# MISSISSIPPI DEPARTMENT OF MENTAL HEALTH

# BUREAU OF COMMUNITY MENTAL HEALTH SERVICES

# FY 2018 STATE PLAN IMPLEMENTATION REPORT

Supporting a Better Tomorrow...Today

Mississippi Department of Mental Health

#### A. State Information

#### **State Information**

#### **State DUNS Number**

Number

809399926

**Expiration Date** 

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

Agency Name

Mississppi Department of Mental Health

Organizational Unit

**Bureau of Communtiy Services** 

Mailing Address

239 North Lamar Street, 1101 Robert E. Lee Building

City

Jackson

Zip Code

39201

#### II. Contact Person for the Grantee of the Block Grant

First Name

Diana

Last Name

Mikula

Agency Name

Mississppi Department of Mental Health

Mailing Address

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#### III. State Expenditure Period (Most recent State exependiture period that is closed out)

From

7/1/2017

То

6/30/2018

#### **IV. Date Submitted**

 ${\bf NOTE: This\ field\ will\ be\ automatically\ populated\ when\ the\ application\ is\ submitted.}$ 

Submission Date

11/29/2018 12:08:45 PM

**Revision Date** 

#### V. Contact Person Responsible for Report Submission

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#### Footnotes:

# **B.** Implementation Report

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

Priority #:	1	
Priority Area:	Peer Support	
Priority Type:	MHS	
Population(s):	SMI, SED	
Goal of the priority ar	ea:	
Enhance the transition	on process of individuals to a les	ss restrictive environment.
Strategies to attain th	e goal:	
Utilize Peer Bridgers	at a behavioral health program	and local Community Mental Health Centers utilizing WRAP.
——Annual Perform	nance Indicators to measu	re goal success
Indicator #:		1
Indicator:		Number of Peer Bridgers
Baseline Meas	surement:	In FY 2016: 5 (No data for FY 15 – Pilot Project)
First-year targ	get/outcome measurement:	In FY 2018: 5
Second-year t	arget/outcome measurement:	In FY 2019: 7
New Second-	year target/outcome measurem	nent(if needed): In FY 2019: 5
Data Source:		
Data is colle	cted quarterly by the 3 local CM	IHCs and the behavioral program and submitted to DMH.
New Data Sou	urce(if needed):	
Description o	f Data:	
and 3 local C	MHCs. Each of the 3 CMHCs ha	f Peer Bridgers employed by and tracked by the grantees which are a behavioral program ve a full-time Peer Bridger and the behavioral program has two part-time Peer Bridgers. individuals transition back into their communities and avert future potential crises.
New Descript	ion of Data:(if needed)	
Data issues/c	aveats that affect outcome mea	isures:
There are no	data issues or caveats expected	d to affect outcome measures.
New Data issu	ues/caveats that affect outcome	e measures:
Report of	f Progress Toward Go	al Attainment
First Year Ta	arget: Achiev	ved Not Achieved (if not achieved,explain why)
		anges proposed to meet target:
How first vea	r target was achieved (optional)	);
The Peer Brid	dger Project in North Mississipp	or i employs Peer Bridgers at three CMHCS and North Mississippi State Hospital. The Peer porcess from inpatient care to a community-based level of care by offering intensive peer

support services in order to decrease readmissions to inpatient care. A total of 8 Peer Bridgers were employed across the state in FY 2018, five (5) with the Peer Bridger Project in North Mississippi and three (3) with Central Mississippi Residential Center and South Mississippi State Hospital, two additional behavioral programs operated by DMH.

Priority #:

2

Priority Area:

Peer Support

Priority Type:

MHS

Population(s):

SMI, SED

#### Goal of the priority area:

Utilize peers and family members to provide varying supports to assist individuals in regaining control of their lives and their own recovery process.

#### Strategies to attain the goal:

- $\bullet$  Conduct outreach to stakeholders to increase the number of CPSS and the role of CPSSs
- Provide training and technical assistance to service providers on the Recovery Model, Person Centered Planning, and System of Care Principals.

Indicator #:	1
Indicator:	Number CPSSs employed by DMH certified providers
Baseline Measurement:	In FY 2015: 36
First-year target/outcome measurement:	In FY 2018: 176
Second-year target/outcome measurement:	In FY 2019: 196
New Second-year target/outcome measuren Data Source:	nent(if needed):
Data is submitted quarterly to DMH from th	e DMH certified providers employing Certified Peer Support Specialists.
New Data Source(if needed):	
k	
Description of Data:	
	tified providers employing Certified Peer Support Specialists. In FY 2016, 30 DMH certified ort Specialists.
Data is collected quarterly from all DMH cer providers employed 36 Certified Peer Suppo	
Data is collected quarterly from all DMH cer providers employed 36 Certified Peer Suppo New Description of Data:( <i>if needed</i> )	ort Specialists.
Data is collected quarterly from all DMH cer providers employed 36 Certified Peer Suppo New Description of Data:( <i>if needed</i> )	nsures:
Data is collected quarterly from all DMH cer providers employed 36 Certified Peer Suppo New Description of Data:( <i>if needed</i> )  Data issues/caveats that affect outcome mea	nsures:  If to affect the outcome measures.
Data is collected quarterly from all DMH cer providers employed 36 Certified Peer Suppo New Description of Data:(if needed)  Data issues/caveats that affect outcome mea There are no data issues or caveats expected	nsures: d to affect the outcome measures. e measures:
Data is collected quarterly from all DMH cer providers employed 36 Certified Peer Suppose.  New Description of Data:(if needed)  Data issues/caveats that affect outcome mean of the providers expected.  New Data issues/caveats that affect outcome.  Report of Progress Toward Go	isures: It to affect the outcome measures. It measures: It al Attainment
Data is collected quarterly from all DMH cerproviders employed 36 Certified Peer Suppose.  New Description of Data: (if needed)  Data issues/caveats that affect outcome means there are no data issues or caveats expected.  New Data issues/caveats that affect outcome.  Report of Progress Toward Go.  First Year Target:	Insures: Ins
providers employed 36 Certified Peer Suppose  New Description of Data: (if needed)  Data issues/caveats that affect outcome mean There are no data issues or caveats expected  New Data issues/caveats that affect outcome  Report of Progress Toward Go	asures: d to affect the outcome measures. e measures: val Attainment ved Not Achieved (if not achieved,explain why) hanges proposed to meet target:

