Progress Toward Go	
First Year Target: 6 Achiev	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	anges proposed to meet target:

Priority Area:

Priority Type: SAT, MHS

Population(s):

Goal of the priority area:

The Division of Behavioral Health will provide guidance on screening and referral for those with behavioral and primary health care needs.

Strategies to attain the goal:

The Division of Behavioral Health will develop a policy and procedures for screening and referring those with behavioral and primary health care needs.

Indicator #:	1
Indicator:	Policies for screening and referring those with behavioral and primary health care need
Baseline Measurement:	No existing policies for screening and referring those with behavioral and primary heal care needs.
First-year target/outcome measurement:	None.
Second-year target/outcome measurement:	The Division of Behavioral Health will develop a policy and procedures for screening an referring those receiving behavioral health care who have primary health care needs to appropriate community resources, and all staff will be trained on this policy by June 30, 2015.
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
Division of Behavioral Health.	
New Data Source(if needed):	
Description of Data:	
Written policies and procedures for screenin care needs to appropriate community resour	g and referring those receiving behavioral health care services who have primary health ces.
New Description of Data: (if needed)	
Data issues/caveats that affect outcome meas	sures:
None.	
N. D. I.	measures:
New Data Issues/caveats that affect outcome	
New Data issues/caveats that affect outcome Report of Progress Toward Goa	al Attainment

Priority #: 15

Priority Area:

Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Adults and children with substance use disorder diagnoses)

Goal of the priority area:

The Division of Behavioral Health will expand system availability of the Web Infrastructure for Treatment Services (WITS) electronic health record system for the Substance Use Disorder (SUD) statewide treatment provider network.

Strategies to attain the goal:

The Division of Behavioral Health will update the WITS user guide, training and data capture for the SUD treatment provider network.

Indicator #:	1
Indicator:	Web Infrastructure for Treatment Services (WITS) user guide and training for SUD treatment providers.
Baseline Measurement:	There is a WITS user guide but it is not specific to SUD treatment providers.
First-year target/outcome measurement:	The Division of Behavioral Health will update the WITS user guide, training and data capture for SUD treatment providers by June 30, 2014.
Second-year target/outcome measurement:	None.
New Second-year target/outcome measurem	nent(if needed):
Data Source:	
Division of Behavioral Health.	
New Data Source(if needed):	
Description of Data:	
WITS, WITS User Guide, training events offer	red to SUD treatment providers.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
None.	
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target: 6 Achiev	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	anges proposed to meet target:
How first year target was achieved <i>(optional)</i>	t:
, ,	

Priority #: 16

Priority Area:

Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Adults and children with substance use disorder diagnoses)

Goal of the priority area:

The Division of Behavioral Health will be able to report mental health and substance use disorder expenditures by services for block grant reporting.

Strategies to attain the goal:

The Division of Behavioral Health's data, quality assurance and policy units will collaborate to identify and implement a strategy to operationally define and trace service units and expenditures for block grant reporting.

Annual Performance Indicators to measure goal success Indicator #: Indicator: Ability to report mental health and substance use disorder expenditures by service data for block grant reporting. Baseline Measurement: Idaho is not able to accurately report mental health and substance use disorder expenditures by service data for block grant reporting. First-year target/outcome measurement: None. Second-year target/outcome measurement: The Division of Behavioral Health will build capacity for block grant reporting on mental health and substance use disorder expenditures by service data by June 30, 2015. New Second-year target/outcome measurement (if needed): Data Source: Division of Behavioral Health. New Data Source (if needed): Description of Data: Mental health and substance use disorder expenditures by service data for block grant reporting. New Description of Data: (if needed) Data issues/caveats that affect outcome measures: None. 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): Priority #: 17 Priority Area: Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Adults and children with substance use disorder diagnoses)

Goal of the priority area:

The Division of Behavioral Health's Web Infrastructure for Treatment Services (WITS) system will be adapted to include ICD-10 codes.

Strategies to attain the goal:

The Division of Behavioral Health will work with the vendor FEI to update WITS with ICD-10 codes.

Annual Performance Indicators to measure goal success

Indicator #:

Ability to use ICD-10 codes through the Web Infrastructure for Treatment Services (WITS) Indicator:

data system.

Baseline Measurement: Idaho is not able to use ICD-10 codes through the WITS system.

