

B. Implementation Report

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

Priority #: 1
Priority Area: Provider training
Priority Type: MHS
Population(s): SMI

Goal of the priority area:

Provision of diverse training to community adult mental health providers

Strategies to attain the goal:

DBHDD will provide high quality training to community adult mental health providers throughout the state that will increase skills in supporting the behavioral health needs of diverse populations.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Provision of training on each of the following topics: Recovery focused service delivery; Cultural and linguistic competency; behavioral health needs of veterans; behavioral health needs of those with criminal history; Mental Health First Aid; and, behavioral health needs of LGBT individuals.
Baseline Measurement: Initial data collected during SFY2018
First-year target/outcome measurement: Progress to end of SFY18
Second-year target/outcome measurement: Progress to end of SFY19. Increase number of providers trained by 5% above SFY18 totals.
New Second-year target/outcome measurement(if needed):

Data Source:

DBHDD Office of Adult Mental Health data.

New Data Source(if needed):

Description of Data:

Training plan reflecting dates and topics.

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):

Provided the following subject area trainings:
Recovery Focused Treatment-19,

Mental Health First Aid-5
Veterans- 3
BH and LGBTQ- 2
BH and Criminal Justice-5
BH and Older Adults- 4,
Cultural and Linguistic Competency -1

Priority #: 2
Priority Area: Permanent Supported Housing
Priority Type: MHS
Population(s): SMI

Goal of the priority area:

Increase access to permanent supported housing for adults enrolled in AMH services.

Strategies to attain the goal:

DBHDD will increase access to HUD Section 811 program, and DCA Housing Choice Vouchers for eligible adults with SMI.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of adults with SMI receiving State assisted permanent supported housing.
Baseline Measurement: Initial data collected prior to and during SFY18
First-year target/outcome measurement: Progress to end of SFY2018
Second-year target/outcome measurement: Progress toward SFY19. Increase number served by 3% over the total served in SFY18.
New Second-year target/outcome measurement(if needed):

Data Source:

Office of Adult Mental Health data base, Department of Community Affairs data base/Statewide Information System

New Data Source(if needed):

Description of Data:

Compiled monthly reports of individuals housed via the GHV, HCV OR 811 rental assistance programs.

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):

Number of adults with SMI receiving State assisted permanent supported housing = 2,297

Priority #: 3

Priority Area: Supported Employment

Priority Type: MHS

Population(s): SMI

Goal of the priority area:

Increase access to competitive employment for adults enrolled in AMH services.

Strategies to attain the goal:

DBHDD contracts for the provision of Supported Employment services statewide. Collect data on number of individuals working part or full time in competitive employment settings for adults with SMI receiving State funded Supported Employment services.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Percentage of adults with SMI who are competitively employed part-time or full-time while enrolled in adult mental health Supported Employment services.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to end of SFY18

Second-year target/outcome measurement: Progress to end of SFY19. Increase percentage of SE enrolled individuals who are competitively employed by 5% above SFY18 number.

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

Data Source:

DBHDD Office of Adult Mental Health data.

New Data Source(if needed):

Description of Data:

Compiled monthly reports of individuals enrolled in SE, and % of individuals competitively employed.

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):

Percentage of adults with SMI who are competitively employed part-time or full-time while enrolled in adult mental health Supported Employment services = 32.5%
(953 / 2,929)

Priority #: 4

Priority Area: Access to Services-Older Adults

Priority Type: MHS

Population(s): SMI

Goal of the priority area:

Improve providers ability to support the behavioral health needs of older adults

Strategies to attain the goal:

Offer training opportunities that will enhance providers ability to deliver behavioral health services to adults age 65+

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Percentage of adults with SMI age 65+ that receive community mental health services.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to end of SFY18

Second-year target/outcome measurement: Progress to end of SFY19. Increase by 2% the number of 65+ individuals who received community based adult mental health services in SFY19.

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

Data Source:

DBHDD Office of Adult Mental Health data.