iority #:	3	
iority Area:	Community Support for Adul	lts
iority Type:	MHS	
opulation(s):	SMI	
oal of the priority	y area:	
Provide communi	ity supports for adults transitionin	g and/or living in the community to prevent out-of-home placements.
rategies to attair	n the goal:	
	ber of admissions to PACT Teams.	
	е г повидально посторования в постор	
Annual Perf	ormance Indicators to meas	ure goal success
Indicator #	<b>#:</b>	1
Indicator:		Number of admissions to PACT Teams
Baseline M	leasurement:	In FY 2015: 97
First-year	target/outcome measurement:	In FY 2018: 140
Second-ye	ar target/outcome measurement:	: In FY 2019: 180
New Secon	nd-year target/outcome measure	ment(if needed): In FY 2019: 170
Data Source	ce:	
All eight I	PACT Teams submit data quarterly	to DMH. Data includes number of admissions to PACT Team services.
New Data	Source(if needed):	
Descriptio	n of Data:	
	, ,	ACT Teams. Data includes number of admissions. During FY 2016, there were 85 new ne 164 individuals already being served.
New Desci	ription of Data:(if needed)	
Data issue	s/caveats that affect outcome me	easures:
There are	a no data issues or caveats expects	ed to affect the 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):

In FY 2018, the 8 PACT Teams admitted 145 individuals into this service. State Hospital Directors, DMH Board members, members of the MS State Mental Health Planning and Advisory Council, and participants at the NAMI MS State Conference were educated on the services and options that PACT provides to help individuals who have severe and persistent mental illnesses and have not benefited from traditional outpatient services. In FY 2018, there were 384 individuals being served by a PACT Team.

Priority #:

Priority Area:

**Community Support for Adults** 

**Priority Type:** 

MHS

**Population(s):** SMI Printed: 11/29/2018 12:08 PM - Mississippi

#### Goal of the priority area:

Provide funding to offset cost of mental health services provided to individuals with serious mental illness who have no payer source.

#### Strategies to attain the goal:

Grant funding to 14 CMHCs for Purchase of Services.

ndicator #:	1
Indicator:	Number of units of service reimbursed by Purchase of Service Grant
Baseline Measurement:	In FY 2015: 180,002 units
First-year target/outcome measurement:	In FY 2018: Maintain or increase the number of units of service
Second-year target/outcome measurement	In FY 2019: Maintain or increase the number of units of service
New Second-year target/outcome measure	ement(if needed): In FY 2019: 160,000 units
Data Source:	
The 14 CMHCs submit data monthly throu through the POS grants.	gh cash requests and monthly reports. This data includes number of units of services provide
New Data Source(if needed):	
Description of Data:	
Data is collected through monthly cash re	quests and submitted by the 14 CMHCs/grantees.
	quests and submitted by the 14 CMHCs/grantees.
Data is collected through monthly cash re  New Description of Data:(if needed)	quests and submitted by the 14 CMHCs/grantees.
New Description of Data:(if needed)	easures:
New Description of Data:(if needed)  Data issues/caveats that affect outcome m	easures: ed to affect the outcome measures.
New Description of Data:(if needed)  Data issues/caveats that affect outcome m  There are no data issues or caveats expect  New Data issues/caveats that affect outcome  The Mississippi Department of Mental Hea	easures: ed to affect the outcome measures.
New Description of Data:(if needed)  Data issues/caveats that affect outcome m  There are no data issues or caveats expect  New Data issues/caveats that affect outcome  The Mississippi Department of Mental Hea	easures:  ed to affect the outcome measures.  me measures:  alth is requesting that the CMHCs only charge 50% of their Purchase of Service budget to by which has and will continue to result in less units billed to the POS grant.
New Description of Data:(if needed)  Data issues/caveats that affect outcome m There are no data issues or caveats expect  New Data issues/caveats that affect outcome The Mississippi Department of Mental Here Psychosocial Rehabilitation Services (PSR)  Report of Progress Toward G	easures:  ed to affect the outcome measures.  me measures:  alth is requesting that the CMHCs only charge 50% of their Purchase of Service budget to by which has and will continue to result in less units billed to the POS grant.
New Description of Data:(if needed)  Data issues/caveats that affect outcome m There are no data issues or caveats expect  New Data issues/caveats that affect outcome The Mississippi Department of Mental Here Psychosocial Rehabilitation Services (PSR)  Report of Progress Toward G	easures:  ed to affect the outcome measures.  me measures:  alth is requesting that the CMHCs only charge 50% of their Purchase of Service budget to o, which has and will continue to result in less units billed to the POS grant.  oal Attainment  ieved  Not Achieved (if not achieved,explain why)
New Description of Data: (if needed)  Data issues/caveats that affect outcome m  There are no data issues or caveats expect  New Data issues/caveats that affect outcome  The Mississippi Department of Mental Here Psychosocial Rehabilitation Services (PSR)  Report of Progress Toward G  First Year Target: Ach  Reason why target was not achieved, and  In FY 2018, 153,263 units of service were r  Health requested that the CMHCs only characterists	easures:  ed to affect the outcome measures.  me measures:  alth is requesting that the CMHCs only charge 50% of their Purchase of Service budget to be an expected by which has and will continue to result in less units billed to the POS grant.  Oal Attainment  ieved  Not Achieved (if not achieved,explain why)  changes proposed to meet target:  eimbursed by Purchase of Service Grants. In FY 2018, the Mississippi Department of Mental arge 50% of their Purchase of Service budget to Psychosocial Rehabilitation Services (PSR),  DMH assumes this request caused the decrease in the number of units billed. Due to DMH's