First-year target/outcome measurement:	None.
Second-year target/outcome measurement:	The Division of Behavioral Health will work with the vendor FEI to update the Web Infrastructure for Treatment Services (WITS) system with ICD-10 codes by June 30, 2015.
New Second-year target/outcome measurem	nent(if needed):
Data Source:	
Division of Behavioral Health and WITS.	
New Data Source(if needed):	
Description of Data:	
ICD-10 code capability through the WITS sys	tem.
New Description of Data: (if needed)	
Data issues/caveats that affect outcome mea	sures:
None.	
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target: 6 Achiev	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved (optional)	h
Tion first year target was acriteved (optional)	

Priority #: 18

Priority Area:

Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Adults and children with substance use disorder diagnoses)

Goal of the priority area:

The Division of Behavioral Health will build relationships with Idaho's Tribes.

Strategies to attain the goal:

Participate in regularly scheduled meetings with Idaho Tribes.

Annual Performance Indicators to measure goal success:

Indicator #: 1

Indicator: Inclusion of Tribal input into behavioral health system service delivery.

Baseline Measurement: Ongoing inclusion of Tribal input into behavioral health system service delivery.

First-year target/outcome measurement: THe Division of Behavioral Health Tribal liaison initiates contact with Idaho's tribes to

establish relationships with Tribal Leaders.

Second-year target/outcome measurement: The Division of Behavioral Health's Tribal liaison will participate in regularly scheduled

meetings with Tribal members to improve Tribal relationships and invite input into behavioral health service planning in Idaho. The Division's Tribal liaison will work to

develop relationships with Idaho Tribes by June 30, 2015.

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

Data Source:

New Data :	Source(if neede	d):				
Description	n of Data:					
Number o	of meetings and	number of Tribes involved in jo	oint meetings.			
New Descr	iption of Data:(if needed)				
Data issues	s/caveats that a	ffect outcome measures:				
None.						
New Data i	issues/caveats t	hat affect outcome measures:				
Report	of Progres	s Toward Goal Attain	ment			
First Year	Target:	Achieved	i	€ Not	Achieved (if not achieved, explain why)	
Reason wh	ıy target was no	t achieved, and changes propo	osed to meet tar	get:		
How first y	vear target was a	achieved <i>(optional)</i> :				
#:	19					
Area:						

Priority Type:

Population(s): Other (Adolescents w/SA and/or MH, Adults and children with substance use disorder diagnoses)

Goal of the priority area:

Increase substance use disorder (SUDS) program integrity, consistency and standardization.

Strategies to attain the goal:

Establish SUDS program integrity standards and service procedures.

Annual Performance Indicators to measure goal success-

Indicator #:

Indicator: Substance use disorder (SUD) program integrity.

Baseline Measurement: There are no clear, written SUD program integrity standards or service procedures.

First-year target/outcome measurement: The Division of Behavioral Health will establish program integrity standards and service

procedures for Substance Use Disorder treatment by June 30, 2014.

Second-year target/outcome measurement:

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

Data Source:

Division of Behavioral Health - policy unit and quality assurance unit.

New Data Source (if needed):

Description of Data:

Written SUD program integrity standards and service procedures.

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

None.

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):

Priority #: 20

Priority Area:

Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Criminal/Juvenile Justice, Adults and children with substance use disorder

diagnoses)

Goal of the priority area:

The Division of Behavioral Health will collaborate with courts and the Idaho Department of Correction (IDOC) to screen offenders for behavioral health diagnoses and link them to available and appropriate behavioral health services.

Strategies to attain the goal:

The Division of Behavioral Health will hire additional staff to collaborate with courts and IDOC to identify strategies to screen offenders and link them to available services.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Division of Behavioral Health collaboration with courts and Idaho Department of

Correction (IDOC) to screen offenders for behavioral health diagnoses and link them to

appropriate behavioral health services.

Baseline Measurement: Division of Behavioral Health staff assigned to collaborate with courts and IDOC and

strategies to screen and refer offenders with behavioral health diagnoses.

First-year target/outcome measurement: The Division of Behavioral Health will hire three staff and develop a process to collaborate

with courts and IDOC to strategize methods to screen offenders for behavioral health diagnoses and link them to available and appropriate behavioral health services by June

30, 2014.

Second-year target/outcome measurement: None

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

Data Source:

Division of Behavioral Health.

New Data Source (if needed):

Description of Data:

Staff hired to work with courts and IDOC to develop strategies to screen and refer offenders with behavioral health diagnoses. Procedures that are developed for screening and referral.

