Guam

UNIFORM APPLICATION FY 2023 Mental Health Block Grant Report COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 03/31/2022 - Expires 03/31/2025 (generated on 08/11/2024 6.47.52 PM)

Center for Mental Health Services
Division of State and Community Systems Development

A. State Information

State Information

State DUNS Number

Number KMXQJ59F1RK4

Expiration Date 2/26/2023 12:00:00 AM

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

Agency Name Guam Behavioral Health and Wellness Center

Mailing Address 790 Governor Carlos G. Camacho Road

City Tamuning

Zip Code 96913

II. Contact Person for the Grantee of the Block Grant

First Name Theresa

Last Name Arriola

Agency Name Guam Behavioral Health and Wellness Center

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City Tamuning

Zip Code 96913

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

From 10/1/2021

To 9/30/2022

IV. Date Submitted

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

Submission Date 12/1/2022 11:14:26 PM

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V. Contact Person Responsible for Report Submission

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Footnotes:

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B. Implementation Report

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

Priority #:	1	
Priority Area:		riencing first episode psychosis
Priority Type:	MHS	
Population(s):	SMI, SED, ESMI	
Goal of the prio		
	ng adults will have successful wellnes	s and recovery
	ng ddares will have saccessial weilines	s und receivery
Objective:		
Youth and you	ng adults will receive timely and inten	isive interventions
Strategies to att	tain the goal:	
	vith school systems to improve referra	
	acher will receive training in mental h	eaith first aid
Edit Strategies t (if needed)	o attain the objective here:	
— ——∆nnual Pe	erformance Indicators to measu	re goal success
Aimaarra	in ormanice marcators to measure	ie godi success
Indicato	or #:	1
Indicato	or:	Access to Service
Baseline	Measurement:	10
First-yea	ar target/outcome measurement:	10
Second-	-year target/outcome measurement:	10
New Se	cond-year target/outcome measurem	ent(if needed):
Data So	urce:	
referra	ls; sheets	
_		
New Da	ta Source(if needed):	
Descript	tion of Data:	
	graphic information g materials	
New De	scription of Data:(if needed)	
	ues/caveats that affect outcome mean	sures:
low pa	rticipation from school systems	
New Da	ta issues/caveats that affect outcome	measures:

Report o	of Progress Toward Go	oal Attainmen	t				
First Year 1	Γarget: ▼ Achie	eved		Not Achieved	(if not achieved,explain why)		
Reason why	target was not achieved, and c	hanges proposed to	meet target:				
	ar target was achieved (optiona						
consumers	reporting period, our collabora at the school and have successi ation barriers, and with the assis	ful wraparound meet	tings. Majorit	y of the consur	mers experienced transport		
_	to train school staff and personr with the School District Psycho					we have been	
	s in the youth and young adult p nmunity program aid assist in na imers.						
riority #:	2						
riority Area:	Families/youths involved in v	wraparound service a	and planning				
riority Type:	MHS	'	, ,				
opulation(s):	SMI, SED, ESMI						
oal of the priority							
	e actively involved in the develop	oment and implemen	itation of serv	vice plans			
-							
Objective:							
Families/youths wil	II receive orientation on service	planning and partici	pation of car	e 			
trategies to attain	the goal:						
coordination with f							
timely team meetin share decision mak	=						
if needed)	tain the objective here: rmance Indicators to meas	ure goal success					
Indicator #:		1					
Indicator:		Access to Service					
Baseline Me	asurement:	150					
First-year ta	rget/outcome measurement:	100					
Second-year	r target/outcome measurement:	: 100					
New Second	l-year target/outcome measure	ment(if needed):					
Data Source	:						
client demo	ographic						
New Data So	ource(if needed):						
Description	of Data:						

Electronic health record

New Description of Data:((if needed)
Data issues/caveats that a	affect outcome measures:
client/family may decline	
	that affect outcome measures:
New Data issues/caveats	that affect outcome measures.
Daniel of Duanie	an Tanand Carl Attainment
	ss Toward Goal Attainment Achieved Not Achieved (if not achieved,explain why)
First Year Target:	Achieved (if not achieved,explain why)
	ot achieved, and changes proposed to meet target:
How first year target was	achieved (optional):
	nrolled and provide wraparound services to 201 children/families. Each child/family received care coordination d in the shared decision making process during wrap care planning.
Priority #: 3	
Priority Area: Transition	Services
Priority Type: MHS	
Population(s): SMI, SED, E	ESMI
ioal of the priority area:	
Transition aged youths will seam	nlessly transition into adult services or other appropriate services
Objective:	
Improve transition and warm har	nd-off between youth and adult services
Strategies to attain the goal:	
Annual review of transition proto Provide periodic training to staff Update families on the transition Provide information to partner a	f on transition protocol;
edit Strategies to attain the object if needed)	tive here:
—Annual Performance Indi	icators to measure goal success
Indicator #:	1
Indicator:	Number of youths transitioned from child to adult services
Baseline Measurement:	50
First-year target/outcome	e measurement: 50
Second-year target/outco	ome measurement: 50
New Second-year target/o	outcome measurement(if needed):
Data Source:	
referrals to adult services	s
New Data Source(if neede	ed):

Description of Data:	
demographic informa	tion
New Description of Da	ta:(if needed)
Data issues/caveats th	at affect outcome measures:
youth may drop out b	pefore completing transition process to adult services
New Data issues/cavea	ats that affect outcome measures:
Report of Prog	ress Toward Goal Attainment
First Year Target:	☐ Achieved Achieved (if not achieved,explain why)
Reason why target wa	s not achieved, and changes proposed to meet target:
population, only a sm 18 year olds, only a s accommodation that continue in adult serv	red, 9 transitions to adult services occurred in FY22. Target not met due to numerous factors: 1) of the total service all proportion represented youth of age to transition (17-18 years old), 2) of the total service population of 17 & mall proportion were ready for graduation and not continuing in school due to having an IEP or some other extended their schooling, 3) of the total service population meeting criteria for transition, not all clients needed to rices and successfully graduated from needing further supports. Proposed changes include re-examining target d refining policy and protocol for transition within the organization and to external partners.
How first year target v	vas achieved (optional):
ty#: 4	
t y Area: Familie	s/youths accessing peer support services
ty Type: MHS	
ation(s): SMI, SE	D, ESMI
of the priority area:	
ly and youths will receive	peer support services
tive:	
ing on peer support and	mentoring
gies to attain the goal:	
	to engage families and youths
trategies to attain the ob	
Indicator #:	1
Indicator #:	Number of individuals receiving peer support services and training
Baseline Measuremen	
First-year target/outco	
Second-year target/ou	
, ,	
Data Source:	et/outcome measurement(if needed):

Documentation of participation	
New Data Source(if needed):	
Description of Date:	
Description of Data:	
sign in sheets certification of completion	
New Description of Data:(if needed)	
Data issues/caveats that affect outcome me	asures:
low number of referrals; youth may drop out of service	
New Data issues/caveats that affect outcom	ne measures:
Report of Progress Toward Go	
First real rarget.	Ned Not remeved (y not defleved, explain viny)
Reason why target was not achieved, and ch	hanges proposed to meet target:
How first year target was achieved (optional	0:
	FY22. Target was accomplished through the incorporation of peers in weekly case promote the involvement of peer supports when clinical meaningful to do so.
riority #: 5	
riority Area: SED youth graduating from h	nigh school
riority Type: MHS	
opulation(s): SED, ESMI	
oal of the priority area:	
Youth graduating from high school	
bjective:	
Youth and families participate in WRAP around serv	rices
trategies to attain the goal:	
WRAP activities and interventions are funded	
Collaboration with school to promote WRAP aroun	d services
dit Strategies to attain the objective here: f needed)	
—Annual Performance Indicators to measu	ure goal success
Indicator #:	1
Indicator:	Increase access to service
Baseline Measurement:	30
First-year target/outcome measurement:	30

New Second	-		
Data Source			
referrals fr	om schools		
New Data S	ource(if needed):		
Description	of Data:		
demograp	hic information of	youths participating in serv	vices
New Descri	otion of Data:(if n	eeded)	
Data issues,	caveats that affec	t outcome measures:	
youth drop	pping out of schoo	ol/services	
New Data is	sues/caveats that	affect outcome measures:	
Report	of Progress T	Toward Goal Attain	nment
First Year	•	Achieved	Not Achieved (if not achieved,explain why)
	_	chieved, and changes propo	osed to meet target
of clients on an IEP), individuals accomplish	uccessfully gradua eligible for high sc 2) youth struggled able to successfu	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual s Ily graduate from high scho is included as part of each	
of clients e on an IEP), individuals accomplish supports f	uccessfully gradua eligible for high sc 2) youth struggled able to successfu nment/graduation	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual s lly graduate from high scho is included as part of each t can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic
of clients e on an IEP), individuals accomplish supports f	uccessfully gradua eligible for high sc 2) youth struggled able to successfu nment/graduation or goal attainment	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual s lly graduate from high scho is included as part of each t can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic
of clients e on an IEP), individuals accomplish supports f	uccessfully gradua eligible for high sc 2) youth struggled able to successfu nment/graduation or goal attainment	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual s lly graduate from high scho is included as part of each t can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic
of clients on an IEP), individuals accomplish supports for the work of the control of the contro	uccessfully gradua eligible for high sc 2) youth struggled able to successfunment/graduation or goal attainment ear target was achi	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual st lly graduate from high scho is included as part of each to can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic
of clients on an IEP), individuals accomplish supports f	uccessfully gradua eligible for high sc 2) youth struggled able to successfunment/graduation or goal attainment ear target was achi	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual st lly graduate from high scho is included as part of each to can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary
of clients on an IEP), individuals accomplish supports f	eligible for high sc 2) youth struggled able to successfunment/graduation or goal attainment ear target was achi	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual st lly graduate from high scho is included as part of each to can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary
of clients e on an IEP), individuals accomplish supports for the How first year. #: Area:	eligible for high sc 2) youth struggled able to successfundent/graduation or goal attainment ear target was achi 6 SMI adults will MHS SMI	ited high school for FY22. To hool graduation (e.g. stude d in transition from virtual st lly graduate from high scho is included as part of each to can be involved.	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary
of clients of on an IEP), individuals accomplish supports for the work of the	eligible for high sc 2) youth struggled able to successfundent/graduation or goal attainment ear target was achi 6 SMI adults will MHS SMI	ted high school for FY22. To hool graduation (e.g. studed in transition from virtual stilly graduate from high schools included as part of each transition to the can be involved. Sieved (optional):	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary
of clients of on an IEP), individuals accomplish supports for the work of the	eligible for high sc 2) youth struggled able to successfundent/graduation or goal attainment ear target was achi MHS SMI	ted high school for FY22. To hool graduation (e.g. studed in transition from virtual stilly graduate from high schools included as part of each transition to the can be involved. Sieved (optional):	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary
of clients of on an IEP), individuals accomplish supports for the work of the	eligible for high so 2) youth struggled able to successfurment/graduation for goal attainment ear target was achi MHS SMI area:	ted high school for FY22. Thool graduation (e.g. studed in transition from virtual studed in transition from high schools included as part of each transition can be involved. Seved (optional): complete supported employed and options	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary
of clients of on an IEP), individuals accomplish supports for the work of the	eligible for high so 2) youth struggled able to successful ment/graduation or goal attainment ar target was achi	ted high school for FY22. Thool graduation (e.g. studed in transition from virtual studed in transition from high schools included as part of each transition can be involved. Seved (optional): complete supported employed and options	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary by ment activities and training
of clients of on an IEP), individuals accomplish supports for the will confirm the will confirm the will confirm the well and the will confirm the well and the will confirm the will be will confirm the will be will	eligible for high so 2) youth struggled able to successful ment/graduation or goal attainment ar target was achi	ted high school for FY22. Thool graduation (e.g. studed in transition from virtual studed in transition from high schools included as part of each transition can be involved. Seved (optional): complete supported employed and options	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary by ment activities and training
of clients of on an IEP), individuals accomplish supports for the first year. How first year. Type: tion(s): f the priority ase employm ve: amers will continue to attain disupported	eligible for high so 2) youth struggled able to successful ment/graduation or goal attainment ar target was achi	ted high school for FY22. Thool graduation (e.g. studed in transition from virtual studed in transition from high schools included as part of each transition can be involved. The several complete supported employed and options The sume writing, application and options The several complete supported employed and options	arget was not achieved due to multiple factors including: 1) reduced enrollment ents who were not yet in the 12th grade or who were not continuing in school school work to in-person classes, potentially impacting the number of pol. Changes to meet target includes ensuring that academic youth client's treatment plan in order to track progress and ensure necessary by ment activities and training