Priority #:

5

Priority Area:

Crisis Services

Priority Type:

MHS

Population(s):

SMI, SED

#### Goal of the priority area:

Expand access to crisis services and divert individuals from more restrictive environments such as jails, hospitals, etc.

#### Strategies to attain the goal:

Increase the number of contacts made by the Mobile Crisis Response Teams.

Indicator #.	1
Indicator #:	
Indicator:	Number of contacts
Baseline Measurement:	In FY 2015: 19,660 contacts
First-year target/outcome measurement:	In FY 2018: 23,160
Second-year target/outcome measurement:	In FY 2019: 25,000
New Second-year target/outcome measurem	nent(if needed): In FY 2019: 26,000
Data Source:	
The number of contacts by the Mobile Crisis	Response Teams is submitted to DMH quarterly.
New Data Source(if needed):	
Description of Data:	
	risis Response Teams to DMH. In FY 2016, at total of 22, 768 calls were received and there
were a total of	ce-to-face visits, 9,449 had follow-up appointments scheduled at a CMHC.
	ac to face fines, 5, 115 had follow up appointments scheduled at a climite.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	isures:
There are no data issues or caveats expected	d to affect the outcome measures.
<u> </u>	
There are no data issues or caveats expected  New Data issues/caveats that affect outcome	
New Data issues/caveats that affect outcome	e measures:
New Data issues/caveats that affect outcome Report of Progress Toward Go	e measures: al Attainment
New Data issues/caveats that affect outcome  Report of Progress Toward Go  First Year Target:  Achiev	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)
New Data issues/caveats that affect outcome Report of Progress Toward Go	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)
New Data issues/caveats that affect outcome  Report of Progress Toward Go  First Year Target:  Achiev	e measures:  al Attainment  ved
Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch  How first year target was achieved (optional)  DMH provides funding to all 14 CMHCs for	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from
Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch  DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch  How first year target was achieved (optional)  DMH provides funding to all 14 CMHCs for	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch How first year target was achieved (optional) DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h enforcement were made by Mobile Crisis Re	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch  DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
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New Data issues/caveats that affect outcome Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch How first year target was achieved (optional) DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h enforcement were made by Mobile Crisis Re	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch How first year target was achieved (optional) DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h enforcement were made by Mobile Crisis Re  y#: 6 y Area: Crisis Services	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
New Data issues/caveats that affect outcome Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch How first year target was achieved (optional) DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h enforcement were made by Mobile Crisis Re  #: 6  Area: Crisis Services  Type: MHS	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
New Data issues/caveats that affect outcome Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch How first year target was achieved (optional) DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h enforcement were made by Mobile Crisis Re  y #: 6 y Area: Crisis Services y Type: MHS htion(s): SMI, SED f the priority area:	e measures:  val Attainment  ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  ):  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law
New Data issues/caveats that affect outcome Report of Progress Toward Go First Year Target:  Reason why target was not achieved, and ch How first year target was achieved (optional) DMH provides funding to all 14 CMHCs for more restrictive environments such as jail, h enforcement were made by Mobile Crisis Re  y #: 6 y Area: Crisis Services y Type: MHS htion(s): SMI, SED f the priority area:	al Attainment  ved  Not Achieved (if not achieved,explain why)  langes proposed to meet target:  D:  Mobile Crisis Response Teams to be available in all 82 counties to divert individuals from ospitalizations, etc. In FY 2018, 26,184 contacts, face-to face visits, and encounters with law sponse Teams.

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-Annual Performance Indicators to measure goal success-