New Description of Data: (if needed)

Data issues/caveats that affect outcome mea	sures:					
None.						
New Data issues/caveats that affect outcome measures:						
Report of Progress Toward Goal Attainment						
First Year Target: 6 Achiev	ved Not Achieved (if not achieved,explain why)					
Reason why target was not achieved, and ch	anges proposed to meet target:					
How first year target was achieved (optional)						
Priority #: 21						
Priority Area:						
Priority Type: SAT, MHS						
Population(s): SMI, SED, Other (Adolescents	w/SA and/or MH, Adults and children with substance use disorder diagnoses)					
Goal of the priority area:						
The Division of Behavioral Health will develop behav	rioral health standards for service delivery.					
Strategies to attain the goal:						
	g standards manuals and develop behavioral health standards for service delivery.					
—Annual Performance Indicators to measu	re goal success					
Indicator #:	1					
Indicator:	Behavioral health standards for service delivery.					
Baseline Measurement:	The Division of Behavioral Health does not have written behavioral health standards for service delivery.					
First-year target/outcome measurement:	The Division of Behavioral Health will review several existing standards manuals (e.g., Comprehensive Accreditation Manual for Behavioral Health Care, Joint Commission for Accreditation of Health Organizations, etc.) to develop behavioral health standards for behavioral health services delivery in at least five service areas by June 30, 2014.					
Second-year target/outcome measurement:	The Division of Behavioral Health will review several existing standards manuals (e.g., Comprehensive Accreditation Manual for Behavioral Health Care, Joint Commission for Accreditation of Health Organizations, etc.) to develop behavioral health standards for behavioral health services delivery in at least eight service areas by June 30, 2015.					
New Second-year target/outcome measurem	nent(if needed):					
Data Source:						
Division of Behavioral Health.						
New Data Source(if needed):						
Description of Data:						
Written behavioral health standards for serv	ice delivery.					
New Description of Data: (if needed)						
Data issues/caveats that affect outcome mea	sures:					
None.						

Report of Progress Toward Goa	al Attainment
First Year Target: 6 Achieve	ed Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved (optional):	
ty #: 22	
ty Area:	
ty Type: SAT	
ation(s): Other (Adults and children wit	th substance use disorder diagnoses)
of the priority area:	
elop a cadre of individuals with substance use di hing.	sorder (SUDS) diagnoses who are able to demonstrate recovery and resilience through recov
gies to attain the goal:	
ide recovery coaching to Idaho citizens with sub-	stance use disorders (SUDS).
nnual Performance Indicators to measur	re mal success
middir errormance maleators to measur	re godi success
Indicator #:	1
Indicator:	Individuals with substance use disorder (SUD) diagnoses demonstrating recovery and resilience through recovery coaching.
Indicator: Baseline Measurement:	
	resilience through recovery coaching.
Baseline Measurement:	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery
Baseline Measurement: First-year target/outcome measurement:	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015.
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement:	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015.
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015.
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement Data Source:	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015.
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement Data Source: Division of Behavioral Health.	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015.
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement Data Source: Division of Behavioral Health. New Data Source(if needed): Description of Data:	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015. ent (if needed): ses trained in recovery coaching. Establishment of recovery coaching services as a life skills
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement: Data Source: Division of Behavioral Health. New Data Source(if needed): Description of Data: Numbers of Idaho citizens with SUD diagnos	resilience through recovery coaching. There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015. ent (if needed): ses trained in recovery coaching. Establishment of recovery coaching services as a life skills
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement: Data Source: Division of Behavioral Health. New Data Source(if needed): Description of Data: Numbers of Idaho citizens with SUD diagnos service under Recovery Support Services in all	There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015. eent (if needed): ses trained in recovery coaching. Establishment of recovery coaching services as a life skills ill regions.
Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement: Data Source: Division of Behavioral Health. New Data Source(if needed): Description of Data: Numbers of Idaho citizens with SUD diagnos service under Recovery Support Services in all New Description of Data:(if needed)	There are no SUD diagnosed individuals in Idaho who are trained in recovery coaching. The Division of Behavioral Health will train at least thirty (30) individuals in recovery coaching by June 30, 2014. The Division of Behavioral Health will establish recovery coaching services as a life skills service under Recovery Support Services in all regions by June 30, 2015. eent (if needed): ses trained in recovery coaching. Establishment of recovery coaching services as a life skills ill regions.