New Data Source(if needed):

Description of Data:

Authorizations submitted for AMH services for persons 65+

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):

Percentage of adults with SMI age 65+ that receive community mental health services = 5.3%
(6,545 / 123,907)

Indicator #: 2

Indicator: Provision of cross training for behavioral health providers on awareness and issues related to the delivery of mental health services to older adults with SMI.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to end of SFY18

Second-year target/outcome measurement: Progress to end of SFY19

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

Data Source:

DBHDD Office of Adult Mental Health data.

New Data Source(if needed):

Description of Data:

Training plan reflecting dates and topics.

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):

Provided four (4) full-day cross training sessions for behavioral health and aging services providers on awareness and issues related to the delivery of mental health services to older adults with SMI.

Priority #: 5

Priority Area: Access to Services- Criminal Justice

Priority Type: MHS

Population(s): SMI

Goal of the priority area:

Access to behavioral health services for returning citizens/criminal justice involved individuals with behavioral health needs.

Strategies to attain the goal:

Increase efforts to support access to behavioral health services for criminal justice involved individuals with behavioral health needs.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of adults with SMI referred from jail, prison, ADRC to community mental health services.

Baseline Measurement: Initial data collected prior to and during SFY18.

First-year target/outcome measurement: Progress to end of SFY18.

Second-year target/outcome measurement: Progress to end of SFY19. Increase by 3% the number of adults with SMI referred from jail, prison or a Daily Reporting Center into community mental health services above the SFY18 total.

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

Data Source:

Office of Adult Mental Health data, DBHDD Administrative Services Organization.

New Data Source(if needed):

Description of Data:

Authorizations submitted for AMH services for persons from jail, prison, ADRC

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

Indicator #: 2

Indicator: Number of adults with SMI receiving forensic peer support.

Baseline Measurement: Initial data collected prior to and during SFY18.

First-year target/outcome measurement: Progress to end of SFY18

Second-year target/outcome measurement: Progress to end of SFY19

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

Data Source:

New Data Source(if needed):

Description of Data:

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

Priority #: 6

Priority Area: Access to Community Mental Health Services

Priority Type: MHS

Population(s): SMI

Goal of the priority area:

Increase number of persons accessing community adult mental health services.

Strategies to attain the goal:

To build upon current use of mobile crisis response services, community support team, tele-mental health and PATH services.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Percentage of adults with SMI receiving: mobile crisis response services, PATH services for homeless individuals with behavioral health needs; and, tele-mental health services
Baseline Measurement: Initial data collected prior to and during SFY18.
First-year target/outcome measurement: Progress to end of SFY18.
Second-year target/outcome measurement: Progress to end of SFY19. Increase number of persons served by mobile crisis response service, and PATH and receiving telemental health by 5% above the SFY18 total.

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

Data Source:

Statewide Information System.

New Data Source(if needed):

Description of Data:

Comparison of authorizations submitted for AMH services, past – current fiscal years, monthly report census data for PATH and MCRS

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):

Percentage of adults with SMI receiving mobile crisis response services, PATH services for homeless individuals with behavioral health needs, and tele-mental health services = 36,816

Priority #: 7
Priority Area: Deaf Mental Health Services
Priority Type: MHS
Population(s): SMI, SED

Goal of the priority area:

Access to community-based non-crisis mental health therapy (individual, family and group)

Strategies to attain the goal:

DBHDD is committed to developing and implementing Communication Assessment Reports to support generally accepted professional standards regarding provision of reasonable accommodations to DBHDD services for individuals who are deaf. These standards include identifying reasonable accommodations needed to access DBHDD services. The Communication Assessment Report provides a determination of any communication limitations

and the reasonable accommodations needed for the individual to access DBHDD services in accordance with the Americans with Disabilities Act. In addition, the 2014 Belton Consent Order requires Communication Assessments to be completed for Deaf Class Members in connection with their entering non-crisis services. Deaf Class Members are defined in the order as individuals identified as deaf, receiving state or (non-MCO) Medicaid funding, and receiving non-crisis outpatient therapy services.