Indicator:	Number of SMI consumers who become employed
Baseline Measurement:	0
First-year target/outcome measurement:	10
Second-year target/outcome measurement:	10
New Second-year target/outcome measurement	ent(if needed):
Data Source:	
referrals, certificate of attendance	
New Data Source(if needed):	
Description of Data:	
demographic information	
New Description of Data:(if needed)	
Data issues/caveats that affect outcome meas	sures:
consumers may drop out of training or progr	ram
New Data issues/caveats that affect outcome	
ivew Data issues/Caveats triat affect outcome	iiicasuics.
Report of Progress Toward Goa	al Attainment
training activities. However, not many busine	cted wellness group sessions regarding employment and connected the toolkits in the esses are hiring due to covid emergency. Additionally, the federal funding to support the for recipients to access. support for day care, fuel, rental are among the funding offered to
How first year target was achieved (optional):	
t y #: 7	
ty Area: Perception of Care Survey	
ty Type: MHS	
ation(s): SMI, SED, ESMI	
of the priority area:	pulation
ove mental health services for SED/SMI/ESMI po	pulation
tive:	
umer will participate in perception of care surve	у
gies to attain the goal:	
information of survey activities	
trategies to attain the objective here:	
eded)	

Indicator #:		1
Indicator:		Number of consumers participating in the survey
Baseline Mea	surement:	0
First-year tar	get/outcome measurement:	100
Second-year	target/outcome measurement:	100
New Second-	year target/outcome measurem	ent(if needed):
Data Source:		
consumer su	urvey instrument	
New Data So	urce(if needed):	
Description o	f Data:	
consumer su	urvey instrument	
	tion of Data:(<i>if needed)</i> aveats that affect outcome meas	sures:
	ay refuse to participate in survey be difficult for consumers to part	
First Year Ta	target was not achieved, and cha	ed Not Achieved (if not achieved,explain why) unges proposed to meet target:
_	r target was achieved (optional):	
	nts for the next fiscal year	h consumers requesting for their input in the survey. Our goal is to reach a higher number
riority #:	8	
iority Area:	SMI adults will have access to	peer support
riority Type:	MHS	
opulation(s):	SMI	
oal of the priority a	rea:	
Consumers will have	e access to to peer support trainii	ng/mentoring activities
bjective:		
Consumers will com	plete training in peer support an	d mentoring
rategies to attain th	ne goal:	
	m will market the peer support to	raining
lit Strategies to atta f needed)	ain the objective here:	

Indicator #:	1
Indicator:	Number of individuals receiving peer support services and training
Baseline Measurement:	10
	15
First-year target/outcome measurement:	
Second-year target/outcome measurement:	
New Second-year target/outcome measuren Data Source:	nent(<i>if neeaea</i>):
referral for peer support activities sign in sheets	
New Data Source(if needed):	
Description of Data:	
consumer demographic	
New Description of Data:(if needed)	
New Description of Data.(if Needed)	
Data issues/caveats that affect outcome mea	
low number of participants; consumer may drop out of training	
New Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go	
First Year Target: Achie	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	anges proposed to meet target:
Due to COVID-19, the execution of in-person to transportation, time, and/or a shift of pr	on sessions was difficult to conduct. Some consumers had difficulty attending sessions due iority such as housing.
How first year target was achieved (optional)):
ry #: 9	
y Area: SMI adults participate in grou	up activities and therapy
y Type: MHS	
ation(s): SMI	
f the priority area:	
ass wellness and resovery skills	
ase wellness and recovery skills	
tive:	
	ir wellness and recovery

Integrate evidence-based skill building activities, strategies and interventions within the group treatment; provide training to staff in group

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facilitation; purchase treatment materials and supplies; identify barriers to consumer participation

Indicator #:	1
Indicator:	Access to Service
Baseline Measurement:	30
First-year target/outcome measureme	nt: 30
Second-year target/outcome measure	ment: 30
New Second-year target/outcome mea	
Data Source:	
sign in sheets activity schedule staff training	
New Data Source(if needed):	
Description of Data:	
consumer demographic	
New Description of Data:(if needed) Data issues/caveats that affect outcom consumer dropping out of group acti	vities
New Description of Data:(if needed) Data issues/caveats that affect outcom consumer dropping out of group acti New Data issues/caveats that affect outcom	vities utcome measures:
New Description of Data:(if needed) Data issues/caveats that affect outcom consumer dropping out of group acti New Data issues/caveats that affect outcom consumer dropping out of group actions.	vities utcome measures: d Goal Attainment
New Description of Data:(if needed) Data issues/caveats that affect outcom consumer dropping out of group acti New Data issues/caveats that affect ou Report of Progress Toward First Year Target:	vities utcome measures: d Goal Attainment Achieved Not Achieved (if not achieved, explain why)
New Description of Data: (if needed) Data issues/caveats that affect outcom consumer dropping out of group acti New Data issues/caveats that affect out Report of Progress Toward First Year Target: Reason why target was not achieved, and only 19 of the total 30 projected participarticipating is lack of transportation	vities utcome measures: d Goal Attainment
New Description of Data: (if needed) Data issues/caveats that affect outcom consumer dropping out of group acti New Data issues/caveats that affect out Report of Progress Toward First Year Target: Reason why target was not achieved, and only 19 of the total 30 projected participating is lack of transportation convenient for the participants, consumptions of the convenient of the participants, consumptions of the convenient for the participants.	Achieved Not Achieved (if not achieved,explain why) and changes proposed to meet target: icipants participated in the in-person CBT, social skills and family support group. Challenges in an ontinterested in the group activities being offered, the hours that group are offered are not tumer has children and does not have a sitter. In the new fiscal year more group sessions will be
New Description of Data: (if needed) Data issues/caveats that affect outcome consumer dropping out of group actions of the Data issues/caveats that affect outcome consumer dropping out of group actions of the Data issues/caveats that affect outcome convenient for the participants, consumptions of the Data issues/caveats that affect outcome convenient for the participants of the Data issues/caveats that affect outcome convenient for the participants, consumptions of the Data issues/caveats that affect outcome convenient for the participants, consumptions of the Data issues/caveats that affect outcome convenient for the participants, consumptions of the Data issues/caveats that affect outcome convenient for the Data issues/caveats that aff	Achieved Not Achieved (if not achieved,explain why) and changes proposed to meet target: icipants participated in the in-person CBT, social skills and family support group. Challenges in an ontinterested in the group activities being offered, the hours that group are offered are not tumer has children and does not have a sitter. In the new fiscal year more group sessions will be
New Description of Data: (if needed) Data issues/caveats that affect outcome consumer dropping out of group actions. New Data issues/caveats that affect outcome. Report of Progress Toward First Year Target: Reason why target was not achieved, and only 19 of the total 30 projected participating is lack of transportation convenient for the participants, consumptions offered and at various times. How first year target was achieved (op the second of the secon	Achieved Not Achieved (if not achieved,explain why) and changes proposed to meet target: icipants participated in the in-person CBT, social skills and family support group. Challenges in a not interested in the group activities being offered, the hours that group are offered are not cumer has children and does not have a sitter. In the new fiscal year more group sessions will be itional):
New Description of Data: (if needed) Data issues/caveats that affect outcome consumer dropping out of group actions. New Data issues/caveats that affect outcome. Report of Progress Toward First Year Target: Reason why target was not achieved, and only 19 of the total 30 projected participating is lack of transportation convenient for the participants, consumptions offered and at various times. How first year target was achieved (op the second of the secon	Achieved Not Achieved (if not achieved,explain why) and changes proposed to meet target: icipants participated in the in-person CBT, social skills and family support group. Challenges in a not interested in the group activities being offered, the hours that group are offered are not cumer has children and does not have a sitter. In the new fiscal year more group sessions will be itional):

Objective:

Edit Strategies to attain the objective here:

(if needed)

n Mami will make available services to consum	ers referred to the program
trategies to attain the objective here: eded)	
I B f I . P	and the same
nnual Performance Indicators to measu	ire goal success
Indicator #:	1
Indicator:	Number of consumers accessing the Sagan Mami enrichment center
Baseline Measurement:	25
First-year target/outcome measurement:	30
Second-year target/outcome measurement:	20
New Second-year target/outcome measuren	nent(<i>if needed</i>):
Data Source:	
Daily sign in sheets, program reports, referr	als, consumer intake form
New Data Source(if needed): Description of Data:	
Sign in sheets referrals client demographic	
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	asures:
Individuals may drop out of services individuals may refuse to complete surveys	
New Data issues/caveats that affect outcom	e measures:
Papart of Progress Toward Co	aal Attainment
Report of Progress Toward Go	
First fear rarget.	
Reason why target was not achieved, and ch	nanges proposed to meet target:
How first year target was achieved (optional	9:
Apart from in-person activities, staffs condu	ucted wellness checks via telephone to ensure consumer(s) who haven't attended group services were needed. During this reporting period 3 consumers had passed away and