Indicator:		Number of admissions
Baseline Me	asurement:	In FY 2015: 3,609 admissions
First-year ta	rget/outcome measurement:	In FY 2018: 3,200
Second-year	r target/outcome measurement:	In FY 2019: 3,300
New Second	l-year target/outcome measurem	nent(if needed):
Data Source	:	
Quarterly d	data, which includes number of ac	dmissions, is submitted by the CSUs to DMH.
New Data So	ource(if needed):	
Description	of Data:	
the CSUs se	erved 3,270 individuals, which is a	rly to DMH which includes the number of involuntary and voluntary admissions. In FY 2016, decrease from the number served in FY 2015. This decrease in the number served is risis being served by the Mobile Crisis Response Teams.
New Descrip	otion of Data:(if needed)	
Data issues/	caveats that affect outcome mea	isures:
There are n	no data issues or caveats expected	d to affect the outcome measures.
New Data is	sues/caveats that affect outcome	e measures:
	sues/caveats that affect outcome of Progress Toward Go	
Report o	of Progress Toward Go	al Attainment
Report o	of Progress Toward Go Target: Æ Achiev	al Attainment  ved Not Achieved (if not achieved,explain why)
Report of First Year Reason why	of Progress Toward Go Target: Achiev r target was not achieved, and ch	al Attainment  Wed Not Achieved (if not achieved, explain why)  anges proposed to meet target:
Report of First Year Reason why How first year In FY 2018,	of Progress Toward Go  Target: Achieved target was not achieved, and che ear target was achieved (optional), a total of 3,153 individuals were	al Attainment  Wed Not Achieved (if not achieved, explain why)  anges proposed to meet target:
Report of First Year - Reason why How first year In FY 2018, increased f	of Progress Toward Go Target: Achiev	al Attainment  ved Not Achieved (if not achieved,explain why)  langes proposed to meet target:  l:  served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals
Report of First Year Teason why  How first year In FY 2018, increased for the first year.	of Progress Toward Go Target: Achiev  * target was not achieved, and ch  * ear target was achieved (optional)  *, a total of 3,153 individuals were  from 89.3% in FY 2017 to 91.85% i	al Attainment  ved Not Achieved (if not achieved,explain why)  langes proposed to meet target:  l:  served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals
Report of First Year Reason why How first year In FY 2018, increased for the first was also become the first was also become and the first year.	of Progress Toward Go Target: Achiev	al Attainment  ved Not Achieved (if not achieved,explain why)  langes proposed to meet target:  l:  served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals
Report of First Year - Reason why How first ye In FY 2018, increased for ty #:  ty #:  ty Area:  ty Type:	of Progress Toward Go Target: Achiev	al Attainment  ved Not Achieved (if not achieved,explain why)  langes proposed to meet target:  l:  served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals
Report of First Year Reason why How first year In FY 2018, increased for the first was also become the first was also become and the first year.	of Progress Toward Go Target: Achiev	al Attainment  ved Not Achieved (if not achieved,explain why)  langes proposed to meet target:  l:  served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals
Report of First Year - Reason why How first ye In FY 2018, increased for ty #:  ty #:  ty Area:  ty Type:	of Progress Toward Go Target: Achiev	al Attainment  ved Not Achieved (if not achieved,explain why)  langes proposed to meet target:  l:  served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals
Report ( First Year  Reason why  How first ye In FY 2018, increased f  ty #: ty Area: ty Type: lation(s):	of Progress Toward Go Target: Achiev	al Attainment  Wed Not Achieved (if not achieved, explain why)  Langes proposed to meet target:  D:  Served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals in FY 2018. The average length of stay for individuals served in the CSUs was 10.71 days.
Report ( First Year  Reason why  How first ye In FY 2018, increased f  ty #: ty Area: ty Type: lation(s):	of Progress Toward Go Target: Achieved, and che ear target was not achieved, and che ear target was achieved (optional), a total of 3,153 individuals were from 89.3% in FY 2017 to 91.85% i  7  Supported Housing MHS SMI area: th serious mental illness to approximate the serious ment	al Attainment  Wed Not Achieved (if not achieved, explain why)  Langes proposed to meet target:  D:  Served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals in FY 2018. The average length of stay for individuals served in the CSUs was 10.71 days.
Report ( First Year Reason why How first ye In FY 2018, increased f  ty #: ty Area: ty Type: lation(s): of the priority nect adults wit	of Progress Toward Go Target: Achieve	al Attainment  Wed Not Achieved (if not achieved,explain why)  Langes proposed to meet target:  D:  Served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals in FY 2018. The average length of stay for individuals served in the CSUs was 10.71 days.
Report of First Year Teason why How first ye In FY 2018, increased for the Front Type:  In FY 2018, increased for the Priority ty #:  In FY 2018, increased for the priority type:  In FY 2018, increased for	of Progress Toward Go Target: Achieve	al Attainment  ved Not Achieved (if not achieved,explain why)  anges proposed to meet target:  b: served by the Crisis Stabilization Units. The diversion rate of admissions to state hospitals in FY 2018. The average length of stay for individuals served in the CSUs was 10.71 days.  operiate housing opportunities.  o are housed as a result of the Permanent Supportive Housing model have the opportunity to list their choice by providing an adequate array of community supports/services.

Number of assessments provided; Number of people maintained in permanent supportive

In FY 2016: 48 assessments provided; 48 individuals maintained in permanent supportive

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**Baseline Measurement:** 

housing

Indicator:

First-year target/	outcome measurement:	In FY 2018: 200 assessments provided; 200 individuals maintained permanent supportive housing
Second-year targ	get/outcome measurement:	In FY 2019: 300 assessments provided; 300 individuals maintained permanent supportive housing
New Second-yea	r target/outcome measurem	ent(if needed):
Data Source:		
The six CMHCs	operating CHOICE programs	submit quarterly data to DMH.
New Data Source	e(if needed):	
Description of D	ata:	
Permanent Sup 2016, 48 assess provided to the	portive Housing. The CHOICE ments have been provided, a	include the number of assessments provided and the number of individuals maintained in E program began in March 2016 with programs being operated by six CMHCs. Since March and 48 individuals have received housing through this program. A variety of services are natient services, peer support, PACT, physician services, community support, intensive case attive services.
New Description	of Data:(if needed)	
Data issues/cave	ats that affect outcome mea	sures:
There are no da	ta issues or caveats expected	I to affect the outcome measures.
New Data issues	/caveats that affect outcome	e measures:
Report of P	rogress Toward Go	al Attainment
' First Year Targ		
* "		anges proposed to meet target:
How first year ta	rget was achieved (optional)	):
In FY 2018, a to model. These ir	tal of 211 individuals were a	ssessed, housed, and able to maintain housing through the Permanent Supportive Housing ity to live in the community of their choice and participate in an adequate array of
ity #: 8	<b>:</b>	
ity Area:	Community Supports for Chil	dren
ity Type:	инs	
l <b>lation(s):</b> S	ED	
of the priority area	:	
ize MAP Teams to h	elp serve children and youth	in their community and prevent unnecessary institutionalizations .
egies to attain the g	goal:	
hnical assistance wil	ll be provided to MAP Teams	as requested and/or needed.
Annual Performa	nce Indicators to measu	re goal success
Indicator #:		1
		Number served by MAP Teams