To identify and track appropriate provision of reasonable accommodations to services and to maintain compliance with the Belton Consent Order, it is essential that the Office of Deaf Services completes a Communication Assessment Report on all individuals identified as deaf and receiving state or (non-MCO) Medicaid funding to determine the individual communication accommodations needed.

To support this priority area DBHDD and DS have implemented several strategies including but not limited to:

- Infrastructure development:
 - o Development of a Deaf Services Management System to track individuals who are deaf and receiving DBHDD services.
 - o Hiring and training three Communication Assessment Specialists.
- Systemic development
 - o Publication of Policy 15-111: Provider Procedures for Referral and Reporting of Individuals with Hearing Loss, which obligates providers to report individuals who are deaf to the Office of Deaf Services to complete a Communication Assessment prior to intake where possible.
 - o Development of a Communication Assessment Report to document communication preferences and service accommodation needs.
- Provider Education
 - o Mandatory Behavioral Health provider trainings on Policy 15-111, the Belton Consent Order, and ADA requirements as well as portions of the provider contract and provider manual that pertain to individuals who are deaf.
 - o Presentations to various Behavioral Health providers and provider organizations at state, regional, and local levels to deliver education and clarification on reporting procedures and implementation of the Communication Assessment Report recommendations.

Annual Performance Indicators to measure goal success

Indicator #:	1
Indicator:	Percentage of individuals who: are identified as deaf; receive state or Medicaid funds; and, are authorized for community-based non-crisis mental health therapy that receive a Communication Assessment Report.
Baseline Measurement:	Number of individuals identified as deaf (adults and children), receive state (uninsured) or Medicaid (non-MCO) funds, and
First-year target/outcome measurement:	Baseline data collected in SFY18
Second-year target/outcome measurement:	10% over the baseline from SFY19 of individuals identified as deaf (adults and children), receive state (uninsured) or Medicaid (non-MCO) funds, and authorized for non-crisis outpatient mental health therapy services (individual, group, or family) will receive a Communication Assessment Report.

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

Data Source:

Administrative Services Organization (ASO) and Deaf Services Data Management System (DSMS)

New Data Source(if needed):

Description of Data:

ASO – Monthly database report of individuals identified as deaf (adults and children), receive state (uninsured) or Medicaid (non-MCO) funds, and are authorized for community-based non-crisis mental health therapy (individual, group, and family) services.
 DSMS – Monthly database report of individuals identified as deaf (adults and children), receive state (uninsured) or Medicaid (non-MCO) funds, and are authorized for community-based non-crisis mental health therapy (individual, group, and family) services that have a Communication Assessment Report.

The indicator percentage will be based on the number of individuals from the DSMS report that are present on the ASO report as compared between the first and second years.

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):

In SFY18, there were a reported 1,104 individuals receiving community based mental health services who identified as having any type of hearing loss and/or utilizing American Sign Language (ASL). Of the 1,104 individuals, 758 identified with hearing loss. 228 were identified as utilizing 'ASL' as their preferred method of communication for accessing services. 66 were reported as both 'hearing loss' and 'utilizing 'ASL', thus indicating the individual is 'deaf.'

In SFY18, ODS conducted Communication Assessments on 481 individuals.

Priority #: 8

Priority Area: Access to Coordinated Specialty Care

Priority Type: MHS

Population(s): ESMI

Goal of the priority area:

Youth and young adults ages 16-30 with First-Episode Psychosis (FEP) will receive Coordinated Specialty Care (CSC) services.

Strategies to attain the goal:

DBHDD will continue to provide technical assistance to CSC providers to ensure that their community outreach and education efforts result in referrals of eligible youth and young people to CSC programs.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of youth and young adults with FEP receiving CSC services.