	Reason why to	arget was not achieved, and cha	anges proposed to meet target:
	How first year	target was achieved (optional)	
	,,	00	
	y #:	23	
	y Area: y Type:	SAT, MHS	
			w/SA and/or MIL Adults and shildren with substance use disorder diagnoses)
	ation(s):		w/SA and/or MH, Adults and children with substance use disorder diagnoses)
	f the priority ar		
		or Benavioral Health service dell Statistical Manual V (DSM-V) gu	ivery staff are adequately trained to assess, diagnose and develop treatment plans according idelines.
eg	gies to attain th	e goal:	
vic	de statewide tra	aining on DSM-V guidelines.	
٩n	nnual Perforn	nance Indicators to measu	re goal success
	Indicator #:		1 Division of Pohaviaral Health staff shillity to assess diagnoss and dayslan treatment plans
	Indicator:		Division of Behavioral Health staff ability to assess, diagnose and develop treatment plans based on the Diagnostic and Statistical Manual V (DSM-V) guidelines.
	Baseline Meas	surement:	DSM-V has not yet been released and no staff have been trained adequately on DSM-V guidelines.
	First-year targ	get/outcome measurement:	None.
	Second-year t	arget/outcome measurement:	The Division of Behavioral Health will provide statewide training in assessment, diagnosis and treatment planning according to the new DSM-V guidelines by June 30, 2015.
	New Second-	year target/outcome measurem	ent(if needed):
	Data Source:		
	Division of B	ehavioral Health.	
	New Data Sou	urce(<i>if needed</i>):	
	Description of	f Data:	
	Number of re	egional training events on DSM-	V guidelines. Number of staff trained on DSM-IV guidelines.
	New Descript	ion of Data:(if needed)	
	Data issues/or	aveats that affect outcome meas	NIFOC:
		aveats that affect outcome meas	Sul 63.
	None.		
	New Data issu	ues/caveats that affect outcome	measures:
	Report of	Progress Toward Goa	al Attainment
	First Year Ta		
			anges proposed to meet target:
	Reason willy to	argot was not define you, and the	anges proposed to moet target.
	How first year	target was achieved (optional):	

OMB No. 0930-0168 Approved: 05/21/2013 Expires: 05/31/2016

Priority Area:

Priority Type: SAT, MHS

Population(s): Other (Adults and children with substance use disorder diagnoses)

Goal of the priority area:

Newly established regional behavioral health boards will be provided with tools that help them to identify regional gaps and plan ways to address identified issues.

Strategies to attain the goal:

The Division of Behavioral Health will facilitate the development of an Action Plan toolkit curriculum that outlines ways to identify gaps, create action plans to address those gaps, implement action plans and collect outcome data.

Indicator #:	1
Indicator:	Action plan toolkit to facilitate ability to identify gaps, create and implement action plans to address gaps and collect outcome data.
Baseline Measurement:	The Division of Behavioral Health does not have an Action Plan toolkit that can help newly established regional behavioral health boards to actively address identified issues.
First-year target/outcome measurement:	None.
Second-year target/outcome measurement:	The Division of Behavioral Health will create an Action Plan toolkit and will provide training to all seven regional behavioral health boards on use of the Action Plan toolkit by June 30, 2015.
New Second-year target/outcome measuren	ment(if needed):
Data Source:	
Division of Behavioral Health.	
New Data Source(if needed):	
Description of Data:	
Action Plan toolkit curriculum.	
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	asures:
None.	
New Data issues/caveats that affect outcom	e measures:
Report of Progress Toward Go	pal Attainment
First Year Target: 6 Achie	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	nanges proposed to meet target:

Priority #: 25

Priority Area:

Priority Type: SAT, MHS

Population(s): SMI, SED, Other (Adults and children with substance use disorder diagnoses)

Goal of the priority area:

The Division of Behavioral Health will provide guidance on cultural awareness expectations for those who deliver behavioral health services.

Strategies to attain the goal:

Develop and provide training on cultural awareness and delivery of behavioral health services.

Indicator #:	1
Indicator:	Development of an action plan toolkit curriculum.
Baseline Measurement:	Idaho does not have an action plan curriculum to guide regions in gaps analysis, action plan implementation and outcomes measurement.
First-year target/outcome measurement:	None.
Second-year target/outcome measurement:	The Division of Behavioral Health will create an Action Plan toolkit and will provide training to all seven regional behavioral health boards on the Action Plan toolkit by June 30, 2015.
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
Division of Behavioral Health	
New Data Source(if needed):	
Description of Data:	
Action Plan toolkit curriculum and numbers	of regional trainings.
New Description of Data: (if needed)	
Data issues/caveats that affect outcome mea	sures:
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target: 6 Achiev	ed Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved <i>(optional)</i>	

III: Expenditure Reports

MHBG Table 3 - MHBG Expenditures By Service.