In FY 2015: 1,079

In FY 2018: 1,200

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**Baseline Measurement:** 

First-year target/outcome measurement:

Mem Second	I-year target/outcome measurement(if needed): In FY 2019: 930
Data Source	:
Cash reque	ests and data, including number of children and youth served, are submitted monthly to DMH by the MAP Team ors.
New Data S	ource(if needed):
Description	of Data:
Monthly re	there were 55 MAP Teams serving 62 counties. A total of 1,152 children and youth were served by MAP Teams in FY 2016. Ports are submitted to DMH by MAP Team Coordinators which include the number of children and youth served. Cash re also submitted monthly to DMH which lists the services and supports funded for the children and youth served by the MAI
New Descri	otion of Data:(if needed)
youth with mental hea	55 MAP Teams served 881 children and youth. Data submitted In FY 2016 and FY 2017 included the number of children and SED who participated and were served in summer enrichment camps provided by DMH certified providers of children's alth services. FY 2018 includes only those children and youth with open cases for whom services or resources were provided e MAP Teams.
Data issues	caveats that affect outcome measures:
There are	no data issues or caveats expected to affect the outcome measures.
New Data is	ssues/caveats that affect outcome measures:
1	orking with the troubled CMHC to maintain consistent MAP Team services in the nine counties served by the agency. Four of The currently operating and serving children and youth in need. DMH anticipates steady but slow growth during this process.
Report	of Progress Toward Goal Attainment
First Year	
Reason why	target was not achieved, and changes proposed to meet target:
Currently, inappropr counties s all. Staff fr MAP Team camps we	881 children and youth were served through MAP Teams. All 82 counties have access to the services that MAP Teams provide, there are 55 MAP Teams in Mississippi working to keep children and youth in their own community who are at risk for an ate institutional placement due to lack of access to or availability of needed resources or supports. A large CMHC serving 9 erved less children due to staff turnover resulting in the teams serving those counties either meeting inconsistently or not at om the DMH Division of Children and Youth Services is providing technical assistance to and working consistently with the Coordinators from this CMHC to invigorate and improve the stability of these MAP Teams. Additionally, summer enrichment e included in the FY 2016 and FY 2017 data, which increased the number served. In FY 2018, numbers from summer t camps were excluded to improve the accuracy of the data.
How first y	ear target was achieved (optional):
- 4.	
<i>ı</i> #:	
/ Area:	Community Supports for Children
Туре:	MHS

# Goal of the priority area: Increase statewide use of

Increase statewide use of Wraparound Facilitation with children and youth.

#### Strategies to attain the goal:

Increase statewide use of Wraparound Facilitation with children and youth through training and supports provided by the Mississippi Wraparound Institute.

Annual Performance Indicators to measure goal success Indicator #: Number of children served by Wraparound Facilitation Indicator: Baseline Measurement: FY 2015: 1,078 First-year target/outcome measurement: FY 2018: 1,700 Second-year target/outcome measurement: FY 2019: 1,900 New Second-year target/outcome measurement(if needed): In FY 2019: 1,350 **Data Source:** Data which includes the number of children and youth served with Wraparound Facilitation is submitted quarterly to DMH by MWI. New Data Source(if needed): The Mississippi Wraparound Institute (MWI) now employs three (3) of the four (4) nationally certified Wraparound coaches in the state. **Description of Data:** A total of 11 providers were certified to provide Wraparound Facilitation in FY 2016, and a total of 462 individuals were trained. The Mississippi Wraparound Institute (MWI) employs two of the four nationally certified Wraparound coaches in the state to provide training and supports to certified providers of Wraparound Facilitation in Mississippi. Data is submitted quarterly to DMH by MWI. In FY 2016, 2,960 children and youth were served with Wraparound Facilitation. New Description of Data:(if needed) Data issues/caveats that affect outcome measures: There are no data issues or caveats expected to affect the 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: In FY 2018, 1,329 children and youth were served through Wraparound Facilitation. This number is a substantial increase in the number served as reported in the baseline data collected in 2015. The data reported by the DMH certified agencies providing Wraparound Facilitation in FY 2016 and FY 2017 were duplicated numbers. The FY 2018 data represents an accurate number of children and youth that were served through Wraparound Facilitation. The target for FY 2019 has been modified. Only unduplicated data will be collected and submitted.

How first year target was achieved (optional):

Priority #: 1

**Priority Area:** Community Supports for Children

Priority Type: MHS

Population(s): SED, ESMI

#### Goal of the priority area:

Assist youth and young adults in navigating the road to recovery from First Episode Psychosis (FEP), including efforts to function well at home, on the job, at school and in the community through the Coordinated Specialty Care Team.

#### Strategies to attain the goal:

Continue an evidenced-based intervention program for youth and young adults who have experienced First Episode Psychosis (FEP).

Annual Performance Indicators to measure goal success

Indicator #:

1

Indicator:

Number of youth and young adults served through the NAVIGATE Program

**Baseline Measurement:** 

In FY 2016: 4 (No data for FY 15 - Pilot Project)

First-year target/outcome measurement:

In FY 2018: 16

Second-year target/outcome measurement: In FY 2019: 20

New Second-year target/outcome measurement(if needed): In FY 2019: 25

Data Source:

Number of youth and young adults served through the NAVIGATE Program is submitted monthly to DMH by the two CSC teams.

#### New Data Source(if needed):

Number of youth and young adults served through the NAVIGATE Program is submitted monthly to DMH by the four CSC teams.

#### **Description of Data:**

The initial Coordinated Specialty Care (CSC) team funded by the 5% Set Aside is operated by a CMHC located in the north central portion of the state. That program served 4 young adults in FY 2016. An additional CSC team has been developed and is provided funding utilizing the 10% Set Aside to provide services through the NAVAGATE program to youth and young adults living on the Gulf Coast. Data is submitted monthly to DMH by the two CSC teams which includes the number of youth and young adults served through the NAVIGATE Program.

#### New Description of Data:(if needed)

In FY 2018, two additional NAVIGATE programs were added in Region 9 serving Hinds County and Region 15 serving Yazoo County. In addition, a NAVIGATE program is being initiated and implemented in Rankin County operated by Region 8 Mental Health Services. The Region 8 NAVIGATE Team members will be trained in FY 2019 and begin service provision to the youth and young adults in Rankin County in need of FEP treatment.

#### Data issues/caveats that affect outcome measures:

There are no data issues or caveats expected to affect the 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):

In FY 2018, two NAVIGATE Teams served 23 youth and young adults experiencing First Episode Psychosis. IN FY 2018, two new teams were initiated in Hinds and Yazoo Counties. These teams were trained in FY 2018 and have begun serving youth and young adults meeting the criteria for the NAVIGATE program.

Priority #:

11

**Priority Area:** 

Community Supports for Children

**Priority Type:** 

MHS

Population(s):

SED

#### Goal of the priority area:

Provide services through the Juvenile Outreach Program (JOP) that are necessary for a youth's successful transition from a detention center back to his/her home and/or community.

#### Strategies to attain the goal:

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Continue funding to CMHCs to make mental health services available to youth in detention centers in an effort to prevent re-entries.

		1
Indicator:		Number served in detention centers
Baseline Me	easurement:	FY 2017: Baseline data gathered
First-year target/ou	rget/outcome measurement:	FY 2018: 1200
Second-yea	r target/outcome measurement:	FY 2019: 1,300
New Secon	d-year target/outcome measureme	ent(if needed): In FY 2019: 1,800
Data Source	<b>:</b> :	
Data is sub	omitted monthly by the CMHCs rec	eiving JOP grant funding.
New Data S	ource(if needed):	
Description	of Data:	
range of so immediate family the	ervices and supports for youth with access to a Community Support Sp	o provide services through the Juvenile Outreach Program (JOP). These programs provide an SED involved in the juvenile justice system and/or local detention center which include pecialist or Certified Therapist for assessments, crisis intervention, medication monitoring, ally data is submitted to DMH from the CMHCs receiving grant funding to provide services
New Descri	ption of Data:(if needed)	
Data issues	caveats that affect outcome meas	ures:
There are	no data issues or caveats expected	to affect outcome measures.
There are		to affect outcome measures.
There are	no data issues or caveats expected ssues/caveats that affect outcome	to affect outcome measures. measures:
There are  New Data is  Report	no data issues or caveats expected ssues/caveats that affect outcome of Progress Toward Goa	to affect outcome measures.  measures:  Il Attainment
New Data is Report First Year	no data issues or caveats expected ssues/caveats that affect outcome of Progress Toward Goa Target:   Achieve	nto affect outcome measures.  measures:  al Attainment  ed
New Data is Report First Year	no data issues or caveats expected ssues/caveats that affect outcome of Progress Toward Goa	nto affect outcome measures.  measures:  al Attainment  ed
New Data is Report First Year Reason why	no data issues or caveats expected ssues/caveats that affect outcome of Progress Toward Goa Target:  Achieve y target was not achieved, and chaear target was achieved (optional):	measures:  Il Attainment  ed
New Data is Report First Year Reason why How first y In FY 2018 Services p	ssues/caveats that affect outcome of Progress Toward Goa Target: Achieve y target was not achieved, and cha ear target was achieved (optional): , 1,760 youth received mental healt	to affect outcome measures.  measures:  al Attainment  ed Not Achieved (if not achieved,explain why)  nges proposed to meet target:
Report First Year Reason why How first ye In FY 2018 Services p number ha	no data issues or caveats expected scues/caveats that affect outcome of Progress Toward Goa Target:  Achieve y target was not achieved, and chaer target was achieved (optional):  1,760 youth received mental healt rovided include assessments, commas been increased.	measures:  If Attainment  If Not Achieved (if not achieved,explain why)  In the services in detention centers across the state through the Juvenile Outreach Programs.
New Data is Report First Year Reason why In FY 2018 Services p number ha	ssues/caveats that affect outcome of Progress Toward Goa Target: Achieve y target was not achieved, and cha ear target was achieved (optional): , 1,760 youth received mental healt rovided include assessments, comn as been increased.	measures:  If Attainment  If Not Achieved (if not achieved,explain why)  In the services in detention centers across the state through the Juvenile Outreach Programs.
New Data is Report First Year Reason why How first y In FY 2018 Services p number ha	ssues/caveats that affect outcome of Progress Toward Goa Target: Achieve y target was not achieved, and cha ear target was achieved (optional): , 1,760 youth received mental healt rovided include assessments, commas been increased.	measures:  If Attainment  If Not Achieved (if not achieved,explain why)  In the services in detention centers across the state through the Juvenile Outreach Programs.
New Data is Report First Year Reason why In FY 2018 Services p number ha	no data issues or caveats expected successes/caveats that affect outcome of Progress Toward Goa Target:  Achieve y target was not achieved, and chae ear target was achieved (optional):  17,760 youth received mental healt rovided include assessments, commas been increased.	measures:  If Attainment  If Not Achieved (if not achieved,explain why)  In the services in detention centers across the state through the Juvenile Outreach Programs.
New Data is Report First Year Reason why In FY 2018 Services p number ha #: Area: Type: tion(s):	ssues/caveats that affect outcome of Progress Toward Goa Target: Achieve y target was not achieved, and cha ear target was achieved (optional): , 1,760 youth received mental healt rovided include assessments, comm as been increased.  12  Community Integration SAT, MHS SMI	measures:  If Attainment  If Not Achieved (if not achieved,explain why)  In the services in detention centers across the state through the Juvenile Outreach Programs.
New Data is Report First Year Reason why How first y In FY 2018 Services p number ha #: Area: Type: tion(s):	no data issues or caveats expected sues/caveats that affect outcome of Progress Toward Goa Target:  Achieve y target was not achieved, and chave ar target was achieved (optional):  1,760 youth received mental healt rovided include assessments, commas been increased.	measures:  Not Achieved (if not achieved,explain why)  nges proposed to meet target:  th services in detention centers across the state through the Juvenile Outreach Programs. nunity support services, counseling, and wraparound facilitation. The FY 2019 target
New Data is Report First Year Reason why How first y In FY 2018 Services p number ha #: Area: Type: tion(s):	no data issues or caveats expected sues/caveats that affect outcome of Progress Toward Goa Target:  Achieve y target was not achieved, and chave ar target was achieved (optional):  1,760 youth received mental healt rovided include assessments, commas been increased.	measures:  If Attainment  If Not Achieved (if not achieved,explain why)  In the services in detention centers across the state through the Juvenile Outreach Programs.
New Data is Report First Year Reason why How first y In FY 2018 Services p number ha #: Area: Type: tion(s):	no data issues or caveats expected successues/caveats that affect outcome of Progress Toward Goa Target:  Achieve y target was not achieved, and chave ar target was achieved (optional):  1,760 youth received mental healt rovided include assessments, commas been increased.	measures:  Not Achieved (if not achieved,explain why)  nges proposed to meet target:  th services in detention centers across the state through the Juvenile Outreach Programs. nunity support services, counseling, and wraparound facilitation. The FY 2019 target

 $returning \ to \ Hinds \ County \ and \ identified \ as \ medium \ to \ high \ risk \ for \ recidivism.$ 

## Annual Performance Indicators to measure goal success Indicator #: 1 Indicator: Number of individuals identified as having co-occurring disorders successfully completing intensive outpatient treatment program **Baseline Measurement:** In FY 2017: Baseline data gathered First-year target/outcome measurement: In FY 2018: 30 Second-year target/outcome measurement: In FY 2019: 50 New Second-year target/outcome measurement(if needed): In FY 2019: 15 Data Source: Quarterly data will be submitted by DMH Behavioral Health programs including the number of individuals diverted from wait lists to community-based programs. New Data Source(if needed): Quarterly data is obtained from the DMH Behavioral Health programs and CMHCS serving individuals released from the Mississippi Department of Corrections. Data is submitted to the DMH. **Description of Data:** Quarterly data will be submitted by DMH Behavioral Health programs including the number of individuals diverted from wait lists to community-based programs. New Description of Data:(if needed) Quarterly data is submitted by the DMH Behavioral Health programs and CMHCS serving individuals released from the Mississippi Department of Corrections that meet the criteria for the program and are willing to enter the program. There are no "waitlists" as stated in the previous data description. Data issues/caveats that affect outcome measures: There are no data issues or caveats expected to affect the outcome measures. New Data issues/caveats that affect outcome measures: Only individuals released from MDOC's 3 state prisons will be recruited and screened for the program. 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: Funded by a federal grant, this program operated by a partnership between DMH and the MS Department of Corrections provides treatment and supports for individuals with co-occurring mental health and substance use disorders to improve their successful reentry into the community. In FY 2018, 6 individuals were enrolled and the same 6 successfully completed/graduated from the program. Through FY 2018, a total of 102 individuals were screened and 72 of those individuals were identified as having a co-occurring mental health and substance use disorders. Reasons for failing to achieve the target are as follows: 1) DOJ requires an extensive year-long planning phase which resulted in the program not being operational until October 1, 2017; 2) By the end of FY 2018, the program had hired its third therapist. Staff turnover was an obstacle; 3) Individuals remained in custody beyond their expected release dates due to some having detainers for other charges, delays or changes in approved addresses for residences to which the individuals were returning, etc.; 4) The original grant proposal defined the target population as individuals released from the 3 MDOC state prisons, 15 regional facilities, and 5 private prisons. During the completion of the Planning and Implementation Guide, the team was asked to further define the recruitment facilities and candidates were only able to be selected from the 3 MDOC state prisons which resulted in screening only 27% of the target population. The target will be decreased to 15 for FY 2019 due to the multiple factors affecting the target population and MDOC logistics which are unrelated to the program and were unforeseeable at the time the original targets were derived.

How first year target was achieved (optional):

Priority #:

13

Priority Area:

Supported Employment

Priority Type:

MHS

Population(s):

SMI

#### Goal of the priority area:

Develop employment options for adults with serious and persistent mental illness.

#### Strategies to attain the goal:

Legislative appropriated community expansion general funds will be utilized to provide 4 pilot program sites to begin implementation of supported employment services for adults living with mental illness. Collaboration with Vocational Rehabilitation Services will take place.

nual Performance Indicators to measu	re goal success
Indicator #:	1
Indicator:	Number of individuals with serious and persistent mental illness who are gainfully employed
Baseline Measurement:	In FY 2016: 102
First-year target/outcome measurement:	In FY 2018: 120
Second-year target/outcome measurement:	In FY 2019: 140
New Second-year target/outcome measurem	ent(if needed): In FY 2019: 300
Data Source:	
Four program sites submit data quarterly to	DMH including the number of individuals with serious mental illness who are employed.
New Data Source(if needed):	
Description of Data:	
sites submit data quarterly to DMH includin	to make available supported employment options for adults with mental illness. These four g the number of individuals with serious mental illness who are employed. During FY 2016, ers were made resulting in 165 job placements. By the end of FY 2016, 102 individuals with
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
There are no data issues or caveats expected	to affect the outcome measures.
New Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go	al Attainment
First Year Target: Achiev	pure.
Reason why target was not achieved, and ch	anges proposed to meet target
How first year target was achieved (optional)	:
of Individual Placement and Support (IPS). S capable of working competitively in the com	ss were able to secure and maintain employment through Supported Employment Programs upported Employment begins with the idea that every person with a serous mental illness is munity. In FY 2018, 4892 businesses were contacted to determine if employment ith serious mental illness. DMH funds six pilot employment sites. Two are in their last year

Priority #: 14

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**Priority Area:** 

**Recovery Supports** 

**Priority Type:** 

MHS

Population(s):

SMI, SED

#### Goal of the priority area:

Expand the peer review/quality assurance process by utilizing Personal Outcome Measures (POM) interviews to measure outcomes of individuals receiving services.

#### Strategies to attain the goal:

Offer technical assistance to providers after POM reports are released to providers.

	1
Indicator:	Number of POMs completed at each CMHC
Baseline Measurement:	In FY 2015/16: 350
First-year target/outcome measurement:	In FY 2018: 15 per visit for the 14 CMHCs
Second-year target/outcome measurement:	In FY 2019: 15 per visit for the 14 CMHCs
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
The number of Personal Outcome Measure (submitted to DMH quarterly.	POM) Interviews completed during each certification visit to the CMHCs will be tracked a
New Data Source(if needed):	
Description of Data:	
	POM) Interviews completed during each certification visit to the CMHCs will be tracked a Support Specialists participate on the Certification Visit Team and conduct the interviews
•	of the POM interviews are released to the provider and technical assistance is offered
during scheduled certification visits. Results based on the results of the report.	
during scheduled certification visits. Results based on the results of the report.  New Description of Data:(if needed)	of the POM interviews are released to the provider and technical assistance is offered
during scheduled certification visits. Results based on the results of the report.  New Description of Data:(if needed)	of the POM interviews are released to the provider and technical assistance is offered sures:
during scheduled certification visits. Results based on the results of the report.  New Description of Data:(if needed)  Data issues/caveats that affect outcome mea	of the POM interviews are released to the provider and technical assistance is offered sures:
during scheduled certification visits. Results based on the results of the report.  New Description of Data:(if needed)  Data issues/caveats that affect outcome mea	of the POM interviews are released to the provider and technical assistance is offered sures:  It to affect the outcome measures.
during scheduled certification visits. Results based on the results of the report.  New Description of Data:(if needed)  Data issues/caveats that affect outcome mea  There are no data issues or caveats expected.  New Data issues/caveats that affect outcome	sures: I to affect the outcome measures.  P measures:  al Attainment
during scheduled certification visits. Results based on the results of the report.  New Description of Data:(if needed)  Data issues/caveats that affect outcome mea  There are no data issues or caveats expected.  New Data issues/caveats that affect outcome.	sures: It to affect the outcome measures. In measures:  All Attainment  Wed  Not Achieved (if not achieved,explain why)

interviews are released to the provider and technical assistance is offered based on the results of the report.

Priority #:

Priority Area: Recovery Supports

15

Priority Type: MHS

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the priority area:	Little of the same
othen family education and family support cap	abilities in the state.
ies to attain the goal:	
de a variety of training and workshops targeting	g people with SMI and family members throughout the state.
nual Performance Indicators to measu	re goal success-
Indicator #:	1
Indicator:	Number of training and workshops
Baseline Measurement:	In FY 2015: 110 workshops/support groups/trainings provided by NAMI
First-year target/outcome measurement:	In FY 2018: 125 workshops/support groups/trainings provided by NAMI
Second-year target/outcome measurement:	In FY 2019: 135 workshops/support groups/trainings provided by NAMI
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
The number of trainings and workshops pro- children and youth with SED. This data is sub	vided by NAMI-MS to individuals with SMI and family members of individuals with SMI and omitted quarterly.
New Data Source(if needed):	
Description of Data:	
members of individuals with SMI and childre	garding the number of trainings and workshops provided to individuals with SMI and family in and youth with SED. DMH funds NAMI-MS to provide recovery support services to amily members of children and youth with SED by offering trainings and workshops on enges.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	
There are no data issues or caveats expected	to affect the outcome measures.
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Go	al Attainment
First Year Target:	red Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and characteristics	anges proposed to meet target:
How first year target was achieved (optional)	:
In FY 2018, NAMI-MS provided 201 worksho SMI and children and youth with SED.	ps/support groups/trainings to individuals with SMI and family members of individuals with

# **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 2017	Estimated/Actual SFY 2018
\$1,897,209	\$1,889,119	\$1,820,698

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

# **C. State Agency Expenditure Reports**

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

Total Expenditures for SMHA		
<u>B1(2016) + B2(2017)</u> 2 (C)	Expenditures (B)	Period (A)
	\$27,732,655	SFY 2016 (1)
\$28,051,660	\$28,370,665	SFY 2017 (2)
	\$27,845,549	SFY 2018 (3)