Baseline Measurement: SFY16 will serve as the baseline year. DBHDD expected that providers in the three pilot sites would enroll a minimum of 60 individuals during the baseline year. The three pilot sites enrolled 87 individuals in SFY16. DBHDD's goal for SFY17 was a 10% increase in the number of individuals served in SFY16. In SFY17, 105 individuals were served in CSC programs.

First-year target/outcome measurement: DBHDD will increase the number of individuals with first-episode psychosis receiving CSC services by 5% over the number served in SFY2017.

Second-year target/outcome measurement: DBHDD will increase the number of individuals with first-episode psychosis receiving CSC services by 5% over the number served in SFY2018

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

Data Source:

Monthly reports completed by providers.

New Data Source(if needed):

Description of Data:

Number of individuals with FEP enrolled and retained in CSC services.

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):

In SFY 2018, 235 individuals were served in CSC programs. This is a 124% increase over the SFY17 number served.

DBHDD closely monitors CSC programs' monthly community outreach and education activities, enrollment rates, and program census data, and provides training and technical assistance to programs in the areas of community outreach and client engagement and retention as needed.

Priority #: 9

Priority Area: Community Mental Health Services

Priority Type: MHS

Population(s): SED

Goal of the priority area:

Access to Mental Health Services

Strategies to attain the goal:

DBHDD will work with DBHDD providers and other state agencies to support access to public mental health system services.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of youth accessing services through the public mental health system.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to the end of SFY18

Second-year target/outcome measurement: Final to the end of SFY19. Increase baseline number by 100 youth.

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

Data Source:

7. Annual Performance Indicators to measure achievement of the objective:

Medicaid and state funded claims and encounters; Georgia Collaborative Administrative Service Organization; Center of Excellence for Children's Behavioral Health, Georgia State University.

New Data Source(if needed):

Description of Data:

Data includes number of youth accessing services through DBHDD core and specialty services.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Data will be compiled from two different sources.

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 SFY18, 83,605 youth accessed services through the public mental health system.

Indicator #: 2

Indicator: Percentage of youth receiving at least one home- and community-based mental health service.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to the end of SFY18

Second-year target/outcome measurement: Final to the end of SFY19. Increase by 1% over data reported in SYF18.

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

Data Source:

Medicaid and state funded claims and encounters; Georgia Collaborative Administrative Service Organization.

New Data Source(if needed):

Description of Data:

Data includes number of youth accessing services through DBHDD providers, such as Community Support Individual and Intensive Family Intervention.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

School-based mental health services will be reported separately.

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 SFY18, of the 83,605 youth accessing services through the public mental health system, 19,792 (23.67%) received at least one home- and community-based mental health service.

Indicator #: 3

Indicator: Number of youth accessing services through the Georgia Apex school-based mental health program.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to the end of SFY18

Second-year target/outcome measurement: Final to the end of SFY 2019. Increase baseline number by 100 youth.

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

Data Source:

Data reported to Center of Excellence for Children’s Behavioral Health, Georgia State University.

New Data Source(if needed):

Description of Data:

Data includes number of youth accessing services through DBHDD Tier 1 and Tier 2 providers embedded in schools.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The data relies on providers self-reporting

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):

Based on grantee monthly progress reports (MPRs), 8,373 unique youth accessed services through the Georgia Apex school-based mental health program in SFY18. This baseline was established from the number of unique students served across 309 schools engaged. Schools engaged is indicated by the submission of three or more MPRs during academic year 2017-2018.

Indicator #: 4

Indicator: Number of youth and families receiving peer services.

Baseline Measurement: Initial data collected prior to and during SFY18

First-year target/outcome measurement: Progress to the end of SFY18

Second-year target/outcome measurement: Final to the end of SFY19). Increase by 1% over data reported in SFY18.

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

Data Source:

Medicaid claims and encounters; Georgia Collaborative Administrative Service Organization.

New Data Source(if needed):

Description of Data:

Data includes number of youth and parents receiving support through the DBHDD provider network from a certified peer.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

This will be a new measure tracked through the Georgia Collaborative Administrative Service Organization.