Expenditure Period Start Date: 7/1/2013 Expenditure Period End Date: 6/30/2014

Service	Unduplicated Individuals	Units	Expenditures
Healthcare Home/Physical Health			\$
Specialized Outpatient Medical Services			
Acute Primary Care			
General Health Screens, Tests and Immunizations			
Comprehensive Care Management			
Care coordination and Health Promotion			
Comprehensive Transitional Care			
Individual and Family Support			
Referral to Community Services Dissemination			
Prevention (Including Promotion)			\$
Screening, Brief Intervention and Referral to Treatment			
Brief Motivational Interviews			
Screening and Brief Intervention for Tobacco Cessation			
Parent Training			
Facilitated Referrals			
Relapse Prevention/Wellness Recovery Support			
Warm Line			
Substance Abuse (Primary Prevention)			\$
Classroom and/or small group sessions (Education)			
Media campaigns (Information Dissemination)			
Systematic Planning/Coalition and Community Team Building(Community Based Process)			
Parenting and family management (Education) OMB No. 0930-0168 Approved: 05/21/2013 Expires:	05/31/3046		Page 24 c

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Education programs for youth groups (Education)		
Community Service Activities (Alternatives)		
Student Assistance Programs (Problem Identification and Referral)		
Employee Assistance programs (Problem Identification and Referral)		
Community Team Building (Community Based Process)		
Promoting the establishment or review of alcohol, tobacco, and drug use policies (Environmental)		
Engagement Services		\$
Assessment		
Specialized Evaluations (Psychological and Neurological)		
Service Planning (including crisis planning)		
Consumer/Family Education		
Outreach		
Outpatient Services		\$
Evidenced-based Therapies		
Group Therapy		
Family Therapy		
Multi-family Therapy		
Consultation to Caregivers		
Medication Services		\$
Medication Management		
Pharmacotherapy (including MAT)		
Laboratory services		
Community Support (Rehabilitative)		\$
Parent/Caregiver Support		
Skill Building (social, daily living, cognitive)		
Case Management		

Behavior Management		
Supported Employment		
Permanent Supported Housing		
Recovery Housing		
Therapeutic Mentoring		
Traditional Healing Services		
Recovery Supports		\$
Peer Support		
Recovery Support Coaching		
Recovery Support Center Services		
Supports for Self-directed Care		
Other Supports (Habilitative)		\$
Personal Care		
Homemaker		
Respite		
Supported Education		
Transportation		
Assisted Living Services		
Recreational Services		
Trained Behavioral Health Interpreters		
Interactive Communication Technology Devices		
Intensive Support Services		\$
Substance Abuse Intensive Outpatient (IOP)		
Partial Hospital		
Assertive Community Treatment		
Intensive Home-based Services		
Multi-systemic Therapy		

Intensive Case Management		
Out-of-Home Residential Services		\$
Children's Mental Health Residential Services		
Crisis Residential/Stabilization		
Clinically Managed 24 Hour Care (SA)		
Clinically Managed Medium Intensity Care (SA)		
Adult Mental Health Residential		
Youth Substance Abuse Residential Services		
Therapeutic Foster Care		
Acute Intensive Services		\$
Mobile Crisis		
Peer-based Crisis Services		
Urgent Care		
23-hour Observation Bed		
Medically Monitored Intensive Inpatient (SA)		
24/7 Crisis Hotline Services		
Other (please list)		\$
footnote:		

III: Expenditure Reports

MHBG Table 4 - Set-aside for Children's Mental Health Services

State Expenditures for Mental Health Services					
Actual SFY 2008	Actual SFY 2013	Estimated/Actual SFY 2014			
\$14,662,700	\$7,070,200	\$8,031,500			

States are required to not spend less than the amount expended in Actual SFY 2008. This is a change from the previous year, when the baseline for the state expenditures was 1994.

state experientaries was 1774.
footnote:
Toothote.

III: Expenditure Reports

MHBG Table 7 - Maintenance of Effort for State Expenditures on Mental Health Services

	Total Expenditures for SMH	IA
Period	Expenditures	<u>B1(2012) + B2(2013)</u>
(A)	(B)	(C)
SFY 2012 (1)	\$20,853,600	
SFY 2013 (2)	\$21,822,500	\$21,338,050
SFY 2014 (3)	\$23,745,400	

	Yes	X	No
SFY 2013	Yes	Χ	No
SFY 2014	Yes	Χ	No