Priority #: 11

Priority Area: Individuals in crisis

Priority Type: MHS

Population(s): SMI, SED, ESMI

Goal of the priority area:

crisis resolution						
Objective:						
Individuals in crisis will receive timely crisis intervent	cions					
Strategies to attain the goal:						
staff training on crisis intervention market 988 line						
Edit Strategies to attain the objective here: (if needed)						
—Annual Performance Indicators to measu	re goal success					
Indicator #:	1					
Indicator:	Number of individuals receiving crisis services					
Baseline Measurement:	100					
First-year target/outcome measurement:	100					
Second-year target/outcome measurement:	100					
New Second-year target/outcome measurem	nent(if needed):					
Data Source:						
electronic health record						
New Data Source(if needed):						
Description of Data:						
client demographic						
New Description of Data:(if needed) Data issues/caveats that affect outcome mea	isures:					
consumer may refuse services						
New Data issues/caveats that affect outcome	New Data issues/caveats that affect outcome measures:					
Report of Progress Toward Go	al Attainment					
First Year Target:	ved Not Achieved (if not achieved,explain why)					
Reason why target was not achieved, and ch	anges proposed to meet target:					
How first year target was achieved (optional)) :					
The availability of 24-hour crisis service inclu	uding the use of mobile response services ensured timely access to services					
0930-0168 Approved: 03/31/2022 Expires: 03/31/2025						
Footnotes:						

Printed: 8/11/2024 6:47 PM - Guam - 0930-0168 Approved: 03/31/2022 Expires: 03/31/2025

COVID Testing and Mitigation Program Report for the Community Services Mental Health Block Grant (MHBG) for Federal Fiscal Year Ending September 30, 2022 Due Date: December 30, 2022

For the Federal Fiscal Year ending September 30, 2022, please upload a Word or PDF document in Table 1 of the FY23 MHBG Report on the COVID Testing and Mitigation activities and expenditures by answering the following question, due by December 30, 2022.

List the items and activities of expenditures completed from October 1, 2021 thru September 30, 2022 (if no activities were completed, note here with Not Applicable)

COVID Testing and Mitigation Program Report for STATE										
Item/Activity	Amount of Expenditure									
COVID19 Personnel Costs	\$68,989.50									
Tester Training:										
 conducted by Department of Public Health and Social Services (DPHSS) personnel at RanLab, Tamuning September 2021, for Abbot ID and Binax Now January 2022, new forms of testing introduced. CUE and FlowFlex. COVID 19 Education: 										
 Youth Mental Health First Aid Training (10/19/202 1) Research conducted on COVID1 9 variants, vaccines, and tests. Created information pamphlets to hand out when necessary and curated designated information to relay for certain outcomes and situations. Such as for individuals who test either negative or positive for COVID19, questions regarding vaccines and accuracy of the tests, and how COVID19 works to attack the human body. January 2022, implemented a COVID19 questionnaire to determine individuals' understanding of COVID19, how he or she was affected, and if assistance is needed to 										

receive necessary care/service from GBHWC. As well as provide information on the assistance/services DPHSS are able to provide in regards to COVID19. • Utilizing guidance provided by DPHSS, testers were able to provide COVID19 vaccination and testing information for the public including providing pamphlets when needed. > COVID19 Testing • (Unvaccinated GovGuam Employees and consumers) testing. Abbott ID Now Machine (acquired from DPHSSRanLab) Abbott ID Now Test Kits (acquired from DPHSS RanLab) · Abbott Binax Now Test Kits (acquired from DPHSS RanLab) · CUE Machines and Test Kits (acquired from DPHSS RanLab) · FlowFlex Kits (acquired from DPHSS RanLab) · PCR Kits (VTM's); required refrigeration during storage and transportation · Public Health Forms and Results Stickers, Clipboards, Car tags (printed & laminated), · Tables and chairs · Hazard trash bag and disposal bins · Full PPE (gown, gloves, mask, and face shield)	
· Tables and chairs · Hazard trash bag and disposal bins	
face shield)	
· Computer and Printer/Scanner (for DPHSS COVID19 Results) · Portable cart which contained materials	
Office supplies	\$5,390.00

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

This table describes expenditures for public mental health services provided by mental health providers funded by the state mental health agency by source of funding.

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Activity (See instructions for using	Source of Funds										
Row 1.)	A. Substance Abuse Block Grant	B. Mental Health Block Grant	C. Medicaid (Federal State & Local)	D. Other Federal Funds (e.g. ACF (TANF), CDC, CMS (Medicare), SAMSHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other	H. COVID -19 Relief Funds (MHBG) ¹	I. ARP Funds (MHBG) 2		
1. Substance Abuse Prevention and Treatment											
a. Pregnant Women and Women with Dependent Children											
b. All Other											
2. Primary Prevention ³		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
3. Evidence-Based Practices for Early Serious Mental Illness including First Episode Psychosis (10 percent of total award MHBG) ⁴	erious Mental Illness ing First Episode sis (10 percent of total		\$0	\$3,110	\$0	\$0	\$0	\$62,193	\$0		
4. Tuberculosis Services											
5. Early Intervention Services for HIV											
6. State Hospital			\$0	\$0	\$1,852,821	\$0	\$0	\$0	\$0		
7. Other Psychiatric Inpatient Care			\$0	\$0	\$0	\$0	\$0	\$0	\$0		
8. Other 24-Hour Care (Residential Care)		\$94,962	\$0	\$0	\$5,229,492	\$0	\$0	\$0	\$0		
9. Ambulatory/Community Non- 24 Hour Care		\$162,392	\$0	\$0	\$5,624,071	\$0	\$0	\$52,695	\$0		
10. Administration (Excluding Program and Provider Level) ⁵		\$26,630	\$0	\$0	\$1,722,833	\$0	\$0	\$0	\$0		
11. Crisis Services (5 percent set -aside) ⁶		\$0	\$0	\$1,461,846	\$0	\$0	\$0	\$0	\$0		
12. Total	\$0	\$283,984	\$0	\$1,464,956	\$14,429,217	\$0	\$0	\$114,888	\$0		

¹The 24-month expenditure period for the COVID-19 Relief supplemental funding is **March 15, 2021 – March 14, 2023**, which is different from the expenditure period for the "standard" MHBG. Per the instructions, the standard MHBG expenditures captured in Columns A – G are for the state expenditure period of July 1, 2021 – June 30, 2022, for most states. Column H should reflect the spending for the state reporting period. The total may reflect the COVID-19 Relief allotment portion used during the state reporting period.

²The expenditure period for The American Rescue Plan Act of 2021 (ARP) supplemental funding is **September 1, 2021 – September 30, 2025**, which is different from the expenditure period for the "standard" MHBG. The standard MHBG expenditures captured in Columns A – G are for the state expenditure period of July 1, 2021 - June 30, 2022, for most states." Column I should reflect the spending for the state reporting period. The total may reflect the ARP allotment portion used during the state reporting period.

³While the state may use state or other funding for these services, the MHBG funds must be directed toward adults with SMI or children with SED.

⁴Column 3B should include Early Serious Mental Illness programs funded through MHBG set aside.

⁵Per statute Administrative expenditures cannot exceed 5% of the fiscal year award.

⁶Row 11 should include Crisis Services programs funded through different funding sources, including the MHBG set aside. States may expend more than 5 percent of their MHBG allocation.

Footnotes:	F	0	0	tn	0	te	es	
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MHBG Table 2B (URS Table 7A) - MHBG State Agency First Episode Psychosis Expenditure Report

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Activity (See instructions for using Row 1.)						
	A. Mental Health Block Grant	B. Medicaid (Federal State & Local)	C. Other Federal Funds (e.g. ACF (TANF), CDC, CMS (Medicare), SAMSHSA, etc.)	D. State Funds	E. Local Funds (excluding local Medicaid)	F. Other
CSC-Evidences-Based Practices for First Episode Psychosis ¹	\$62,193	\$0	\$0	\$0	\$0	\$0
Training for CSC Practices	\$0	\$0	\$0	\$0	\$0	\$0
Planning for CSC Practices	\$0	\$0	\$0	\$0	\$0	\$0
2. Other Early Serious Mental Illnesses programs (other than FEP or partial CSC programs)	\$0	\$0	\$3,110	\$0	\$0	\$0
3. Training for ESMI	\$0	\$0	\$0	\$0	\$0	\$0
4. Planning for ESMI	\$0	\$0	\$0	\$0	\$0	\$0
5. Total	\$62,193	\$0	\$3,110	\$0	\$0	\$0
Comments on Data:						

¹When reporting CSC- Evidence Based Practices for First Episode Psychosis, report only those programs that are providing all the components of a CSC model. If the state uses only certain components of a CSC model specifically for FEP, please report them in row 2.

Note, The Totals for this table should equal the amounts reported on Row 3 (Evidence-Based Practices for Early Serious Mental Illness) on MHBG Table 2a (URS Table 7a)

Footnotes:			

MHBG Table 2C (URS Table 7B) - MHBG State Agency Crisis Services Expenditures Report

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Source of Funds										
Services	A. Mental Health Block Grant	B. Medicaid (Federal State & Local)	C. Other Federal Funds(e.g. ACF (TANF), CDC, CMS (Medicare), SAMSHSA, etc.)	D. State Funds	E. Local Funds (excluding local Medicaid)	F. Other	G. Total			
1. Call Center	\$0	\$0	\$394,561	\$0	\$0	\$0	\$394,561			
2. 24/7 Mobile Crisis Team	\$0	\$0	\$1,067,285	\$0	\$0	\$0	\$1,067,285			
3. Crisis Stabilization Programs	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
4. Training and Technical Assistance	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
5. Strategic Planning and Coordination	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
6. Total	\$0	\$0	\$1,461,846	\$0	\$0	\$0	\$1,461,846			

Comments on Data:

Mental Health Block Grant funding includes one-time funding i.e. 5% Crisis Set-Aside, and ARP sources. If the funding source is not captured in the table, please report the name of 'Other' funding per service under the commetns section.

Footnotes:			

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

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Statewide Expenditures for Children's Mental Health Services											
Actual SFY 1994	Expense Type										
\$922,394 \$1,300,549 \$2,844,065 © Actual © Estin											
If <u>estimated</u> expenditures are provided, please indicate when <u>actual</u> expenditure data will be submitted to SAMHSA: States and jurisdictions are required not to spend less than the amount expended in FY 1994.											
0930-0168 Approved: 03/31/2022 Expires: 03/31/2025											
Footnotes:											

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

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

Activity	A. MHBG	B. COVID-19 Funds ^a	C. ARP Funds ^b	
1. Information Systems	\$0	\$0	\$ 507	
2. Infrastructure Support	\$48,478	\$0	\$0	
3. Partnerships, Community Outreach and Needs Assessment	\$0	\$0	\$0	
4. Planning Council Activities	\$ 3,490	\$0	\$0	
5. Quality Assurance and Improvement	\$0	\$0	\$0	
6. Research and Evaluation	\$0	\$0	\$0	
7. Training and Education	\$ 26,630	\$0	\$0	
Total Non-Direct Services	\$ 78,598	\$0	\$ 507	
Comments on Data:				

0330 0100 Approved: 03/3 1/2022 Expires: 03/3 1/2023
Footnotes:
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^a The 24-month expenditure period for the COVID-19 Relief supplemental funding is **March 15, 2021 – March 14, 2023,** which is different from the expenditure period for the "standard" MHBG. Per the instructions, the standard MHBG expenditures captured in Columns A - C are for the state expenditure period of July 1 – June 30 of the same year for most states. Column B should reflect the spending for the state reporting period. The total may reflect the COVID-19 Relief allotment portion used during the state budget reporting period.

^b The expenditure period for The American Rescue Plan Act of 2021 (ARP) supplemental funding is **September 1, 2021 – September 1, 2025**, which is different from the expenditure period for the "standard" MHBG. Per the instructions, the standard MHBG expenditures captured in Columns A – C are for the state expenditure period of July 1 – June 30 of the same year, for most states. Column C should reflect the spending for the state reporting period. The total may reflect the ARP allotment portion used during the state reporting period.

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

	Source of Funds										
Entity Number	Area Served (Statewide or Sub- State Planning Area)	Provider/Program Name	Street Address	City	State	Zip	Total Block Grant Funds	Adults with Serious Mental Illness	Children with Serious Emotional Disturbance	Set-aside for FEP Programs	Set-aside for ESMI Programs
1	Statewide	Guma Mami Inc.	117-A Chalan Guam' Yu'us	Sinajana	GU	96910	\$466,446.00	\$131,030.00	\$0.00	\$0.00	\$0.00
Total							\$466,446.00	\$131,030.00	\$0.00	\$0.00	\$0.00

0930-0168 Approved: 03/31/2022 Expires: 03/31/2025
Footnotes:

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

Period			Expenditures	<u>B1 (2020) + B2 (2021)</u> 2
(A)			(B)	(C)
SFY 2020 (1))		\$20,034,520	
SFY 2021 (2)			\$20,269,591	\$20,152,056
SFY 2022 (3)	2		\$17,228,333	
Are the expenditure amou	nts reporte Yes		umn B "actual" expenditures for the State fisca	Il years involved?
SFY 2021	Yes	X		
SFY 2022	Yes	X	No	
estimated expenditures	are provide	ed, pleas	se indicate when actual expenditure data will b	be submitted to SAMHSA:
930-0168 Approved: 03/3	1/2022 Expi	res: 03/3	31/2025	
Footnotes:				

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

This table summarizes the estimates of adults residing within the state with serious mental illness (SMI) and children residing within the state with serious emotional disturbances (SED). The table calls for estimates for two-time periods, one for the report year and one for three years into the future. CMHS will provide this data to states based on the standardized methodology developed and published in the Federal Register and the state level estimates for both adults with SMI and children with SED.

Expenditure Period Start Date:	Expenditure Period End Date:		
		Current Report Year	Three Years Forward
Adults with SMI			
Children with SED			
0930-0168 Approved: 03/31/2022 E	expires: 03/31/2025	·	
Footnotes:			

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

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

Table 8A

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

Total American Indian or Asian Black or African Native Hawaiian or White More Than One Race Race Not Available

		T	otal			rican Ir aska N	ndian or ative		Asia	n		k or A Americ	frican an			aiian or Islander		White	е		Than C Report	ne Race ed	Race	Not A	/ailable						
	Female	Male	Not Available	Total	Female	Male	Not Available	Female	Male	Not Available	Female		Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female		Not Available						
0-12 years	83	111	2	200	1	0	0	0	16	12	0	1	3	2	0	0	60	88	3	1	3	8	1	0	0	0	0	0 0	1	0	0
13-17 years	215	193	3	421	1	0	0	0	56	32	5	0	8	3	0	0	138	148	3	2	11	10	2	1	0	0	0	0 1	0	0	0
18-20 years	88	102	0	194	0	0	0	0	24	18	1	0	2	2	1	0	57	79	2	0	5	3	0	0	0	0	0	0 0	0	0	0
21-24 years	158	207	2	372	3	2	0	0	50	45	2	1	1	5	0	0	89	141	3	1	14	13	0	0	0	0	0	0 1	1	0	0
25-44 years	717	1,256	10	1,991	4	10	0	0	166	195	2	1	13	22	1	0	438	955	4	8	94	63	1	1	0	0	0	0 2	11	0	0
45-64 years	343	542	3	889	1	1	0	0	100	101	1	1	1	10	0	0	212	381	0	2	26	44	0	0	0	0	0	0 3	5	0	0
65-74 years	77	70	2	149	0	1	0	0	30	18	0	0	1	1	0	0	38	36	0	1	8	13	0	1	0	0	0	0 0	1	0	0
75 and older	28	15	0	43	0	0	0	0	13	7	0	0	0	0	0	0	12	5	0	0	3	3	0	0	0	0	0	0 0	0	0	0
Age not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 0	0	0	0
Total	1,709	2,496	22	4,259	10	14	0	0	455	428	11	4	29	45	2	0	1,044	1,833	15	15	164	157	4	3	0	0	0	0 7	19	0	0
Pregnant Women	0	0	0	0	0		•	0		•	0		•	0		•	0			0			0						-		_

Are these numbers unduplicated?	V	Unduplicated	and Co	Duplicated : between Hospitals ommunity	Duplicated : Among Community Programs
	and ac	Duplicated between children dults		Other : describe	

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

Table 8B

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

	Not H	ispanic or	Latino	His	panic or La	ntino	Hispanio	or Latino O Available	rigin Not		To	otal				
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total			
0-12 years	1	8	0	0	2	2	0	0	80	101	4	2	83	111	2	200
13-17 years	6	9	0	0	4	1	0	0	205	183	10	3	215	193	3	421
18-20 years	6	7	0	0	0	0	0	0	82	95	4	0	88	102	0	194
21-24 years	13	12	0	0	1	2	0	0	144	193	5	2	158	207	2	372
25-44 years	67	100	0	0	11	17	0	0	639	1,139	8	10	717	1,256	10	1,991
45-64 years	81	82	1	0	2	3	0	0	260	457	0	3	343	542	3	889
65-74 years	28	13	0	0	0	0	0	0	49	57	0	2	77	70	2	149
75 and older	7	0	0	0	1	0	0	0	20	15	0	0	28	15	0	43
Age not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	209	231	1	0	21	25	0	0	1,479	2,240	31	22	1,709	2,496	22	4,259
Pregnant Women	0			0			0			0	0	0	0			

1 1		1	1	1	1	1	i	
Comments on Data (for Age):								
Comments on Data (for Gender):								
Comments on Data (for Ethnicity):								
Comments on Data (Overall):								
0930-0168 Approved: 03/31/2022 Expires: 0.	3/31/2025							

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

This table provides a profile for the clients that received public funded mental health services in community mental health settings, in state psychiatric hospitals, in other psychiatric inpatient programs, and in residential treatment centers for children.

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

Service Setting		Age ()-17			Age 1	8-20		. ,	Age 2	1-64			Age	65+	3			Available		,		Total		
	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Total
Community Mental Health Programs	185	214	10	4	58	60	0	1	909	1,283	9	5	95	54	0	1	0	0	0	0	1,247	1,611	19	11	2,888
State Psychiatric Hospitals	34	26	2	2	9	18	1	0	129	163	2	0	6	12	0	1	0	0	0	0	178	219	5	3	405
Other Psychiatric Inpatient	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Residential Treatment Centers	4	2	0	0	0	1	0	0	12	10	0	0	1	6	0	0	0	0	0	0	17	19	0	0	36
Institutions in the Justice System	3	4	0	0	0	3	0	0	14	61	0	0	1	1	0	0	0	0	0	0	18	69	0	0	87

in the Justice System	3	4	0	0	0	3	0	0	14	61	0	0	1	1	0	0	0	0	0	0	18	69	0	0	87
Comments o	n Data (fo	or Age):																							
Comments o	n Data (fo	or Gende	r):																						
Comments o	n Data (O	verall):																							
0930-0168 Ap	proved: 0	3/31/202	2 Expires	: 03/31/2	2025																				
Footnotes	:																								

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

Table 10A

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

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

edicaid	ale M	/lale (Alaska Native Female Male Other Not Total Female Male Other Not Female Male Other												Ame	rican		P	acific Is	lander							Repo	rted					
edicaid (only 3			- 1	Not Avail	Total	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avai
edicaid)		6	0	0	9	0	0	0	0	1	2	0	0	0	0	0	0	2	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Non- edicaid ources (only)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
People rved by Both edicaid 1,70 d Non- edicaid ources	06 2,4	490	32	22	4,250	10	14	0	0	454	426	11	4	29	45	2	0	1,042	1,829	15	15	164	157	4	3	0	0	0	0	7	19	0	0
edicaid Status Not vailable		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total 1,70	09 2,4	496	32	22	4,259	10	14	0	0	455	428	11	4	29	45	2	0	1,044	1,833	15	15	164	157	4	3	0	0	0	0	7	19	0	0
					Data E	Based or	n Med	icaid S	ervices	S		Data	Based	on Med	dical E	ligibilit	y, not	Medica	id Paid	Servic	es	▼ 'F	eople	Serve	d By Bo	oth' incl	udes	people	with	any Med	licaid		
mments on Da	Data (f	or Ra	ce):																														

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

Comments on Data (Overall):

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

Table 10B

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

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

	er criou s	rtair t B a i		-02.	Experior	ture r er	IOU LIIU	D atc. 37	00/2022								
	Not	Hispani	ic or Lati	no	н	ispanic	or Latino	•	Hisp	anic or L Unkn		igin			Total		
	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Female	Male	Other	Not Avail	Total
Medicaid Only	0	0	0	0	0	0	0	0	3	6	0	0	3	6	0	0	9
Non- Medicaid Only	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
People Served by Both Medicaid and Non- Medicaid Sources	209	231	1	0	21	25	0	0	1,476	2,234	31	22	1,706	2,490	32	22	4,250
Medicaid Status Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Served	209	231	1	0	21	25	0	0	1,479	2,240	31	22	1,709	2,496	32	22	4,259

Comments on	Data	(for	Ethnicit	y)	:
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Comments on Data (for Gender):

Comments on Data (Overall):

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

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Footnotes:

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

Profile of Service Total Served at Utilization Beginning of		Admissions During the	Discharges During the				For Clients in Facility for Less Than 1 Year:		For Clients in Facility More Than 1 Year:	
	Year (unduplicated)	year (duplicated)	year (duplicated)		Patients		Length of Stay (in Days): Residents at end of year		Length of Stay (in Days): Residents at end of year	
				Average (Mean)	Median	Average (Mean)	Median	Average (Mean)	Median	
State Hospitals	55	405	400							
Children (0 to 17 years)	4	64	61	2	0	2	0	0	0	
Adults (18 yrs and over)	51	341	339	5	0	5	0	0	0	
Age Not Available	0	0	0	0	0	0	0	0	0	
Other Psychiactric Inpatient	0	0	0							
Children (0 to 17 years)	0	0	0	0	0	0	0	0	0	
Adults (18 yrs and over)	0	0	0	0	0	0	0	0	0	
Age Not Available	0	0	0	0	0	0	0	0	0	
Residential Treatment Centers	1	36	12							
Children (0 to 17 years)	0	6	4	96	0	96	0	0	0	
Adults (18 yrs and over)	1	30	8	133	0	133	0	0	0	
Age Not Available	0	0	0	0	0	0	0	0	0	
Community Programs	96	2,888								
Children (0 to 17 years)	15	413								
Adults (18 yrs and over)	81	2,475								
Age Not Available	0	0								

Comments on Data (Other Inpatient):		

Comments on Data (Residential Treatment):

Comments on Data (State Hospital):

Comments on Data (Community Programs):	
Comments on Data (Overall):	
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Footnotes:	

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

The purpose of this profile is to obtain information that provides a context for the data provided in the tables. This profile covers the populations served, services for which the state mental health agency is responsible, data reporting capacities, especially related to duplication of numbers served as well as certain summary administrative information.

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Populations Served

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

	in the data provided	in the table:	s. (Check all tr	іат арріу.)					
			Populations Covered				Included in Data		
			State Ho	ospitals	Community Program	ns	State Hospitals	Community Programs	
1. Age	ed 0 to 3			Yes	☐ Yes		☐ Yes	☐ Yes	
2. Aged 4 to 17			V	Yes	▽ Yes		▽ Yes	▽ Yes	
3. Adı	ults Aged 18 and over	V	Yes	▽ Yes		▽ Yes	▼ Yes		
4. Forensics				Yes	☐ Yes		☐ Yes	☐ Yes	
Comr	nents on Data:								
2.	Do all of the adults as serious emotional dis		served throug	gh the state	mental health agency n	neet	the Federal definitions o	f serious mental illness and	
					Mental Illness				
2.a.	If no, please indicate serious emotional dis	-	age of person		Emotional Disturbances the reporting period w		net the federal definition	s of serious mental illness a	
2.a.1.									
2.a.2.	2. Percentage of children/adolescents meeting Federal definition of SED: 57.0%								
3.	Co-Occurring Mental	Health and	Substance Ab	ouse:					
3.a.	What percentage of persons served by the SMHA for the reporting period have a dual diagnosis of mental illness and substance abuse?								
3.a.1.	. Percentage of adults served by the SMHA who also have a diagnosis of substance abuse problem:								
3.a.2.	Percentage of children/adolescents served by the SMHA who also have a diagnosis of substance abuse problem:								
3.b.	Percentage of persons served for the reporting period who met the federal definitions of adults with SMI and children with SED have a dual diagnosis of mental illness and substance abuse:								
3.b.1.	Percentage of adults meeting Federal definition of SMI who also have a diagnosis of substance abuse problem:								
3.b.2.	2. Percentage of children/adolescents meeting the Federal definition of SED who also have a diagnosis of substance abuse problem:								
3.b.3.	Please describe how you calculate and count Unable to collect data at this time due to AWARDS electronic record system is unable to calculate the number of persons with co-occurring co-occurring diagnosis disorders.								
4.	State Mental Health	Agency Res	oonsibilities						
	a. Medicaid: Does the Medicaid? (Check All t 1. State Medicaid Ope	that Apply)		ncy have an	y of the following respo	nsib	ilities for mental health s	ervices provided through	

	3. Quality Improvement/Program Compliance4. Resolving Consumer Complaints5. Licensing6. Sanctions7. Other			
	b. Managed Care (Mental Health Managed Care)			Are Data for these programs reported on URS Tables?
4.b.1	Does the State have a Medicaid Managed Care initia	ative?	☐ Yes	☐ Yes
-	Does the State Mental Health Agency have any responsibilities the SMHA has:	·	☐ Yes	☐ Yes
4.b.3	Direct contractual responsibility and oversight of the	e MCOs or BHOs	Yes	
4.b.4	Setting Standards for mental health services		Yes	
4.b.5	Coordination with state health and Medicaid agenc	ies	☐ Yes	
4.b.6	Resolving mental health consumer complaints		Yes	
4.b.7	Input in contract development		☐ Yes	
4.b.8	Performance monitoring		☐ Yes	
4.b.9	Other			
5.	Data Reporting: Please describe the extent to which different parts of your mental health system. Please counts of clients served across your entire mental h	e respond in particular for MHBG Table 13a and	•	
	Are data reporting in the tables?			_
5.a. 5.b. 5.c. 5.d. 5.e.	Unduplicated: counted once even if they were serve community mental health agencies responsible for community mental health agencies responsible for compulicated: across state hospital and community propagates. Duplicated: within community programs. Duplicated: Between Child and Adult Agencies. Plans for Deduplication: If you are not currently ablest system, please describe your plans to get unduplicated.	different geographic or programmatic areas. ograms e to provide unduplicated client counts across a	ill parts of your menta	
6.	Summary Administrative Data			
6.a.	Report Year:	2000		
		2022		
6.b.	State Identifier:	GU		
6.c.	Summary Information on Data Submitted by SMHA: Year being reported:	From: 10/1/2021 To: 9/30/2022	2	
6.d.	Person Responsible for Submission:	Reina R. Sanchez		
6.e.	Contact Phone Number:	671-647-5323		
6.f.	Contact Address:	790 Governor Carlos G. Camacho Road Tamu	ning, Gu 96913	
6.g.	E-mail:	reina.sanchez@gbhwc.guam.gov		
0930-0	0168 Approved: 03/31/2022 Expires: 03/31/2025			
Foot	tnotes:			

D. Population and Services Report

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

Table 13A

This table requests counts for persons with SMI or SED using the definitions provided by SAMHSA. MHBG Table 8A and 8B (URS Table 2A and 2B) included all clients served by publicly operated or funded programs. This table counts only clients who meet the federal definition of SMI or SED. For many states, this table may be the same as MHBG Tables 8A and 8B (URS Table 2A and 2B). States should report using the Federal Definitions of SMI and SED if they can report them, if not, please report using your state's definitions of SMI and SED and provide information below describing your state's definition.

			Total					Indian Native	or		Asia	an		Bla	ack or Amei	Africar rican	1			waiian ic Islan			Wh	ite		More	Than Repo	One R	ace	Rac	e Not	Availab	e
	Female	Male	Other	N/A	Total	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A
0-12 years	18	48	3	1	70	1	0	0	0	3	2	0	0	1	1	0	0	10	40	2	1	3	5	1	0	0	0	0	0	0	0	0	(
13-17 years	69	80	6	2	157	1	0	0	0	21	11	4	0	2	1	0	0	42	62	1	1	3	6	1	1	0	0	0	0	0	0	0	
18-20 years	27	42	0	0	69	0	0	0	0	9	5	0	0	2	2	0	0	16	35	0	0	0	0	0	0	0	0	0	0	0	0	0	
21-24 years	68	67	2	0	137	1	1	0	0	22	12	2	0	0	2	0	0	40	49	0	0	5	3	0	0	0	0	0	0	0	0	0	
25-44 years	329	484	1	2	816	2	6	0	0	78	95	0	0	5	11	0	0	199	338	1	2	45	34	0	0	0	0	0	0	0	0	0	
45-64 years	173	252	1	0	426	0	1	0	0	56	52	1	0	0	6	0	0	104	178	0	0	13	15	0	0	0	0	0	0	0	0	0	
65-74 years	45	37	0	2	84	0	1	0	0	18	12	0	0	0	1	0	0	22	15	0	1	5	8	0	1	0	0	0	0	0	0	0	
75 and older	14	6	0	0	20	0	0	0	0	7	4	0	0	0	0	0	0	6	2	0	0	1	0	0	0	0	0	0	0	0	0	0	
Age not wailable	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total	743	1,016	13	7	1,779	5	9	0	0	214	193	7	0	10	24	0	0	439	719	4	5	75	71	2	2	0	0	0	0	0	0	0	(
Comment	s on Dat	a (for A	(ge):																														
Comment	s on Dat	a (for (Gender):																													
Comment	s on Dat	a (for F	lace/Et	hnicit	y):																												
Comment	s on Dat	a (Ove	all):																														_

1. St	ate Definitions	Match the Federal Definitions	
•	Yes No	Adults with SMI, if No describe or attach state definition:	
0	Yes No	Diagnoses included in the state SMI definition:	1
•	Yes No	Children with SED, if No describe or attach state definition:	-
0	Yes No	Diagnoses included in the state SED definition:	

Table 13B

Of the total persons served, please indicate the age, gender and the number of persons who meet the Federal definition of SMI and SED and who are Hispanic/Latino or not Hispanic/Latino. The total persons served who meet the Federal definition of SMI or SED should be the total as indicated in MHBG Table 13b.

	Not Hispanic or Latino				artare r err	Hispanic			Hispanic o	or Latino C	Prigin Not	Available		Total					
	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Total		
0-12 years	1	5	0	0	1	1	0	0	16	42	3	1	18	48	3	1	70		
13-17 years	years 3 7 0				3	0	0	0	63	73	6	2	69	80	6	2	157		
18-20 ₂ ₅ ₀			0	0	0	0	0	25	37	0	0	27	42	0	0	69			
21-24 years	8	4	0	0	0	0	0	0	60	63	2	0	68	67	2	0	137		
25-44 years	43	43	0	0	6	8	0	0	280	433	1	2	329	484	1	2	816		
45-64 years	53	48	1	0	2	1	0	0	118	203	0	0	173	252	1	0	426		
65-74 years	18	8	0	0	0	0	0	0	27	29	0	2	45	37	0	2	84		
75 and older	4	0	0	0	1	0	0	0	9	6	0	0	14	6	0	0	20		
Age not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Total	132	120	1	0	13	10	0	0	598	886	12	7	743	1,016	13	7	1,779		
Comment	s on Data (for Age):																	
Comment	s on Data (for Gende	r):																
Comment	s on Data (for Race/E	thnicity):																

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Comments on Data (Overall):	

D. Population and Services Report

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

This table provides a profile for adults with Serious Mental Illness (SMI) and children with serious emotional disturbance (SED) that received public funded mental health services in community services in hospitals, other psychiatric inpatient programs, residential treatment centers and Institutions under Justice System

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

Services Setting		Age 0				Age 18				Age 2	1-64			Age 6	55+		Ą	ge Not A	vailable				Total		
	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Total
Community Mental Health Programs	61	104	5	1	16	29	0	0	409	431	3	0	56	30	0	0	0	0	0	0	542	594	8	1	1,145
State Psychiatric Hospitals	9	2	0	1	2	6	0	0	69	81	1	0	2	6	0	1	0	0	0	0	82	95	1	2	180
Other Psychiatric Inpatient	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Residential Treatment Centers	0	0	0	0	0	0	0	0	0	1	0	0	0	2	0	0	0	0	0	0	0	3	0	0	3
Institutions in the Justice System	3	4	0	0	0	3	0	0	14	61	0	0	1	1	0	0	0	0	0	0	18	69	0	0	87

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

Footnotes:

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

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

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Adults Served	18-20				21	-64			6	5+		Age Not Available						Total			
	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	N/A	Female	Male	Other	Not Avail	Total
Employed: Competitively Employed Full or Part Time (includes Supported Employment)	8	3	0	0	155	192	1	1	8	4	0	0	0	0	0	0	171	199	1	1	372
Unemployed	29	47	1	0	490	965	7	6	47	30	0	0	0	0	0	0	566	1,042	8	6	1,622
Not In Labor Force: Retired, Sheltered Employment, Sheltered Workshops, Other (homemaker, student, volunteer, disabled, etc.)	29	34	2	0	163	208	2	0	14	28	0	1	0	0	0	0	206	270	4	1	481
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	66	84	3	0	808	1,365	10	7	69	62	0	1	0	0	0	0	943	1,511	13	8	2,475
How Often Does your State Measure Employment Status?	☑ At	Admissio	on 🗆 At D	ischarge	☐ Month	ly 🗆 Qua	arterly 🗆	Other, de	scribe:												
What populations are included		All clients	on Onl	ly selected	d groups, o	describe:															
Comments on Data (for Age):																					
Comments on Data (for Gender):																				
Comments on Data (Overall):																					
0930-0168 Approved: 03/31/202	2 Expires: 0	3/31/202	5																		
Footnotes:																					

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

The workgroup exploring employment found that, the primary diagnosis of consumer results in major differences in employment status. The workgroup has recommended that we explore the ability of states to report employment by primary diagnosis and the impact of diagnosis on employment. The workgroup recommended 5 diagnostic clusters for reporting.

Clients Primary Diagnosis	Employed: Competitively Employed Full or Part Time (includes Supported Employment)	Unemployed	Not In Labor Force: Retired, Sheltered Employment, Sheltered Workshops, Other (homemaker, student, volunteer, disabled, etc.)	Employment Status Not Available	Total
Schizophrenia & Related Disorders (F20, F25)	17	76	44	0	137
Bipolar and Mood Disorders (F30, F31, F32, F33, F34.1, F60.89, F34.0, F32.9)	71	126	82	0	279
Other Psychoses (F22, F23, F24, F29)	4	11	10	0	25
All Other Diagnoses	119	313	306	0	738
No DX and Deferred DX (R69, R99, Z03.89)	161	1,096	39	0	1,296
Diagnosis Total	372	1,622	481	0	2,475

Comments on Data (for Diag	Jnosis):			
0020 0160 A				
0930-0168 Approved: 03/31/2	022 Expires: 03/31/2025			
Footnotes:				

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

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Adult Consumer Survey Results	Number of Positive Responses	Responses	Percent Positive (calculated)
1. Social Connectedness	206	224	92%
2. Functioning	190	224	85%
Child/Adolescent Consumer Survey Results	Number of Positive Responses	Responses	Percent Positive (calculated)
3. Social Connectedness	43	54	80%
4. Functioning	43	54	80%
Comments on Data:	•		

Adult Social Connectedness and Functioning Measures

Addit Social Connectedness and Functioning Measures	
1. Did you use the recommended new Social Connectedness Questions?	
2. Did you use the recommended new Functioning Domain Questions?	Measure used Yes No
3. Did you collect these as part of your MHSIP Adult Consumer Survey?	Measure used Yes No No If No, what source did you use?
Child/Family Social Connectedness and Functioning Measures 4. Did you use the recommended new Social Connectedness Questions? 5. Did you use the recommended new Functioning Domain Questions?	Yes No Measure used Yes No
6. Did you collect these as part of your YSS-F Survey?	Measure used Yes No If No, what source did you use?

Recommended Scoring Rules

Please use the same rules for reporting Social connectedness and Functioning Domain scores as for calculating other Consumer Survey Domain scores for Table MHBG Table 18a: E.g.:

- 1. Recode ratings of "not applicable" as missing values.
- 2. Exclude respondents with more than 1/3 of the items in that domain missing
- 3. Calculate the mean of the items for each respondent.
- 4. FOR ADULTS: calculate the percent of scores less than 2.5 (percent agree and strongly agree).
- 5. FOR YSS-F: calculate the percent of scores greater than 3.5 (percent agree and strongly agree).

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Footnotes:

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

Adult Consumer Survey Results:	Number of Positive Responses	Responses	Confidence Interval*
1. Reporting Positively about Access.	204	224	91
2. Reporting Positively about Quality and Appropriateness for Adults.	207	224	92
3. Reporting Positively about Outcomes.	209	224	93
4. Adults Reporting on Participation In Treatment Planning.	206	224	92
5. Adults Positively about General Satisfaction with Services.	195	224	87

Child/Adolescent Consumer Survey Results:	Number of Positive Responses	Responses	Confidence Interval*
Reporting Positively about Access.	47	54	87
2. Reporting Positively about General Satisfaction for Children.	49	54	91
3. Reporting Positively about Outcomes for Children.	49	54	91
4. Family Members Reporting on Participation In Treatment Planning for their Children.	44	54	81
5. Family Members Reporting High Cultural Sensitivity of Staff.	42	54	78

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

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

Comments on Data:

Adult	Consumer	Surveys
-------	----------	---------

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

1.a.	- It	nο	which	version:

1.	Original 40 Item Version	C Yes
2.	21-Item Version	
3.	State Variation of MHSIP	Vac

4. Other Consumer Survey Ye	es .			
1.b. If other, please attach instrument used.				
1.c. Did you use any translations of the MHSIP into another	er language?	1. Spanish		
		2. Other Language:		
dult Survey Approach				
Populations covered in survey? (Note all surveys should covered in survey).	all regions of state	e) ((•)	2 Samuel of MU Samuel
	-	1. All Consumers In S		2. Sample of MH Consumers
2.a. If a sample was used, what sample methodology was u	used? 🜔 1. R	andom Sample		
	C 2. St	tratified / Random Stratified	Sample	
		onvenience Sample		
		ther Sample:		
		scharge Census		
2.b. Do you survey only people currently in services, or do	you also survey pe	ersons no longer in service?		
			✓ 2. Perso	ns No Longer Receiving Services
			AU A 1 1 6	
3. Please describe the populations included in your sample: (e.g.	, all adults, only a		All Adult Con	
				erious Mental Illness
				Vere Medicaid Eligible Or In Medicaid Managed Care
		□ 4.	Other (for exa	ample, if you survey anyone served in the last 3 months, describe that here):
Methodology of collecting data? (Check all that apply)				
inclinational grant and a second control of the con		Self-Administered	Interview	
	Phone			
		☐ Yes	▽ Yes	
	Mail	□ Yes		
	Face-to-face			
	1 ace-to-lace	☐ Yes	☐ Yes	
	Web-Based	☐ Yes	☐ Yes	
4.b. Who administered the survey? (Check all that apply)	□ 1. MH Cons	umers		
	☐ 2. Family Me	embers		
	☐ 3. Professio	nal Interviewers		

☐ 4. MH Clinicians

\Box 6. Other, descri	be:					
5. Are Responses Anonymous, Confidential and/or Linked to other Patient Databases?	? □ 1. Responses are Anony ✓ 2. Responses are Confid □ 3. Responses are Match	lential	abases			
6. Sample Size and Response Rate						
 6.a. How Many surveys were Attempted (sent out or calls initiated)? 6.b. How many survey Contacts were made? (surveys to valid phone numbers or add 6.c. How many surveys were completed? (survey forms returned or calls completed) 6.d. What was your response rate? (number of Completed surveys divided by numb 6.e. If you receive "blank" surveys back from consumers (surveys with no responses 	er of Contacts)	urveys as "com	350 275 224 81.0%	on of response rater?	Vac No	
	on them), and you count these s	urveys as comp	neted for the calculati	on or response rates:	res No	
7. Who Conducted the survey7.a. SMHA Conducted or contracted for the survey (survey done at state level)		C Yes	€ No			
7.b. Local Mental Health Providers/County mental health providers conducted or (survey was done at the local or regional level)7.c. Other, describe:	r contracted for the survey	Yes Yes	No No			
* Report Confidence Intervals at the 95% confidence level						
Note: The confidence interval is the plus-or-minus figure usually reported in newspaper or t you had asked the question of the entire relevant population between 43% (47-4) and 51% The confidence level tells you how sure you can be. It is expressed as a percentage and represent be 95% certain; the 99% confidence level means you can be 99% certain. Most research When you put the confidence level and the confidence interval together, you can say that you	(47+4) would have picked that an esents how often the true percentag ers use the 95% confidence level.	swer. ge of the populat	ion who would pick an ai	nswer lies within the con	fidence interval. The 95% confid	
Child / Family Consumer Surveys						
1. Was the MHSIP Children / Family Survey (YSS-F) ✓ Yes Used? If no, what su	urvey did you use?					
If no, please attach instrument used.						
1.c. Did you use any translations of the Child MHSIP into another language?	□ 1. Spanish □ 2. Other Language:					
Child Survey Approach						
2. Populations covered in survey? (Note all surveys should cover all regions of state)	1. All Consumers In State	2. Samp	le of MH Consumers			
2.a. If a sample was used, what sample methodology was used?	om Sample					

▼ 5. Non Direct Treatment Staff

	C 2. St	ratified / Random Stratified	l Sample	
		onvenience Sample		
		ther Sample:		
		charge Census		
2.b. Do you survey only people currently in services, or do y	ou also survey pe	ersons no longer in service?	∏1 Pe	rsons Currently Receiving Services
2.2. 20 years arrey only people carrettly in sorrices, or do y	, ou also survey pe	sens ne renger in service.		rsons No Longer Receiving Services
			L 2. 10	solis to Longer Receiving Services
2a. If yes to 2, please describe how your survey person:	s no longer receiv	ing services.		
3. Please describe the populations included in your sample: (e.g.,	, all children, only	children with SED, etc.)	□ 1. All	Child Consumers In State
			□ 2. Ch	ildren with Serious Emotional Disturbances
			□ 3. Ch	ildren who were Medicaid Eligible or in Medicaid Managed Care
			☐ 4. Ot	ner (for example, if you survey anyone served in the last 3 months, describe that here):
4. Methodology of collecting data? (Check all that apply)		Self-Administered	Interview	
	Phone	☐ Yes	✓ Yes	
	Mail	□ Yes		
	Face-to-face	☐ Yes	☐ Yes	
	Web-Based	☐ Yes	☐ Yes	
4.b. Who administered the survey? (Check all that apply)	□ 1. MH Consu			
4.b. Who administered the survey? (Check all that apply)				
	☐ 2. Family Me			
	4. MH Clinic			
		ct Treatment Staff		
	☐ 6. Other, de			
	∟ o. Other, de	scribe.		
5. Are Responses Anonymous, Confidential and/or Linked to oth-	er Patient Databas	ses? 🗆 1. Responses ar	e Anonymou	5
•		✓ 2. Responses ar		
		☐ 3. Responses ar		

6.a. How Many surveys were Attempted (sent out or calls initiated)?	100
6.b. How many survey Contacts were made? (surveys to valid phone numbers or addresses)?	65
6.c. How many surveys were completed? (survey forms returned or calls completed)	54
6.d. What was your response rate? (number of Completed surveys divided by number of Contacts)	83.0%
6.e. If you receive "blank" surveys back from consumers (surveys with no responses on them), did you count these	se surveys as "completed" for the calculation of response rates? Yes No
7. Who Conducted the survey	
7.a. SMHA Conducted or contracted for the survey (survey done at state level)	C Yes No
7.b. Local Mental Health Providers/County mental health providers conducted or contracted for the survey (survey was done at the local or regional level)	
7.c. Other, describe:	
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Footnotes:	

6. Sample Size and Response Rate

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

Adult Consumer Survey Results:

Indicators	Т	otal		n Indian or a Native	А	sian		or African erican	Othe	lawaiian or r Pacific ander	W	/hite		han One Reported		er / Not illable	Hispar	nic Origin
	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses
1. Reporting Positively About Access.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reporting Positively About Quality and Appropriateness.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Reporting Positively About Outcomes.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Reporting Positively about Participation in Treatment Planning	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Reporting Positively about General Satisfaction	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Social Connectedness	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Functioning	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Child/Adolescent Family Survey Results:

Indicators	Т	otal		n Indian or a Native	А	sian		or African erican	Othe	awaiian or r Pacific ander	W	/hite		Than One Reported		er / Not silable	Hispar	nic Origin
	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses
Reporting Positively About Access.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Reporting Positively About General Satisfaction	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

3. Reporting Positively About Outcomes.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reporting Positively Participation in Treatment Planning for their Children.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Reporting Positively About Cultural Sensitivity of Staff.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Social Connectedness	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Functioning	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Comments on Data: Ethinity not collecting in survey

Please enter the number of persons responding positively to the questions and the number of total responses within each group. Percent positive will be calculated from these data. 0930-0168 Approved: 03/31/2022 Expires: 03/31/2025

Footnotes:			

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

Number of Clients in Each Living Situation as Collected by the Most Recent Assessment in the Reporting Period All Mental Health Programs by Age, Gender, and Race/Ethnicity

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

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

	Private Residence	Foster Home	Residential Care	Crisis Residence	Children's Residential Treatment	Institutional Setting	Jail / Correctional Facility	Homeless / Shelter	Other	NA	Total
0-17	401	17	10	11	0	42	17	15	0	0	513
18-64	1,850	3	17	93	0	214	310	190	0	0	2,677
65+	68	0	6	16	0	12	5	6	0	0	113
Not Available	0	0	0	0	0	0	0	0	0	0	0
TOTAL	2,319	20	33	120	0	268	332	211	0	0	3,303
Female	974	11	11	65	0	112	50	70	0	0	1,293
Male	1,314	9	22	53	0	155	280	139	0	0	1,972
Other	19	0	0	2	0	1	2	0	0	0	24
Not Available	12	0	0	0	0	0	0	2	0	0	14
TOTAL	2,319	20	33	120	0	268	332	211	0	0	3,303
		·									
American Indian/Alaska Native	18	0	0	1	0	2	0	0	0	0	21
Asian	534	1	5	43	0	64	28	22	0	0	697
Black/African American	42	0	2	1	0	6	7	10	0	0	68
Hawaiian/Pacific Islander	1,577	19	25	70	0	177	280	164	0	0	2,312
White/Caucasian	148	0	1	5	0	19	17	15	0	0	205

More than One Race Reported	0	0	0	0	0	0	0	0	0	0	0
Race/Ethnicity Not Available	0	0	0	0	0	0	0	0	0	0	0
TOTAL	2,319	20	33	120	0	268	332	211	0	0	3,303

	Private Residence	Foster Home	Residential Care	Crisis Residence	Children's Residential Treatment	Institutional Setting	Jail / Correctional Facility	Homeless / Shelter	Other	NA	Total
Hispanic or Latino Origin	25	0	0	1	0	5	3	3	0	0	37
Non Hispanic or Latino Origin	34	3	7	54	0	102	22	10	0	0	232
Hispanic or Latino Origin Not Available	2,260	17	26	65	0	161	307	198	0	0	3,034
TOTAL	2,319	20	33	120	0	268	332	211	0	0	3,303

Comments on Data (for Gender):	
How Often Does your State Measure Living Situation?	At Admission At Discharge Monthly Quarterly Other: Describe
0930-0168 Approved: 03/31/2022 Expires: 03/31/2025	
Footnotes:	

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

Age	Adults with Serious	Mental Illnesses (SMI)			Children with Serious Emotional Disturbances (SED)					
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi- Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED		
0-12 years					0	0	0	70		
13-17 years					0	0	0	157		
18-20 years	0	0	0	69	0	0	0	0		
21-64 years	0	0	0	1,379						
65-74 years	0	0	0	84						
75+ years	0	0	0	20						
Not Available	0	0	0	0	0	0	0	0		
Total	0	0	0	1,552	0	0	0	227		

Gender	Adults with Serious	Mental Illnesses (SMI)			Children with Serious Emotional Disturbances (SED)						
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi- Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED			
Female	0	0	0	656	0	0	0	87			
Male	0	0	0	888	0	0	0	128			
Other	0	0	0	4	0	0	0	9			
Not Available	0	0	0	4	0	0	0	3			

Race/Ethnicity	Adults with Serious	Mental Ilinesses (SMI)			Children with Serious Emotional Disturbances (SED)					
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi- Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED		
American Indian / Alaska Native	0	0	0	12	0	0	0	2		
Asian	0	0	0	373	0	0	0	41		
Black / African American	0	0	0	29	0	0	0	5		
Hawaiian / Pacific Islander	0	0	0	1,010	0	0	0	157		
White	0	0	0	128	0	0	0	20		
More than one race	0	0	0	0	0	0	0	0		
Not Available	0	0	0	0	0	0	0	2		

Hispanic/Latino Origin	Adults with Serious	Mental Illnesses (SMI)			Children with Serious Emotional Disturbances (SED)					
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi- Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED		
Hispanic / Latino origin	0	0	0	18	0	0	0	5		
Non Hispanic / Latino	0	0	0	237	0	0	0	16		
Not Available	0	0	0	1,297	0	0	0	206		

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

Who measures fidelity?							
How often is fidelity measured?							
Is the SAMHSA EBP Toolkit used to guide EBP Implementation?	Yes No	€ Yes € No	Yes No	Yes No	C Yes No	€ Yes € No	
Have staff been specifically trained to implement the EBP?	C Yes No	C Yes No	C Yes No	€ Yes € No	C Yes No	C Yes No	
Comments on Data (overall): Unduplicated							
Comments on Data (Supported Housing):							
Comments on Data (Supported Employment):							
Comments on Data (Assertive Community Treatment):							
Comments on Data (Therapeutic Foster Care):	2						
Comments on Data (Multi-Syster Therapy):	mic						
Comments on Data (Family Functional Therapy):							
0930-0168 Approved: 03/31/2022	Expires: 03/31/2025						
Footnotes:							

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

This table provides the number of Adults with SMI and Children with SED, who were admitted into and received Coordinated Specialty Care (CSC) evidence based First Episode Psychosis Services (FEP). The reporting year should be the latest fiscal year for which data are available.

Program Name	Number of Adult Admissions into CSC Services During FY	Current Number of Adults with FEP Receiving CSC FEP Services	Number of Child/ Adolescents Admissions into CSC Services During FY	Current number of Children/Adolecents with FEP Receiving CSC FEP Services	Did you monitor fidelity for this service?	What fidelity measure did you use?	Who measures fidelity?	How often is fidelity measured?	Has staff been specifically trained to implement the CSC EBP?
Project Tulaika	14	14	10	10	Yes No No				Yes No No

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Footnotes:	

MHBG Table 19B (URS Table 16B) Adults with Serious Mental Illness and Children with Serious Emotional Disturbances Receiving Crisis Response Services

This table provides the number and percentage of the respective population of adults with serious mental illness and children with serious emotional disturbances that are receiving Crisis Response services. The reporting year should be the latest state fiscal year for which data are available.

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

Service	Actual Number of Adults Served via Service	Estimated Percentage of Adult Population with Access to Service	Actual Number of Children Served via Service	Estimated Percentage of Child Population with Access to Service
Call Centers	4,466	97.2%	18	0.0%
24/7 Mobile Crisis Team	61	100.0%	0	0.0%
Crisis Stabilization Programs	0	0.0%	0	0.0%

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	Footnotes:

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

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

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

Gender											
Female	0	0	0	0							
Male	0	0	0	0							
Other	0	0	0	0							
Gender NA	0	0	0	0							

Race												
American Indian or Alaska Native	0	0	0	0								
Asian	0	0	0	0								
Black or African American	0	0	0	0								
Native Hawaiian or Pacific Islander	0	0	0	0								
White	0	0	0	0								
More Than One Race	0	0	0	0								
Unknown	0	0	0	0								

Ethnicity

Hispanic / Latino origin	0	0	0	0
Non Hispanic / Latino	0	0	0	0
Hispanic origin not available	0	0	0	0
Do you monitor fidelity for this service?	C Yes C No	C Yes C No	C Yes C No	C Yes C No
IF YES,				
What fidelity measure do you use?				
Who measures fidelity?				
How often is fidelity measured?				
Is the SAMHSA EBP Toolkit used to guide EBP Implementation?	C Yes C No	C Yes C No	C Yes C No	C Yes C No
Have staff been specifically trained to implement the EBP?	C Yes C No	C Yes C No	C Yes C No	C Yes C No
Comments on Data (overall):				
No Data Collected				
Comments on Data (Family Psycho-education):				
Comments on Data (Integrated Treatment for Co-occurring D	Disorders):			
Comments on Data (Illness Self-Management):				

Comments on Data (Medication Management):	
0930-0168 Approved: 03/31/2022 Expires: 03/31/2025	
Footnotes:	

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

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

Expenditure Period Start Date: 10/1/2021 Expenditure Period End Date: 9/30/2022

For Consumers in Service for at least 12 months

		T1		T2 T1 to T2 Change								Assessment of the Impact of Services							
		or 12 mont an 1 year a	-	"T2" Mo	"T2" Most Recent 12 months (this year)			If Arrested at T1 (Prior 12 If Not Arrested at T1 (Prior 12 Months) (Prior 12 Months)						Over the last 12 months, my encounters with the police have					
	Arrested	Not Arrested	No Response	Arrested	Not Arrested	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# Reduced (fewer encounters)	# Stayed the Same	# Increased	# Not Applicable	No Response	Total Responses	
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total Children/Youth (under age 18)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Male	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gender NA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total Adults (age 18 and over)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Male	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gender NA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

	T1 T2								T1 to T2	. Change			Assessment of the Impact of Services						
		12 months jinning ser		"T2" Sinc	T2" Since Beginning Services (this year)			sted at T	1 (Prior 12 s)	l	ot Arresto ior 12 M		Since starting to receive MH Services, my encounters with the police have						
	Arrested	Not Arrested	No Response	Arrested	Not Arrested	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# Reduced (fewer encounters)	# Stayed the Same	# Increased	# Not Applicable	No Response	Total Responses	
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total Children/Youth (under age 18)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Male	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gender NA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total Adults (age 18 and over)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Male	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Gender NA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

Please Describe the Sources of your Criminal Justice Data

Source of adult criminal justice information:	Consumer survey (recommended questions)		2. Other Consumer Survey: Please send copy of questions	Ш	3. Mental health MIS
	4. State criminal justice agency		5. Local criminal justice agency		6. Other (specify)
Sources of children/youth criminal justice information:	Consumer survey (recommended questions)		2. Other Consumer Survey: Please send copy of questions		3. Mental health MIS
	4. State criminal/juvenile justice agency		5. Local criminal/juvenile justice agency		6. Other (specify)
Measure of adult criminal justice involvement:	1. Arrests 2. Other (c	speci	fy)		

Measure of children/youth criminal justice involvement:	1. Arrests	2. Other (specify)	
Mental health programs included:	☐ 1. Adults with SMI only	2. Other adults (specify)	3. Both (all adults)
	\Box 1. Children with SED only	2. Other Children (specify)	3. Both (all Children)
Region for which adult data are reported:	1. The whole state	2. Less than the whole state (please describe)	
Region for which children/youth data are reported:	1. The whole state	2. Less than the whole state (please describe)	
What is the Total Number of Persons Survey	ed or for whom Criminal Justice	e Data Are Reported	
		Child	I/Adolescents Adults
1. If data is from a survey, What is the total Number of	of people from which the sample was	drawn?	
2. What was your sample size? (How many individuals	were selected for the sample)?		
3. How many survey Contacts were made? (surveys to	valid phone numbers or addresses)		
4. How many surveys were completed? (survey forms	returned or calls completed) If data s	ource was not a Survey, How many persons were CJ data available for?	
5. What was your response rate? (number of Complet	ed surveys divided by number of Con	atacts)	
State Comments/Notes: No Data Collected			
	1 3 3 1 1 7	u should include those responses with other responses from the survey (e.g., if a 16 or " to be included in BGAS form at the bottom of the page.	r 17 year old responds to the Adult MHSIP survey,
Footnotes:			

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

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

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

For Consumers in Service for at least 12 months

roi con	sumers in 3	ervice for a	at least 12	IIIOIILIIS														
		T1			T2				T1 to T2	Change					Impact	of Services		
		2 months pri inning servic		"T2" Sino	e Beginning (this year)	Services	If Suspe	nded at T1 (P Months)	rior 12	If Not Sus	pended at T1 Months)	(Prior 12	Over that	last 12 m		number of o	days my chi	ld was in
	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# Greater (Improved)	# Stayed the Same	# Fewer days (gotten worse)	# Not Applicable	No Response	Total Responses
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender																		
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Male	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender NA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Age																		
Under 18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

		T1		itii Services	T2				T1 to T2	: Change					Impact	of Services		
		2 months pri		"T2" Sind	e Beginning (this year)	Services	If Suspe	nded at T1 (P Months)	rior 12	If Not Sus	pended at T1 Months)	(Prior 12	Since sta			Services, the		days my
	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# Greater (Improved)	# Stayed the Same	# Fewer days (gotten worse)	# Not Applicable	No Response	Total Responses
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender																		
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Male	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender NA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Age																		
Under 18	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Source of School Attendance Information:		Consumer survey (recommended items) State Education Department		Other Survey: Please send us items Local Schools/Education Agencies	_	3. Mental health MIS 6. Other (specify)
Measure of School Attendance:	0	1. School Attendance	0	2. Other (specify):		
Mental health programs include:		1. Children with SED only		2. Other Children (specify)		3. Both
Region for which data are reported:	0	1. The whole state	0	2. Less than the whole state (please describe):		

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

		Child,	/Adolescents:
1.	If data is from a survey, what is the total number of people from which the sample was drawn?		
2.	What was your sample size? (How many individuals were selected for the sample)?		
3.	How many survey contacts were made? (surveys to valid phone numbers or addresses)		
4.	How many surveys were completed? (survey forms returned or calls completed) If data source was not a Survey, how many persons were data available for?		
5.	What was your response rate? (number of Completed surveys divided by number of Contacts)		
	State Comments/Notes:		
N	o Data Collected		
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Fo	potnotes:		

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

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

	Total number of Discharges in Year		Imissions to ANY pital within	Percent R	eadmitted
	rear	30 days	180 days	30 days	180 days
TOTAL	400	55	201	13.75%	50.25%
Age					
0-12 years	7	1	3	14.29%	42.86%
13-17 years	54	3	26	5.56%	48.15%
18-20 years	28	6	17	21.43%	60.71%
21-64 years	291	44	145	15.12%	49.83%
65-74 years	15	1	8	6.67%	53.33%
75+ years	5	0	2	0.00%	40.00%
Not Available	0	0	0	0.00%	0.00%
Gender					
Female	176	26	96	14.77%	54.55%
Male	216	25	103	11.57%	47.69%
Other	5	1	2	20.00%	40.00%
Gender Not Available	3	3	0	100.00%	0.00%
Race					
American Indian/Alaska Native	3	1	1	33.33%	33.33%
Asian	77	17	46	22.08%	59.74%
Black/African American	11	2	5	18.18%	45.45%
Hawaiian/Pacific Islander ed: 8/11/2024 6:47 PM - Guam - 0930-016	268	31	141	11.57%	52.61% Page

White	41	4	8	9.76%	19.51%
More than one race	0	0	0	0.00%	0.00%
Race Not Available	0	0	0	0.00%	0.00%
	•	•			
Hispanic/Latino Origin					
Hispanic/Latino Origin	8	2	6	25.00%	75.00%
Hispanic/Latino Origin Non Hispanic/Latino	8	2	6	25.00%	75.00% 100.00%

Are Forensic Patients Included?	(-
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Comments on Data:

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Footnotes:			

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

Reporting Period Start Date: 10/1/2021 Reporting Period End Date: 9/30/2022

	Total number of Discharges in Year		lmissions to ANY pital within	Percent R	eadmitted
	rear	30 days	180 days	30 days	180 days
TOTAL	0	0	0	0.00%	0.00%
Age					
0-12 years	0	0	0	0.00%	0.00%
13-17 years	0	0	0	0.00%	0.00%
18-20 years	0	0	0	0.00%	0.00%
21-64 years	0	0	0	0.00%	0.00%
65-74 years	0	0	0	0.00%	0.00%
75+ years	0	0	0	0.00%	0.00%
Not Available	0	0	0	0.00%	0.00%
Gender					
Female	0	0	0	0.00%	0.00%
Male	0	0	0	0.00%	0.00%
Other	0	0	0	0.00%	0.00%
Gender Not Available	0	0	0	0.00%	0.00%
Race					
American Indian/Alaska Native	0	0	0	0.00%	0.00%
Asian	0	0	0	0.00%	0.00%
Black/African American	0	0	0	0.00%	0.00%
Hawaiian/Pacific Islander ed: 8/11/2024 6:47 PM - Guam - 0930-0168	0_	0	0	0.00%	0.00 % Page

White	0	0	0	0.00%	0.00%
More than one race	0	0	0	0.00%	0.00%
Race Not Available	0	0	0	0.00%	0.00%
		•			•
Illian and all arthur October					
Hispanic/Latino Origin					
Hispanic/Latino Origin	0	0	0	0.00%	0.00%
	0	0	0	0.00%	0.00%

Comments on Data: Forensic Not Used

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

	Total number of Discharges in Year	Number of Readmissions to ANY Psychiatric Inpatient Care Unit Hospital within the state		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	0	0	0	0.00	0.00
Age					
O-12 years	0	0	0	0.00%	0.00%
13-17 years	0	0	0	0.00%	0.00%
18-20 years	0	0	0	0.00%	0.00%
21-64 years	0	0	0	0.00%	0.00%
55-74 years	0	0	0	0.00%	0.00%
5+ years	0	0	0	0.00%	0.00%

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

<u> </u>							
Hispanic/Latino Origin							
Hispanic/Latino Origin	0	0	0	0.00%	0.00%		
Non Hispanic/Latino	0	0	0	0.00%	0.00%		
Hispanic/Latino Origin Not Available	0	0	0	0.00%	0.00%		
Does this table include readmission from state (psychiatric hospitals?	Yes No						
2. Are Forensic Patients Included?							
Comments on Data:							
0930-0168 Approved: 03/31/2022 Expires: 03/31/2025							
Footnotes:							