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:

Historically, Certified Peer Support Parent and Youth (CPS-P and CPS-Y) was a service provided as a part of High Fidelity Wraparound. CPS-P and CPS-Y positions were supported with Mental Health Block Grant funding. In the interest of long-term sustainability, the Georgia State Medicaid Plan was amended to include CPS-P and CPS-Y as a Medicaid-billable service. The ability to bill went live on October 1, 2017. Qualified providers are required to enroll and add CPS-P and CPS-Y as a part of their service array. Little to no enrollment has occurred due to unanticipated administrative barriers involving both DBHDD and the state Medicaid authority. We will attempt to modify and streamline the enrollment process. Alternatively, during SFY19 DBHDD will direct providers to add CPS-Ps and CPS-Ys to the teams at each of our four Child & Adolescent Crisis Stabilization Units.

How first year target was achieved (optional):

Priority #: 10
Priority Area: Training
Priority Type: MHS
Population(s): SED

Goal of the priority area:

Train DBHDD providers on evidence-based and/or promising practices

Strategies to attain the goal:

DBHDD will train enrolled providers in evidence-based and/or promising practices. Use of EBPs/PPs are indicated in the DBHDD Provider Manual. Youth Mental Health First Aid USA will be provided by contracted instructors certified by the National Council for Behavioral Health.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Percentage of direct care staff who are receiving training in evidence-based and/or promising practices.
Baseline Measurement: Initial data collected prior to and during SFY18
First-year target/outcome measurement: Progress to the end of SFY18
Second-year target/outcome measurement: Final to the end of SFY19. Increase by 2% over data reported in SYF18.
New Second-year target/outcome measurement(if needed):
Data Source:

DBHDD Annual Survey

New Data Source(if needed):

Description of Data:

An annual survey of providers collecting information on the types of training in evidence-based and/or promising practices received by direct care staff.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The data relies on providers: 1) being responsive, and 2) self-reporting.

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 the interest of increasing our response rate, and decreasing the burden on providers, DBHDD considered redesigning and distributing a shorter survey for this implementation reporting period. We were unable to redesign and distribute the survey due to personnel considerations. One team member went on extended medical leave. Another went on maternity leave. Once both members have returned, we will move forward with redesigning and distributing the survey to better gauge the percentage of direct care staff receiving training in evidence-based and/or promising practices.

Alternatively, each summer, DBHDD hosts a System of Care Academy (SOCA) for local, regional and state level child-serving stakeholders. Ninety (90) direct care staff attending SOCA received training in evidence-based and/or promising practices including: Dialectical Behavior Therapy; Ethics; Play Therapy; Transition to Independence; and Question, Persuade, Refer.

Indicator #:

2

Indicator:

Number of individuals trained in youth mental health first aid.

Baseline Measurement:

Initial data collected prior to SFY18: SFY17

First-year target/outcome measurement:

Progress to the end of SFY18. Increase baseline number by 50 child serving professionals.

Second-year target/outcome measurement:

Final to the end of SFY19. Increase number by 50 child serving professionals.

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

Data Source:

YMHFA contractor reports.

New Data Source(if needed):

Description of Data:

Data collected from registration lists. YMHFA is primarily designed for adults (e.g., family members, caregivers, school staff, etc.) who regularly engage with young people 12-25. However, YMHFA is also appropriate as a peer support program for older adolescents.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The DBHDD Office of Children, Young Adults & Families contracts for YMHFA to build capacity for trained individuals in the state.

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):

Thirty-two (32) people received YMHFA training during the previous reporting period. This was accomplished through two (2) events provided by Mental Health America of Georgia under contract with DBHDD. Four hundred eighty two (482) individuals received YMHFA training in SFY18. This was accomplished through 27 trainings provided by Mental Health America of Georgia under contract with DBHDD. The goal for increasing the baseline number by 50 child serving professionals trained in YMHFA was met. (1406.25% increase)

- Indicator #:** 3
- Indicator:** Number of CYF professionals participating in a Culturally and Linguistically Appropriate Services (CLAS) training.
- Baseline Measurement:** Initial data collected prior to and during SFY18
- First-year target/outcome measurement:** Progress to the end of SFY18. Baseline is SFY18.
- Second-year target/outcome measurement:** Final to the end of SFY19. Increase baseline number by 25 child-serving professionals.
- New Second-year target/outcome measurement(if needed):**

Data Source:

DBHDD contractor reports.

New Data Source(if needed):

Description of Data:

Data collected from registration lists.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

This will be a new measure tracked by DBHDD.

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):

Forty seven (47) individuals received CLAS training in SFY18. This was accomplished through two trainings provided by a CLAS consultant.

Priority #: 11

Priority Area: Improved Functioning

Priority Type: MHS

Population(s): SED

Goal of the priority area:

Children and youth receiving services will improve functioning.

Strategies to attain the goal:

Providers will work with youth and their families with the goal of improving youth functioning in homes, schools, and communities.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Percentage of youth receiving High Fidelity Wraparound services from Care Management Entity (CME) who increase functioning.

Baseline Measurement: Initial data collected prior to and during SFY18: SFY17

First-year target/outcome measurement: Progress to the end of SFY18: Increase by 1% over data reported in SFY17.

Second-year target/outcome measurement: Final to the end of SFY19. Increase by 1% over data reported in SFY18.

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

Data Source:

Center of Excellence for Children's Behavioral Health, Georgia State University; CME annual evaluation.

New Data Source(if needed):

Description of Data:

CMEs will measure functioning using the Child and Adolescent Needs and Strengths (CANS) tool.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

DBHDD is evaluating the utility of switching to a new electronic health record system in SFY18 or SFY19.

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):

During the previous reporting period, 68% of the youth in the data pool improved in functioning. The data available indicates that 73.20% of the youth improved in functioning during this reporting period. The data is based on CME youth active during the SFY who had improved CANS scores in two domains; Child Behavioral/Emotional Needs and Child Risk Behaviors. Goal of increasing by 1% over SFY17 was met.

Indicator #: 2

Indicator: Percentage of youth mental health clubhouse members who are not admitted to a higher level of care.

Baseline Measurement: Initial data collected prior to and during SFY18: SFY18

First-year target/outcome measurement: Progress to the end of SFY18: Baseline is SFY18.

Second-year target/outcome measurement: Final to the end of SFY19. Eighty percent (80%) of SFY18 mental health clubhouse members remain in the community and out of a higher level of care.

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

Data Source:

Center of Excellence for Children's Behavioral Health, Georgia State University; mental health clubhouse annual evaluation.

New Data Source(if needed):

Description of Data:

Data reported by DBHDD mental health clubhouse providers.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The data on providers self-reporting.

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):

The data available indicates that 98.30% of Mental Health Clubhouse members were not admitted to a higher level of care.

Indicator #: 3

Indicator: Percentage of school-based mental health program members who are not admitted to a higher level of care.

Baseline Measurement: Initial data collected prior to and during SFY18: SFY18

First-year target/outcome measurement: Progress to the end of SFY18: Baseline is SFY18.

Second-year target/outcome measurement: Final to the end of SFY19. Eighty percent (80%) of SFY18 SBMH members remain in the community and out of a higher level of care.

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

Data Source:

Center of Excellence for Children’s Behavioral Health, Georgia State University; Georgia Apex Program annual evaluation.

New Data Source(if needed):

Description of Data:

Data reported by DBHDD Apex providers.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The data on providers self-reporting.

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):

The data available indicates that 95.12% of school-based mental health program members were not admitted to a higher level of care. The baseline was established from 7,965 unique students served through the Georgia Apex Program in SFY18 across 309 schools engaged. Schools engaged is indicated by the submission of three or more monthly progress reports during academic year 2017-2018.

Footnotes: