

Kentucky

UNIFORM APPLICATION

FY 2020 Mental Health Block Grant Report

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

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

A. State Information

State Information

State DUNS Number

Number 927049767

Expiration Date

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

Agency Name Cabinet for Health and Family Services
Organizational Unit Department for Behavioral Health, Developmental and Intellectual Disabilities
Mailing Address 275 East Main Street 4W-G
City Frankfort
Zip Code 40621

II. Contact Person for the Grantee of the Block Grant

First Name Michele
Last Name Blevins
Agency Name Department for Behavioral Health, Development, and Intellectual Disabilities
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III. State Expenditure Period (Most recent State expenditure period that is closed out)

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

IV. Date Submitted

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

Submission Date 11/26/2019 4:39:04 PM
Revision Date 6/8/2021 4:17:33 PM

V. Contact Person Responsible for Report Submission

First Name Michele
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Footnotes:

B. Implementation Report

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

Priority #: 1
Priority Area: Early Serious Mental Illness/First Episode of Psychosis
Priority Type: MHS
Population(s): ESMI

Goal of the priority area:

Increase access to evidence based practices for individuals with early serious mental illness/first episode of psychosis.

Strategies to attain the goal:

Provide training and technical assistance to all outpatient sites funded to provide CSC to this population.
Continue to have consultation from national experts in the field.
Continue biannual meetings with all key contacts from CMHCs regarding this population, to further education on this evidence based practice and this population.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Coordinated Specialty Care (CSC) as an evidence based practice to individuals with ESMI/First Episode of Psychosis.
Baseline Measurement: Total number of outpatient sites that have fully implemented Coordinated Specialty Care to serve individuals with ESMI/First Episode of Psychosis.
First-year target/outcome measurement: By the end of SFY 2018, will have at least one (1) outpatient site offering fully implemented CSC to individuals with ESMI/First Episode of Psychosis.
Second-year target/outcome measurement: By the end of SFY 2019, will have a total of at least three (3) outpatient sites offering fully implemented CSC to individuals with ESMI/First Episode of Psychosis.

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

Data Source:

DPR Form 113H/CMHC Contract Reporting Requirement
MIS Client/Event Data Set used by DBHDID and 14 CMHCs.

New Data Source(if needed):

Description of Data:

Form 113H requires quarterly reporting on the status of the core components of Coordinated Specialty Care (CSC) including:
1. Must list the FTE status of each CSC team member, including service role on the team for each core service component (e.g. team leader/outreach; case manager; peer support; supported employment/education; medication management; and therapy.
2. Initial contact with all referrals to CSC program must occur within 48 hours.
3. Access to a prescriber is required within one week of admission into CSC program.
4. Staff to client ratio of 1:10 or less (e.g. if 3.0 FTE on CSC team, then can only serve 30 clients or less)

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Coordinated Specialty Care is a new service for Kentucky. Implementation is in its infancy.
Form 113H is a new reporting form that began in SFY 2018.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

One CMHCs has fully implemented CSC: Lifeskills.
Seven CMHCs have programs that are working towards Full implementation: Four Rivers, Communicare, Centerstone, Pathways, Mountain, Cumberland River and Bluegrass.

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

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

How second year target was achieved (optional):

Lifeskills, Centerstone and Mountain have fully implemented iHope Programs for addressing ESMI/FEP.

Priority #: 2

Priority Area: Adults with Serious Mental Illness (SMI)

Priority Type: MHS

Population(s): SMI

Goal of the priority area:

Increase Access to Evidence Based Practices for Adults with SMI

Strategies to attain the goal:

CMHCs are required by contract to employ Adult Peer Support Specialists to serve Adults with SMI.
Continue to provide training and technical assistance to ensure that CMHCs understand how to recruit, retain and support peer support specialists in the workplace and how to appropriately document and bill for services.
Continue to provide awareness activities and training regarding Recovery principles and guidance on the process of fully including peer specialists in the service delivery array.
Continue to provide training and technical assistance regarding the supervision of peer specialists.
Technical assistance to CMHCs regarding accurate coding procedures for reporting peer support services in client/event data set.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Peer Support Services for Adults with SMI
Baseline Measurement: Total unduplicated number of Adults with SMI who received peer support services, from the 14 CMHCs in SFY 2017.
First-year target/outcome measurement: Increase by .50% the total unduplicated number of Adults with SMI who receive peer support services, from the 14 CMHCs, during SFY 2018.
Second-year target/outcome measurement: Increase by .50% the total unduplicated number of Adults with SMI who receive peer support services, from the 14 CMHCs, during SFY 2019.

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

Data Source:

MIS Client/Event Data Set used by DBHDID and the 14 CMHCs.

New Data Source(if needed):

Description of Data:

Data report to show the total number of unduplicated Adults with SMI served by the 14 CMHCs, who receive peer support services during the SFY (July 1 - June 30).

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

During SFY 2017, peer support as a service was captured in the data system as one code, regardless of age of recipient. For SFY 2018, peer support as a service will be captured by separate codes for Adult Peer Support and Youth Peer Support. Also, it should be noted that peer support as a service can be provided in Kentucky to anyone with a mental health diagnosis, not only individuals with SMI. But this indicator will focus only on measuring Adults with SMI who receive that service.

New Data issues/caveats that affect outcome measures:

Audited report shows the following total number served with Peer Support. Rpt ID: BG_Adult_2-1
SFY 2017 = 2,044
SFY 2018 = 2,517
SFY 2019 = 2,564

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

In SFY 2018, 2,934 adults with SMI (unduplicated) received a Peer Support service (individual or Group) from a CMHC as compared to SFY 2017, when there were 2604 adults with SMI (unduplicated) who received a Peer Support service from a CMHC. Thus, the goal of .5% between 2017 and 2018 was exceeded.

Rpt ID: BG_Child_2_1_1

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

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

How second year target was achieved (optional):

SFY 2018 = 2,517
SFY 2019 = 2,564 1.87% increase
Increase reflects target achieved.

Priority #: 3
Priority Area: Children with Severe Emotional Disturbance (SED)
Priority Type: MHS
Population(s): SED

Goal of the priority area:

Increase Access to Evidence Based Practices for Children/Youth with SED

Strategies to attain the goal:

CMHCs with Transition Age Youth specialized programming are required by contract to have peer support services available to children and youth being served.
Continue to provide training and technical assistance to ensure that CMHCs understand how to recruit, retain and support Youth Peer Support Specialists in the workplace and how to appropriately document and bill for services.
Continue to provide awareness activities and training regarding resiliency and recovery principles and guidance in the process of fully including peer specialists in the service delivery array.
Continue to provide training and technical assistance regarding the supervision of peer specialists.
Technical assistance to CMHCs regarding accurate coding procedures for reporting peer support services in client/event data set.

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Peer Support Services for Children and Youth with SED.
Baseline Measurement: Total unduplicated number of Children and Youth with SED who received peer support services, from the 14 CMHCs, in SFY 2017.

First-year target/outcome measurement: Increase by .50% the total unduplicated number of Children and Youth with SED who receive peer support services, from the 14 CMHCs, during SFY 2018.

Second-year target/outcome measurement: Increase by .50% the total unduplicated number of Children and Youth with SED who receive peer support services, from the 14 CMHCs, during SFY 2019.

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

Data Source:

MIS client/event data set used by DBHDID and the 14 CMHCs.

New Data Source(if needed):

Description of Data:

Data report to show the total number of unduplicated Children and Youth with SED served by the 14 CMHCs, who received peer support services in the SFY.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

During SFY 2017, peer support as a service was captured in the data system as one code. For SFY 2018, peer support as a service will be captured by separate codes for Adult Peer Support and Youth Peer Support. Also, it should be noted that peer support as a service can be provided in Kentucky to anyone with a mental health diagnosis, not only children with SED. But this indicator will focus only on measuring Children and Youth with SED who receive that service.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

The data indicates that there has not been an increase but rather a decrease in these services. SFY 2017: 318
SFY 2018: 679

KY has requested input from providers to try to determine the cause of this decline. It is important to learn if it is a possible data collection issue, a services issue or if there is some other explanation. DBH has heard from at least one provider (region 10) that there is a data collection issue for this service for youth.

Rpt ID: BG_Child_2_1_1

How first year target was achieved (optional):

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

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

How second year target was achieved (optional):

After an audit of the MIS Client data, new figures show an increase from 2017-2019 in the Children with SED Served with Peer Support.
Rpt ID: BG_Child_2_1_1
SFY 2017: 158
SFY 2018: 468
SFY 2019: 795

Priority #: 4

Priority Area: Primary Substance Use Prevention

Priority Type: SAP

Population(s): PP

Goal of the priority area:

Reduce the Incidence of Underage Drinking

Strategies to attain the goal:

Educate parents about "host parties" and the negative physiological effects of alcohol consumption by minors (children/youth under age 21). Work to establish additional Social Host Ordinances across the Commonwealth. Implement strategies such as "I Won't Be the One" to reduce underage social access to alcohol by minors. Improve early prevention screening and assessment of children/youth in school settings.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of high school students (grades 9-12) who report having consumed an alcoholic beverage in the last 30 days.

Baseline Measurement: 23.5% as measured by the 2016 KIP Survey.

First-year target/outcome measurement: 22.5% as measured by the 2018 KIP Survey

Second-year target/outcome measurement: 21.5% as measured by the KIP 2020 Survey

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

Data Source:

Kentucky Incentives for Prevention (KIP) Survey 2018
YRBS 2017

New Data Source(if needed):

Description of Data:

The KIP survey provides information about student self-reported use of substances (e.g. within the last 30 days, last year), student perceptions about substance use (e.g. level of risk, peer and parent disapproval), and perceived accessibility of substances in the community. The 2014 survey includes the addition of several new questions related to heroin use, bullying, dating violence, and suicidal ideation. Once the survey data are gathered and analyzed, each participating school district receives a report outlining district-specific results, and depicting comparisons to the region, state and (when available) the rest of the country. The KIP survey is Kentucky's largest source of data related to student use of alcohol, tobacco, and other drugs (ATOD), as well as a number of factors related to potential substance abuse.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

The KIP survey is only provided every two years in even numbered years. YRBS is offered in odd numbered years. The sample size for YRBS is only 1,990 students whereas the number of students surveyed through KIP in 2016 was 110,387. Past 30 day consumption of alcoholic beverages as measured by YRBS is significantly higher (10 percentage points) than the number reported through KIP. YRBS has a two stage random sample design. The first step is to weight all of the public schools based on their enrollment numbers and then select a sample of schools (e.g. larger schools are more likely to be selected due to their size). Then, they randomly select classes within the school, for example selecting from all English classes or all from second period classes. KIP, on the other hand, is not a random sample. KIP reports data from all 6th,8th 10, and 12th graders in every school that participates.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

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

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

How second year target was achieved (optional):

The PI was noted incorrectly in the original Block Grant application. We are adjusting the PI to reflect the Kentucky specific KIP indicator as baseline and Year 2 outcome measure. 2017 YRBS is utilized for the Year 1 measure. The 2020 KIP will not be conducted until October 2020 and therefore the outcome measure is not available for use in this reporting period.

Indicator #: 2
Indicator: Past 30 day use of alcohol among youth aged 12-17.
Baseline Measurement: 8.24%
First-year target/outcome measurement: 7.24%
Second-year target/outcome measurement: 6.24%

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

Data Source:

National Survey on Drug Use and Health

New Data Source(if needed):

Description of Data:

The National Survey on Drug Use and Health (NSDUH) provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs) and mental health in the United States. NSDUH is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency in the U.S. Department of Health and Human Services (DHHS). The National Survey on Drug Use and Health (NSDUH), is implemented annually among randomly selected youth aged 12 and older.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

The most recent NSDUH data available is from 2014-2015. Therefore the baseline is not current. Also, the 2014 NSDUH data for the age group 12-17 is significantly lower than our state KIP data for that same age group. This may be because NSDUH uses a much smaller sample size.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

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

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

The outcome measure for this indicator was extremely aggressive. Based on the low sample size of the NSDUH and the unstable trends noted, the measure was not realistic. The baseline measure represented the lowest level the measure had ever been and the projected decrease was 24% lower than the baseline.

How second year target was achieved (optional):

Priority #: 5
Priority Area: Pregnant Women/Women with Dependent Children who have Substance Use Disorders (SUDs)
Priority Type: SAT
Population(s): PWWDC

Goal of the priority area:

Increase access to treatment for Pregnant/Postpartum Women and Women with Dependent Children with SUDs

Strategies to attain the goal:

Outreach to referral sources for women with SUDs (e.g., primary care, pediatricians, OB/GYNs, emergency rooms, law enforcement, clinicians, etc.)

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Increase by 2% the total number of unduplicated PWWDC who receive specialized case management services from the 14 CMHCs from SFY 2017 to SFY 2019.

Baseline Measurement: The total number of unduplicated PWWDC who received specialized case management services from the 14 CMHCs in SFY 2017.

First-year target/outcome measurement: Increase by 1% the total number of unduplicated PWWDC who receive specialized case management services from the 14 CMHCs during SFY 2018.

Second-year target/outcome measurement: Increase by 1% the total number of unduplicated PWWDC who receive specialized case management services from the 14 CMHCs during SFY 2019.

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

Data Source:

MIS client/event data set used by DBHDID and the 14 CMHCs.
Additional data reporting provided by the Center for Drug and Alcohol Research.

New Data Source(if needed):

Description of Data:

Data reports show the unduplicated number of PWWDC served who meet the demographics for PWWDC and received specialized case management services from the 14 CMHCs in each SFY.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

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

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

How second year target was achieved (optional):

2% for this indicator = 84
KY served 88 additional PW/WDC with SUD from 2017-2019 -from 4200 to 4288.

Priority #: 6

Priority Area: Persons who inject drugs

Priority Type: SAT

Population(s): PWID

Goal of the priority area:

Reduce the outbreak of Hepatitis by increasing the availability and awareness of syringe exchange programs statewide.

Strategies to attain the goal:

Collaborate with the Office of Drug Control Policy, the Harm Reduction Coalition and the Department for Public Health to monitor educate

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: The number of syringe exchange programs (SEPs) in place across the Commonwealth

Baseline Measurement: There are currently 30 SEPs statewide in KY

First-year target/outcome measurement: Increase the number of SEPs from 30 to 32 by the end of state fiscal year 2018

Second-year target/outcome measurement: Increase the number of SEPs from 30 to 35 by the end of state fiscal year 2019

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

Data Source:

KY Department for Public Health Surveillance data, KY Office of Drug Control Policy, KY Harm Reduction Coalition, and DBHDID

New Data Source(if needed):

Description of Data:

The KY Department of Public Health monitors the number of SEPs statewide and also posts to their web site the days/hours of operation for each. The ODCP and the KY Harm Reduction Coalition and the KY DBHDID work to educate individuals and communities about the cost, benefits, myths and best practice guidelines for initiating and maintaining SEPs.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Syringe exchange programs (SEPs) have existed and been studied extensively in the United States since 1988. SEPs are community-based programs that provide access to sterile needles and syringes free of cost, facilitate safe disposal of used needles and syringes and offer safer injection education. SEPs in Kentucky also provide linkages to critical services and programs, including substance use disorder treatment programs; overdose prevention education; screening, care and treatment for HIV and viral hepatitis; prevention of mother-to-child transmission; hepatitis A and hepatitis B vaccination; screening for other sexually transmitted diseases and tuberculosis; partner services; and other medical, social and mental health services.

In direct response to Senate Bill 192 enacted during the 2015 regular legislative session, the Kentucky Department for Public Health has published guidelines for local health departments implementing harm reduction and syringe exchange programs.
NO SABG FUNDS WILL BE USED TO SUPPORT THE SEPs.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

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

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

How second year target was achieved (optional):

As reported by the KY Department for Public Health, there were 64 Syringe Exchange Programs in KY at the SFY 2019 end (June 30, 2019).

Priority #: 7

Priority Area: Individuals who receive Substance Use Disorder (SUD) services and have or are at risk for Tuberculosis (TB)

Priority Type: SAT

Population(s): TB

Goal of the priority area:

Improve data collection of individuals with or at risk of TB who receive services for SUDs.

Strategies to attain the goal:

Continue partnering with the Ky Department for Public Health and the CMHCs to improve data collection definitions and screening protocol
* Ensure that CMHCs are systematically screening for TB among individuals receiving services for SUDs

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Screen persons who present for substance use services, at the fourteen CMHCs, for TB.

Baseline Measurement: All fourteen CMHCs have written policy and procedure regarding the screening for TB for all individuals seeking services for substance use disorders.

First-year target/outcome measurement: Ten of fourteen CMHCs will submit their written policies and procedure regarding the screening for TB for all individuals seeking services for substance use disorders.

Second-year target/outcome measurement: Twelve of fourteen CMHCs will submit their written policies and procedure regarding the screening for TB for all individuals seeking services for substance use disorders.

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

Data Source:

CMHC to submit through the Plan and Budget process requested P&P for TB screening.

New Data Source(if needed):

Description of Data:

Written P&P submitted by CMHCs

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

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

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

How first year target was achieved (optional):

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

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

How second year target was achieved (optional):

Written Policies and Procedures were submitted by each of the 14 CMHCs during the Plan and Budget process in April 2019.

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Footnotes:

C. State Agency Expenditure Reports

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

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

Activity (See instructions for using Row 1.)	A. SA Block Grant	B. MH Block Grant	C. Medicaid (Federal, State, and Local)	D. Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other
1. Substance Abuse Prevention and Treatment							
a. Pregnant Women and Women with Dependent Children							
b. All Other							
2. Primary Prevention*		\$0	\$0	\$0	\$0	\$0	\$0
3. Evidence-Based Practices for Early Serious Mental Illness**		\$993,000	\$0	\$0	\$0	\$0	\$0
4. Tuberculosis Services							
5. HIV Early Intervention Services							
6. State Hospital			\$46,385,800	\$12,033,800	\$69,023,700	\$2,526,800	\$57,100
7. Other 24 Hour Care		\$0	\$15,011,900	\$476,100	\$4,914,500	\$2,589,000	\$16,300
8. Ambulatory/Community Non-24 Hour Care		\$6,866,100	\$276,000	\$1,783,200	\$36,291,200	\$0	\$2,398,100
9. Administration (Excluding Program and Provider Level)		\$60,500	\$97,100	\$3,500	\$11,684,200	\$0	\$79,800
10. Total	\$0	\$7,919,600	\$61,770,800	\$14,296,600	\$121,913,600	\$5,115,800	\$2,551,300

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

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

Please indicate the expenditures are actual or estimated.

Actual Estimated

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Footnotes:

C. State Agency Expenditure Reports

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

Source of Funds						
Activity (See instructions for using Row 1.)	A. Mental Health Block Grant	B. Medicaid (Federal State & Local)	C. Other Federal Funds (e.g. ACF (TANF), CDC, CMS (Medicare), SAMHSA, etc.)	D. State Funds	E. Local funds (excluding local Medicaid)	F. Other
1. CSC-Evidences-Based Practices for First Episode Psychosis*	\$918,000	\$0	\$0	\$0	\$0	\$0
Training for CSC Practices	\$40,000	\$0	\$0	\$0	\$0	\$0
Planning for CSC Practices	\$0	\$0	\$0	\$0	\$0	\$0
2. Other Early Serious Mental Illnesses programs (other than FEP or partial CSC programs)	\$0	\$0	\$0	\$0	\$0	\$0
3. Training for ESMI	\$35,000	\$0	\$0	\$0	\$0	\$0
4. Planning for ESMI	\$0	\$0	\$0	\$0	\$0	\$0
7. Total	\$993,000	\$0	\$0	\$0	\$0	\$0

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

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Footnotes:

C. State Agency Expenditure Reports

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

Statewide Expenditures for Children's Mental Health Services			
Actual SFY 1994	Actual SFY 2018	Estimated/Actual SFY 2019	Expense Type
\$3,832,010	\$7,739,044	\$7,879,497	<input checked="" type="radio"/> Actual <input type="radio"/> Estimated

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

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

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Footnotes:

C. State Agency Expenditure Reports

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

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

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

Activity	Total of Block Grant
1. Information Systems	\$97,762
2. Infrastructure Support	\$75,317
3. Partnerships, Community Outreach and Needs Assessment	\$44,060
4. Planning Council Activities	\$9,341
5. Quality Assurance and Improvement	\$
6. Research and Evaluation	\$
7. Training and Education	\$11,717
Total Non-Direct Services	\$238,197
Comments on Data:	Significant Changes due to: Information Systems - increased use of information systems contractor (UKIPOP); Infrastructure Support - added training and technical assistance provided; Partnerships, community outreach and needs assessment - increased training provided through KY MH advocacy organizations; and Quality assurance and improvement - closed the "Institute of Excellence".

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Footnotes:

C. State Agency Expenditure Reports

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

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

Amount of MH Block Grant Allocation to Agency										
Entity Number	Area Served (Statewide or Sub-State Planning Area)	Provider/Program Name	Street Address	City	State	Zip	Total Block Grant Funds	Adults with Serious Mental Illness	Children with Serious Emotional Disturbance	Set-aside for ESMI/FEP Programs
14	Sub-State Planning Area	Adanta	130 Souther School Road	Somerset	KY	42501	\$274,943.00	\$187,110.00	\$84,833.00	
6	Sub-State Planning Area	Centerstone	10101 Linn Station Road Suite 600	Louisville	KY	40223	\$1,231,776.00	\$994,558.00	\$187,218.00	
5	Sub-State Planning Area	Communicare	107 Cranes Roost Court	Elizabethtown	KY	42701	\$764,192.00	\$462,875.00	\$101,317.00	
8	Sub-State Planning Area	Comprehend	611 Forest Avenue	Maysville	KY	41056	\$172,384.00	\$89,123.00	\$80,261.00	
13	Sub-State Planning Area	Cumberland River	1203 American Greeting Card Road PO Box 568	Corbin	KY	40702	\$612,663.00	\$335,393.00	\$102,270.00	
1	Sub-State Planning Area	Four Rivers	425 Broadway	Paducah	KY	42001	\$484,262.00	\$297,041.00	\$87,221.00	
16	Statewide	Kentucky Housing Corporation	1231 Louisville Road	Frankfort	KY	40601	\$13,333.00	\$13,333.00	\$0.00	
17	Statewide	Kentucky Partnership for Families & Children (KPFC)	1st Floor 207 Holmes Street	Frankfort	KY	40601	\$143,000.00	\$0.00	\$143,000.00	
12	Sub-State Planning Area	KY River	115 Rockwood lane	Hazard	KY	41701	\$217,222.00	\$133,255.00	\$80,967.00	
4	Sub-State Planning Area	Lifeskills	PO Box 6499	Bowling Green	KY	42102	\$744,847.00	\$481,895.00	\$162,952.00	
11	Sub-State Planning Area	Mountain	104 South Front Street	Prestonsburg	KY	41653	\$446,137.00	\$246,676.00	\$99,461.00	
18	Statewide	NAMI Kentucky	2441 S. Hwy 27	Somerset	KY	42501	\$145,054.00	\$145,054.00	\$0.00	
19	Statewide	NAMI Lexington (KY) Inc.	498 Georgetown St Ste 201	Lexington	KY	40508	\$150,190.00	\$150,190.00	\$0.00	
15	Sub-State Planning Area	New Vista	1351 Newtown Pike	Lexington	KY	40511	\$699,592.00	\$344,291.00	\$155,301.00	
7	Sub-State Planning Area	North Key	502 Farrell Drive PO Box 2680	Covington	KY	41011	\$478,851.00	\$356,966.00	\$118,885.00	
10	Sub-State Planning Area	Pathways	1212 Bath Avenue 8th Floor PO Box 790	Ashland	KY	41105	\$414,829.00	\$268,144.00	\$96,685.00	
2	Sub-State Planning Area	Pennyroyal	3999 Fort Campbell Blvd	Hopkinsville	KY	42241	\$342,053.00	\$263,081.00	\$75,972.00	
3	Sub-State Planning Area	River Valley	1100 Walnut Street PO Box 1637	Owensboro	KY	42302	\$360,015.00	\$271,123.00	\$85,892.00	
21	Statewide	Technical Assistance Collaborative	31 Saint James Ave Ste 950	Boston	MA	2116	\$83,600.00	\$83,600.00	\$0.00	
20	Statewide	Wellspring Inc.	PO Box 1927	Louisville	KY	40201	\$50,000.00	\$50,000.00	\$0.00	
Total							\$7,828,943.00	\$5,173,708.00	\$1,662,235.00	\$0.00

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Footnotes:

C. State Agency Expenditure Reports

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

Total Expenditures for SMHA		
Period (A)	Expenditures (B)	<u>B1(2017) + B2(2018)</u> 2 (C)
SFY 2017 (1)	\$20,528,760	
SFY 2018 (2)	\$20,546,106	\$20,537,433
SFY 2019 (3)	\$20,551,883	

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

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

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

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Footnotes:

D. Population and Services Report

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

Expenditure Period Start Date: Expenditure Period End Date:

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

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

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Footnotes:

D. Population and Services Report

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

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

Table 8A

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

	Total			American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic use only if data for MHBG Table 8B are not available			More Than One Race Reported			Race Not Available			
	Female	Male	Not Available	Total	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available
0-12 years	12,226	19,607	68	31,901	18	18	0	25	43	0	1,248	2,354	7	13	21	0	9,366	14,683	32	0	0	0	604	943	1	952	1,545	28
13-17 years	10,878	11,074	53	22,005	22	29	0	37	32	1	945	1,073	0	15	13	0	8,604	8,654	36	0	0	0	459	474	2	796	799	14
18-20 years	4,119	3,757	36	7,912	7	6	0	16	14	0	391	348	4	5	1	0	3,155	2,864	19	0	0	0	144	156	0	401	368	13
21-24 years	5,182	4,499	67	9,748	9	7	0	12	25	0	508	489	0	8	1	0	3,967	3,376	46	0	0	0	163	107	1	515	494	20
25-44 years	28,046	25,027	198	53,271	65	50	0	56	63	0	2,446	2,444	6	23	27	0	22,630	19,701	123	0	0	0	506	370	0	2,320	2,372	69
45-64 years	19,444	15,772	78	35,294	52	29	0	61	30	0	1,759	1,710	6	14	19	0	15,950	12,540	44	0	0	0	309	233	0	1,299	1,211	28
65-74 years	2,793	1,730	14	4,537	5	5	0	8	2	0	175	140	0	2	1	0	2,351	1,369	10	0	0	0	32	23	0	220	190	4
75+ years	859	432	41	1,332	2	1	0	1	0	0	41	17	0	1	0	0	629	295	6	0	0	0	7	8	0	178	111	35
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	83,547	81,898	555	166,000	180	145	0	216	209	1	7,513	8,575	23	81	83	0	66,652	63,482	316	0	0	0	2,224	2,314	4	6,681	7,090	211
Pregnant Women	854	0	0	854	1			3			90			0			697			0			30			33		

Are these numbers unduplicated?

- Unduplicated
 Duplicated : between Hospitals and Community
 Duplicated : Among Community Programs
 Duplicated between children and adults
 Other : describe

Comments on Data (for Age):	
Comments on Data (for Gender):	
Comments on Data (for Race/Ethnicity):	Notice an increase in the number of Race Not Available; will try to identify the cause and improve reporting for next year.
Comments on Data (Overall):	URS 2019 Not Available increased; possible indirect result from several CMHCs implementing a new EHR system; will continue to monitor

Table 8B

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

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

	Not Hispanic or Latino			Hispanic or Latino			Hispanic or Latino Origin Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
0-12 years	11,527	18,508	29	487	790	3	212	309	36	12,226	19,607	68	31,901
13-17 years	10,294	10,505	31	440	477	1	144	92	21	10,878	11,074	53	22,005
18-20 years	3,914	3,545	17	124	105	0	81	107	19	4,119	3,757	36	7,912
21-24 years	4,946	4,206	35	112	89	3	124	204	29	5,182	4,499	67	9,748
25-44 years	26,904	23,589	86	437	378	3	705	1,060	109	28,046	25,027	198	53,271
45-64 years	18,803	15,023	33	246	179	1	395	570	44	19,444	15,772	78	35,294
65-74 years	2,668	1,615	5	43	21	0	82	94	9	2,793	1,730	14	4,537
75+ years	812	398	6	10	5	0	37	29	35	859	432	41	1,332
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	79,868	77,389	242	1,899	2,044	11	1,780	2,465	302	83,547	81,898	555	166,000
Pregnant Women	832			13			9			854	0	0	854
Comments on Data (for Age):													

Comments on Data (for Gender):	
Comments on Data (for Race/Ethnicity):	Notice an increase in the number of Ethnicity Not Available; will try to identify the cause and improve reporting for next year.
Comments on Data (Overall):	URS 2019 Not Available increased; possible indirect result from several CMHCs implementing a new EHR system; will continue to monitor.

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Footnotes:

D. Population and Services Report

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

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

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

Service Setting	Age 0-17			Age 18-20			Age 21-64			Age 65+			Age Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
Community Mental Health Programs	23,102	30,680	121	4,084	3,682	36	52,124	44,047	343	3,571	2,069	55	0	0	0	82,881	80,478	555	163,914
State Psychiatric Hospitals	5	4	0	127	215	0	2,115	3,438	0	193	168	0	0	0	0	2,440	3,825	0	6,265
Other Psychiatric Inpatient	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	0	0	0	0	0	0	0	0	0	0

Comments on Data (for Age):

Comments on Data (for Gender):

Notice an increase in the number of Gender Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (Overall):

URS 2019 Not Available increased; possible indirect result from several CMHCs implementing a new EHR system; will continue to monitor.

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Footnotes:

D. Population and Services Report

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

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Table 10A

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

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

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

	Total				American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic use only if data for MHBG Table 10B are not available			More Than One Race Reported			Race Not Available		
	Female	Male	Not Avail	Total	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail
Medicaid (only Medicaid)	42,821	39,440	152	82,413	102	72	0	98	83	0	4,460	4,812	8	41	49	0	33,374	29,757	108	0	0	0	1,190	1,297	2	3,556	3,370	34
Non-Medicaid Sources (only)	24,376	25,367	306	50,049	48	42	0	72	70	1	1,716	2,074	7	28	19	0	19,612	19,816	139	0	0	0	574	549	1	2,326	2,797	158
People Served by Both Medicaid and Non-Medicaid Sources	15,684	15,671	97	31,452	29	28	0	42	47	0	1,271	1,466	8	12	15	0	13,104	12,789	69	0	0	0	451	454	1	775	872	19
Medicaid Status Not Available	666	1,420	0	2,086	1	3	0	4	9	0	66	223	0	0	0	0	562	1,120	0	0	0	0	9	14	0	24	51	0
Total Served	83,547	81,898	555	166,000	180	145	0	216	209	1	7,513	8,575	23	81	83	0	66,652	63,482	316	0	0	0	2,224	2,314	4	6,681	7,090	211

Data Based on Medicaid Services

Data Based on Medical Eligibility, not Medicaid Paid Services

'People Served By Both' includes people with any Medicaid

Comments on Data (for Race):

Notice an increase in the number of Race Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (for Gender):

Comments on Data (Overall):

URS 2019 Not Available increased; possible indirect result from several CMHCs implementing a new EHR system; will continue to monitor.

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

their treatment, and (4) Medicaid Status Not Available.

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

Table 10B

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

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

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

	Not Hispanic or Latino			Hispanic or Latino			Hispanic or Latino Origin Unknown			Total			
	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Female	Male	Not Avail	Total
Medicaid Only	41,144	37,734	98	1,179	1,206	7	498	500	47	42,821	39,440	152	82,413
Non-Medicaid Only	23,384	24,240	90	441	514	4	551	613	212	24,376	25,367	306	50,049
People Served by Both Medicaid and Non-Medicaid Sources	15,214	15,143	54	278	319	0	192	209	43	15,684	15,671	97	31,452
Medicaid Status Unknown	126	272	0	1	5	0	539	1,143	0	666	1,420	0	2,086
Total Served	79,868	77,389	242	1,899	2,044	11	1,780	2,465	302	83,547	81,898	555	166,000

Comments on Data (for Ethnicity):

Comments on Data (for Gender):

Notice an increase in the number of Gender Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (Overall):

URS 2019 Not Available increased; possible indirect result from several CMHCs implementing a new EHR system; will continue to monitor.

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

Footnotes:

D. Population and Services Report

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

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

Profile of Service Utilization	Total Served at Beginning of Year (unduplicated)	Admissions During the year (duplicated)	Discharges During the year (duplicated)	Length of Stay (in Days): Discharged Patients		For Clients in Facility for 1 Year or Less: Average Length of Stay (in Days): Residents at end of year		For Clients in Facility More Than 1 Year: Average Length of Stay (in Days): Residents at end of year	
				Average (Mean)	Median	Average (Mean)	Median	Average (Mean)	Median
State Hospitals	414	7,860	7,876	0	0	0	0	0	0
Children (0 to 17 years)	0	0	0	0	0	0	0	0	0
Adults (18 yrs and over)	414	7,853	7,870	18	7	36	13	1,377	666
Age Not Available	0	7	6	10	7	4	4	0	0
Other Psychiatric Inpatient	0	0	0	0	0	0	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 Tx Centers	0	0	0	0	0	0	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
Community Programs	54,372	109,542	0	0	0	0	0	0	0
Children (0 to 17 years)	20,567	33,336							
Adults (18 yrs and over)	33,803	76,164							
Age Not Available	2	42							

Comments on Data (State Hospital):

Comments on Data (Other Inpatient):

Comments on Data (Residential Treatment):

Comments on Data (Community Programs):

Community Program admission reduced from 2018. Causes may include: lack of outreach by CMHCs; increased business

competition of MH/SA private providers, Medicaid policy increased eligibility requirements.

Comments on Data (Overall):

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Footnotes:

D. Population and Services Report

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

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

Populations Served

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

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

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

- Serious Mental Illness
 Serious Emotional Disturbances

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

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

39.0 %

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

53.0 %

3. Co-Occurring Mental Health and Substance Abuse:

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

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

17.0 %

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

1.0 %

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

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

7.0 %

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

1.0 %

3.b.3. Please describe how you calculate and count the number of persons with co-occurring disorders. Percentage of adults/children with co-occurring SA problems is from AMART - client counts with both MH-record and SA-record markers true divided by total served (Adults:19425/113002); Children: 453/53274). Percentage of adults with SMI and children with SED with co-occurring SA problems: SMI and SED + both (MH-record + SA-record); rptID="CMHC Cert B6"(3036/43179)

4. State Mental Health Agency Responsibilities

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

1. State Medicaid Operating Agency
 2. Setting Standards

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

b. Managed Care (Mental Health Managed Care)

Are Data for these programs reported on URS Tables?

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

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

Are the data reporting in the tables?

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

6. Summary Administrative Data

6.a. Report Year:

6.b. State Identifier:

Summary Information on Data Submitted by SMHA:

- 6.c. Year being reported: 7/1/2018 12:00:00 AM to 6/30/2019 12:00:00 AM
- 6.d. Person Responsible for Submission: Hope Beatty
- 6.e. Contact Phone Number: (502) 782-6147
- 6.f. Contact Address: 275 E. Main Street 4W-G Frankfort, KY 40601
- 6.g. E-mail: HopeB.Beatty@Ky.Gov

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Footnotes:

D. Population and Services Report

MHBG Tables 13A and 13B (URS Tables 14A and 14B) - Profile of Persons with 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 the CMHS. URS Table's 2A and 2B included all clients served by publicly operated or funded programs. This table counts only clients who meet the CMHS definition of SMI or SED. For many states, this table may be the same as URS Table's 2A and 2B. For 2007, states should report using the Federal Definitions of SMI and SED if they can report them, if not, please report using your state's definitions of SMI and SED and provide information below describing your state's definition.

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

	Total			American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic use only if data for MHBG Table 13b are not available			More Than One Race Reported			Race Not Available			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	
0-12 years	5,388	9,755	15	15,158	5	8	0	7	15	0	672	1,434	5	4	15	0	4,068	7,157	3	0	0	0	332	557	0	300	569	7
13-17 years	5,142	5,493	13	10,648	9	14	0	14	16	1	513	594	0	8	5	0	4,112	4,332	7	0	0	0	245	270	1	241	262	4
18-20 years	1,570	1,297	1	2,868	4	3	0	1	5	0	158	132	1	1	0	0	1,282	1,031	0	0	0	0	57	62	0	67	64	0
21-24 years	1,581	1,143	12	2,736	6	2	0	4	7	0	178	133	0	2	0	0	1,267	911	10	0	0	0	55	23	1	69	67	1
25-44 years	10,140	7,555	31	17,726	23	14	0	26	20	0	1,133	906	1	7	9	0	8,322	6,162	21	0	0	0	197	104	0	432	340	9
45-64 years	10,366	6,773	14	17,153	32	11	0	41	13	0	1,094	766	1	6	7	0	8,667	5,652	10	0	0	0	140	99	0	386	225	3
65-74 years	1,464	747	1	2,212	3	2	0	8	1	0	113	65	0	0	0	0	1,279	646	1	0	0	0	13	11	0	48	22	0
75+ years	268	92	1	361	0	0	0	0	0	0	21	2	0	0	0	0	222	77	0	0	0	0	4	3	0	21	10	1
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pregnant Women	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	35,919	32,855	88	68,862	82	54	0	101	77	1	3,882	4,032	8	28	36	0	29,219	25,968	52	0	0	0	1,043	1,129	2	1,564	1,559	25

Comments on Data (for Age):

Comments on Data (for Gender):

Notice an increase in the number of Gender Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (for Race/Ethnicity):

Notice an increase in the number of Race Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (Overall):

1. State Definitions Match the Federal Definitions

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

See General Notes

Diagnoses included in the state SMI definition:

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

See General Notes

Diagnoses included in the state SED definition:

Table 13B

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

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

	Not Hispanic or Latino			Hispanic or Latino			Hispanic or Latino Origin Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
0-12 years	5,108	9,224	7	219	413	1	61	118	7	5,388	9,755	15	15,158
13-17 years	4,885	5,224	8	207	238	1	50	31	4	5,142	5,493	13	10,648
18-20 years	1,515	1,254	1	42	33	0	13	10	0	1,570	1,297	1	2,868
21-24 years	1,527	1,098	11	37	27	0	17	18	1	1,581	1,143	12	2,736
25-44 years	9,804	7,334	19	194	112	0	142	109	12	10,140	7,555	31	17,726
45-64 years	10,136	6,590	6	137	82	1	93	101	7	10,366	6,773	14	17,153
65-74 years	1,434	724	1	20	11	0	10	12	0	1,464	747	1	2,212
75+ years	260	90	1	8	1	0	0	1	0	268	92	1	361
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0
Pregnant Women	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	34,669	31,538	54	864	917	3	386	400	31	35,919	32,855	88	68,862

Comments on Data (for Age):

Comments on Data (for Gender):

Notice an increase in the number of Gender Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (for Race/Ethnicity):	Notice an increase in the number of Ethnicity Not Available; will try to identify the cause and improve reporting for next year.
Comments on Data (Overall):	

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Footnotes:

D. Population and Services Report

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

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

Service Setting	Age 0-17			Age 18-20			Age 21-64			Age 65+			Age Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Total
Community Mental Health Programs	10,530	15,248	28	1,570	1,297	1	22,087	15,471	57	1,732	839	2	0	0	0	35,919	32,855	88	68,862
State Psychiatric Hospitals	0	0	0	50	62	0	822	1,070	0	57	36	0	2	1	0	931	1,169	0	2,100
Other Psychiatric Inpatient	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	0	0	0	0	0	0	0	0	0	0

Comments on Data (for Age):

Comments on Data (for Gender):

Notice an increase in the number of Gender Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (Overall):

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

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

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

Adults Served	18-20			21-64			65+			Age Not Available			Total			
	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Avail	Total
Employed: Competitively Employed Full or Part Time (includes Supported Employment)	936	666	16	13,701	12,439	123	254	205	5	0	0	0	14,891	13,310	144	28,345
Unemployed	939	895	2	14,374	13,837	59	182	151	8	0	0	0	15,495	14,883	69	30,447
Not In Labor Force: Retired, Sheltered Employment, Sheltered Workshops, Other (homemaker, student, volunteer, disabled, etc.)	2,069	1,943	9	21,999	15,304	79	2,905	1,564	10	0	0	0	26,973	18,811	98	45,882
Not Available	140	178	9	2,050	2,467	82	230	149	32	0	0	0	2,420	2,794	123	5,337
Total	4,084	3,682	36	52,124	44,047	343	3,571	2,069	55	0	0	0	59,779	49,798	434	110,011

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

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

Comments on Data (for Age): _____

Comments on Data (for Gender):
Notice an increase in the number of Gender Not Available; will try to identify the cause and improve reporting for next year.

Comments on Data (Overall):
URS 2019 Not Available increased; possible indirect result from several CMHCs implementing a new EHR system; will continue to monitor

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

Clients Primary Diagnosis	Employed: Competitively Employed Full or Part Time (includes Supported Employment)	Unemployed	Not In Labor Force: Retired, Sheltered Employment, Sheltered Workshops, Other (homemaker, student, volunteer, disabled, etc.)	Employment Status Not Available	Total
Schizophrenia & Related Disorders (F20, F25)	440	834	4,009	356	5,639
Bipolar and Mood Disorders (F30,F31,F32,F33,F34.1,F60.89,F34.0,F32.9)	8,703	8,708	17,428	1,579	36,418
Other Psychoses (F22,F23,F24,F28,F29)	275	438	882	277	1,872
All Other Diagnoses	18,927	20,467	23,563	3,125	66,082
No DX and Deferred DX (R69,R99,Z03.89)	0	0	0	0	0
Diagnosis Total	28,345	30,447	45,882	5,337	110,011

Comments on Data (for Diagnosis):

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

Adult Consumer Survey Results		Number of Positive Responses	Responses	Percent Positive (calculated)
1. Social Connectedness		4,798	6,327	76%
2. Functioning		4,685	6,324	74%
Child/Adolescent Consumer Survey Results		Number of Positive Responses	Responses	Percent Positive (calculated)
3. Social Connectedness		2,578	2,817	92%
4. Functioning		1,947	2,822	69%
Comments on Data:				

Adult Social Connectedness and Functioning Measures

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

Child/Family Social Connectedness and Functioning Measures

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

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

Adult Consumer Survey Results:	Number of Positive Responses	Responses	Confidence Interval*
1. Reporting Positively about Access.	5,877	6,529	89%-91%
2. Reporting Positively about Quality and Appropriateness for Adults.	6,016	6,426	93%-94%
3. Reporting Positively about Outcomes.	4,589	6,218	73%-75%
4. Adults Reporting on Participation In Treatment Planning.	5,351	6,282	84%-86%
5. Adults Positively about General Satisfaction with Services.	6,056	6,582	91%-93%

Child/Adolescent Consumer Survey Results:	Number of Positive Responses	Responses	Confidence Interval*
1. Reporting Positively about Access.	2,630	2,876	90%-92%
2. Reporting Positively about General Satisfaction for Children.	2,654	2,869	92%-93%
3. Reporting Positively about Outcomes for Children.	1,990	2,815	69%-72%
4. Family Members Reporting on Participation In Treatment Planning for their Children.	2,707	2,881	93%-95%
5. Family Members Reporting High Cultural Sensitivity of Staff.	2,629	2,715	96%-97%

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

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

Comments on Data:

Adult Consumer Surveys

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

1.a. If no, which version:

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

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

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

Adult Survey Approach

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

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

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

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

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

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

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

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

3. Responses are Matched to Client Databases

6. Sample Size and Response Rate

6.a. How Many surveys were Attempted (sent out or calls initiated)?

6.b. How many survey Contacts were made? (surveys to valid phone numbers or addresses)?

6.c. How many surveys were completed? (survey forms returned or calls completed) 6,614

6.d. What was your response rate? (number of Completed surveys divided by number of Contacts)

6.e. If you receive "blank" surveys back from consumers (surveys with no responses on them), did you count these surveys as "completed" for the calculation of response rates? Yes No

7. Who Conducted the survey

7.a. SMHA Conducted or contracted for the survey (survey done at state level) Yes No

7.b. Local Mental Health Providers/County mental health providers conducted or contracted for the survey (survey was done at the local or regional level) Yes No

7.c. Other, describe:

* Report Confidence Intervals at the 95% confidence level

Note: The confidence interval is the plus-or-minus figure usually reported in newspaper or television opinion poll results. For example, if you use a confidence interval of 4 and 47% percent of your sample picks an answer you can be "sure" that if you had asked the question of the entire relevant population between 43% (47-4) and 51% (47+4) would have picked that answer.

The confidence level tells you how sure you can be. It is expressed as a percentage and represents how often the true percentage of the population who would pick an answer lies within the confidence interval. The 95% confidence level means you can be 95% certain; the 99% confidence level means you can be 99% certain. Most researchers use the 95% confidence level.

When you put the confidence level and the confidence interval together, you can say that you are 95% sure that the true percentage of the population is between 43% and 51%. (From www.surveysystem.com)

Child / Family Consumer Surveys

1. Was the MHSIP Children / Family Survey (YSS-F) Yes

Used?

If no, what survey did you use?

If no, please attach instrument used.

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

Child Survey Approach

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

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

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

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

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

3. Children who were Medicaid Eligible or in Medicaid Managed Care

4. Other (for example, if you survey anyone served in the last 3 months, describe that here):

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

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

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

1. MH Consumers

2. Family Members

3. Professional Interviewers

4. MH Clinicians

5. Non Direct Treatment Staff

6. Other, describe:

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

2. Responses are Confidential

3. Responses are Matched to Client Databases

6. Sample Size and Response Rate

6.a. How Many surveys were Attempted (sent out or calls initiated)?

6.b. How many survey Contacts were made? (surveys to valid phone numbers or addresses)?

6.c. How many surveys were completed? (survey forms returned or calls completed) 2,912

6.d. What was your response rate? (number of Completed surveys divided by number of Contacts)

6.e. If you receive "blank" surveys back from consumers (surveys with no responses on them), did you count these surveys as "completed" for the calculation of response rates? Yes No

7. Who Conducted the survey

7.a. SMHA Conducted or contracted for the survey (survey done at state level) Yes No

7.b. Local Mental Health Providers/County mental health providers conducted or contracted for the survey (survey was done at the local or regional level) Yes No

7.c. Other, describe:

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

Adult Consumer Survey Results:

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

Indicators	Total		American Indian or Alaska Native		Asian		Black or African American		Native Hawaiian or Other Pacific Islander		White		More Than One Race Reported		Other / Not Available		Hispanic Origin	
	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses
1. Reporting Positively About Access.	5,877	6,529	100	122	21	23	354	406	8	9	4,926	5,440	0	0	468	529	114	138
2. Reporting Positively About Quality and Appropriateness.	6,016	6,426	108	121	20	22	368	401	8	8	5,035	5,356	0	0	477	518	119	138
3. Reporting Positively About Outcomes.	4,589	6,218	84	118	16	21	271	381	8	9	3,872	5,210	0	0	338	479	91	138
4. Reporting Positively about Participation in Treatment Planning	5,351	6,282	90	115	17	21	317	391	8	8	4,489	5,238	0	0	430	509	105	135
5. Reporting Positively about General Satisfaction	6,056	6,582	107	122	21	23	378	414	8	9	5,059	5,481	0	0	483	533	121	139
6. Social Connectedness	4,798	6,327	88	118	16	22	282	391	7	9	4,048	5,294	0	0	357	493	100	140
7. Functioning	4,685	6,324	81	120	14	21	274	389	7	9	3,969	5,299	0	0	340	486	89	140

Child/Adolescent Family Survey Results:

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

Indicators	Total		American Indian or Alaska Native		Asian		Black or African American		Native Hawaiian or Other Pacific Islander		White		More Than One Race Reported		Other / Not Available		Hispanic Origin	
	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses	# Positive	Responses
1. Reporting Positively About Access.	2,630	2,876	24	31	10	10	243	264	2	2	2,140	2,340	0	0	211	229	81	90

2. Reporting Positively About General Satisfaction	2,654	2,869	27	31	10	10	244	261	2	2	2,166	2,337	0	0	205	228	85	94
3. Reporting Positively About Outcomes.	1,990	2,815	23	30	8	10	170	260	2	2	1,666	2,300	0	0	121	213	65	94
4. Reporting Positively Participation in Treatment Planning for their Children.	2,707	2,881	26	31	10	10	248	263	2	2	2,209	2,343	0	0	212	232	84	94
5. Reporting Positively About Cultural Sensitivity of Staff.	2,629	2,715	24	28	10	10	243	248	2	2	2,141	2,205	0	0	209	222	82	87
6. Social Connectedness	2,578	2,817	29	31	8	10	235	259	2	2	2,150	2,339	0	0	154	176	79	94
7. Functioning	1,947	2,822	23	30	8	10	168	260	2	2	1,625	2,306	0	0	121	214	65	94

Comments on Data:

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

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

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

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

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

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

	Private Residence	Foster Home	Residential Care	Crisis Residence	Children's Residential Treatment	Institutional Setting	Jail / Correctional Facility	Homeless / Shelter	Other	NA	Total
0-17	51,014	1,370	403	0	0	17	35	130	0	937	53,906
18-64	55,238	217	4,346	0	0	4,004	998	5,653	0	35,769	106,225
65+	3,993	13	363	0	0	586	7	75	0	832	5,869
Not Available	0	0	0	0	0	0	0	0	0	0	0
TOTAL	110,245	1,600	5,112	0	0	4,607	1,040	5,858	0	37,538	166,000
Female	57,356	738	2,437	0	0	1,761	344	2,476	0	18,435	83,547
Male	52,632	857	2,673	0	0	2,846	694	3,374	0	18,822	81,898
Not Available	257	5	2	0	0	0	2	8	0	281	555
TOTAL	110,245	1,600	5,112	0	0	4,607	1,040	5,858	0	37,538	166,000
American Indian/Alaska Native	195	5	17	0	0	6	4	17	0	81	325
Asian	274	2	14	0	0	17	1	4	0	114	426
Black/African American	10,050	126	531	0	0	556	101	1,108	0	3,639	16,111
Hawaiian/Pacific Islander	106	10	3	0	0	2	0	5	0	38	164
White/Caucasian	86,838	1,258	4,117	0	0	3,605	878	4,194	0	29,560	130,450
Hispanic *	0	0	0	0	0	0	0	0	0	0	0

More than One Race Reported	3,215	95	141	0	0	63	24	107	0	897	4,542
Race/Ethnicity Not Available	9,567	104	289	0	0	358	32	423	0	3,209	13,982
TOTAL	110,245	1,600	5,112	0	0	4,607	1,040	5,858	0	37,538	166,000

	Private Residence	Foster Home	Residential Care	Crisis Residence	Children's Residential Treatment	Institutional Setting	Jail / Correctional Facility	Homeless / Shelter	Other	NA	Total
Hispanic or Latino Origin	2,950	63	71	0	0	36	18	93	0	723	3,954
Non Hispanic or Latino Origin	105,784	1,515	4,931	0	0	2,750	1,003	5,615	0	35,901	157,499
Hispanic or Latino Origin Not Available	1,511	22	110	0	0	1,821	19	150	0	914	4,547
TOTAL	110,245	1,600	5,112	0	0	4,607	1,040	5,858	0	37,538	166,000

Comments on Data:	BHDID does not fund children's State Psych Hospitals. Gender & Hispanic: Not Available more than in 2018-will study to improve reporting next year. We'll continue to monitor internally. In Jail: more than in 2018 due to new re-entry programs.
How Often Does your State Measure Living Situation?	<input checked="" type="checkbox"/> At Admission <input type="checkbox"/> At Discharge <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other: Describe <input type="text"/>

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

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

Age	Adults with Serious Mental Illnesses (SMI)				Children with Serious Emotional Disturbances (SED)			
	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
0-12 years					182	0	0	15,158
13-17 years					108	0	0	10,648
18-20 years	3	1	17	1,713	8	0	0	1,155
21-64 years	525	112	534	37,615				
65-74 years	27	2	10	2,212				
75+ years	1	0	0	361				
Not Available	0	0	0	0	0	0	0	0
Total	556	115	561	41,901	298	0	0	26,961

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	228	72	279	24,833	132	0	0	11,086
Male	328	43	281	17,009	166	0	0	15,846
Not Available	0	0	1	59	0	0	0	29

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

	N Receiving Supported Housing	N Receiving Supported Employment	N Receiving Assertive Community Treatment	Total unduplicated N - Adults with SMI Served	N Receiving Therapeutic Foster Care	N Receiving Multi-Systemic Therapy	N Receiving Family Functional Therapy	Total unduplicated N - Children with SED
American Indian / Alaska Native	0	1	0	97	1	0	0	39
Asian	2	0	0	124	0	0	0	55
Black / African American	106	15	93	4,550	22	0	0	3,372
Hawaiian / Pacific Islander	0	0	0	31	0	0	0	33
White	422	94	438	34,665	200	0	0	20,574
Hispanic *	0	0	0	0	0	0	0	0
More than one race	11	4	14	707	23	0	0	1,467
Not Available	15	1	16	1,727	52	0	0	1,421

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	10	1	6	675	17	0	0	1,109
Non Hispanic / Latino	528	114	550	40,688	281	0	0	25,573
Not Available	18	0	5	538	0	0	0	279

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

What fidelity measure do you use?	<input type="text"/>	Individual Placement & Support (IPS) Supported Employment Fidelity Tool	Dartmouth Assertive Community Treatment Scale	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who measures fidelity?	<input type="text"/>	SMHA Staff	SMHA Staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
How often is fidelity measured?	<input type="text"/>	every other year	annually	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the SAMHSA EBP Toolkit used to guide EBP Implementation?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Have staff been specifically trained to implement the EBP?	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

* Hispanic is part of the total served. Yes No

Comments on Data (overall):

Comments on Data (Supported Housing):

SMHA does not conduct fidelity assessment on programs; yet, requires that programs conduct a self-assessment annually using the SAMHSA Permanent Supported Housing Toolkit.

Comments on Data (Supported Employment):

SE is underreported due to programs which deliver SE are not entering data in state reporting system: Wellspring, Bridghaven. Also, 2 CMHCs are delivering only part of SE thus not reporting to state as full SE delivery.

Comments on Data (Assertive Community Treatment):

ACT is a billable service via Medicaid as of 1/1/2014; number may increase with time. Due to low rates for ACT: struggle with more than 4 person teams, services unbundled to bill making service code for ACT is underreported.

Comments on Data (Therapeutic Foster Care):

Comments on Data (Multi-Systemic Therapy):

KY BHDID does not have funding needed to support MST

Comments on Data (Family Functional Therapy):

KY BHDID does not have funding needed to support FFT

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

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

Program Name	Number of Adult Admissions into CSC Services During FY	Current Number of Adults with FEP Receiving CSC FEP Services	Number of Child/Adolescents Admissions into CSC Services During FY	Current number of Children/Adolescents with FEP Receiving CSC FEP Services	Do you monitor fidelity for this service?	What fidelity measure do you use?	Who measures fidelity?	How often is fidelity measured?	Has staff been specifically trained to implement the CSC EBP?
LifeSkills iHOPE	5	8	6	3	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
New Vista (formerly Bluegrass) iHOPE	6	5	1	2	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
Pathways iHOPE	2	12	1	7	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
Four Rivers iHOPE	17	9	1	1	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
Cumberland River iHOPE	5	6	1	1	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
Centerstone iHOPE	8	6	7	5	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
Communicare iHOPE	4	6	0	0	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>
Mountain iHOPE	3	8	1	1	Yes <input checked="" type="radio"/> No <input type="radio"/>	The Kentucky revised EASA fidelity tool	Kentucky DBHDID (the state SMHA)	every 2 years with coaching and support based on fidelity review results/needs.	Yes <input checked="" type="radio"/> No <input type="radio"/>

Footnotes:

E. Performance Indicators and Accomplishments

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

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

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

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

Gender				
Female	0	0	0	0
Male	0	0	0	0
Not Available	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
Hispanic*	0	0	0	0
More Than One Race	0	0	0	0
Unknown	0	0	0	0

Hispanic / Latino Origin

Hispanic / Latino origin	0	0	0	0
Non Hispanic / Latino	0	0	0	0
Not Available	0	0	0	0

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

*Hispanic is part of the total served. Yes No

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

CMHCs are billing this as ACT; IDDT is performed by ACT teams and fidelity is monitored.

Comments on Data (Illness Self Management and Recovery):

CMHCs are billing IMR as Group Therapy.

Comments on Data (Medication Management):

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

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

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

For Consumers in Service for at least 12 months

	T1			T2			T1 to T2 Change						Assessment of the Impact of Services					
	"T1" Prior 12 months (more than 1 year ago)			"T2" Most Recent 12 months (this year)			If Arrested at T1 (Prior 12 Months)			If Not Arrested at T1 (Prior 12 Months)			Over the last 12 months, my encounters with the police have...					
	Arrested	Not Arrested	No Response	Arrested	Not Arrested	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# Reduced (fewer encounters)	# Stayed the Same	# Increased	# Not Applicable	No Response	Total Responses
Total	397	52317	0	426	52288	0	184	213	0	242	52075	0	275	52114	153	0	0	52542
Total Children/Youth (under age 18)	31	19825	0	43	19813	0	19	12	0	24	19801	0	18	19806	32	0	0	19856
Male	14	7852	0	14	7852	0	8	6	0	6	7846	0	9	7847	10	0	0	7866
Female	17	11971	0	29	11959	0	11	6	0	18	11953	0	9	11957	22	0	0	11988
Not Available	0	2	0	0	2	0	0	0	0	0	2	0	0	2	0	0	0	2
Total Adults (age 18 and over)	366	32492	0	383	32475	0	165	201	0	218	32274	0	257	32308	121	0	0	32686
Male	207	18795	0	223	18779	0	94	113	0	129	18666	0	146	18684	0	0	0	18830
Female	159	13691	0	160	13690	0	71	88	0	89	13602	0	111	13618	121	0	0	13850
Not Available	0	6	0	0	6	0	0	0	0	0	6	0	0	6	0	0	0	6

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

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

	"T1" 12 months prior to beginning services			"T2" Since Beginning Services (this year)			If Arrested at T1 (Prior 12 Months)			If Not Arrested at T1 (Prior 12 Months)			Since starting to receive MH Services, my encounters with the police have...					
	Arrested	Not Arrested	No Response	Arrested	Not Arrested	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# with an Arrest in T2	# with No Arrest at T2	No Response	# Reduced (fewer encounters)	# Stayed the Same	# Increased	# Not Applicable	No Response	Total Responses
Total	7	75	0	2	80	0	2	5	0	0	75	0	7	75	0	0	0	82
Total Children/Youth (under age 18)	0	21	0	0	21	0	0	0	0	0	21	0	0	21	0	0	0	21
Male	0	12	0	0	12	0	0	0	0	0	12	0	0	12	0	0	0	12
Female	0	9	0	0	9	0	0	0	0	0	9	0	0	9	0	0	0	9
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Adults (age 18 and over)	7	54	0	2	59	0	2	5	0	0	54	0	7	54	0	0	0	61
Male	4	27	0	1	30	0	1	3	0	0	27	0	4	27	0	0	0	31
Female	3	27	0	1	29	0	1	2	0	0	27	0	3	27	0	0	0	30
Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Time period in which services were received: 7/1/2018 - 6/30/2019

Please Describe the Sources of your Criminal Justice Data

Source of adult criminal justice information:

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

Sources of children/youth criminal justice information:

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

Measure of adult criminal justice involvement:

- 1. Arrests
- 2. Other (specify)

Measure of children/youth criminal justice involvement:

- 1. Arrests
- 2. Other (specify)

Mental health programs included:

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

Region for which adult data are reported:

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

Region for which children/youth data are reported:

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

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

Child/Adolescents Adults

1. If data is from a survey, What is the total Number of people from which the sample was drawn?
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 CJ data available for?
5. What was your response rate? (number of Completed surveys divided by number of Contacts)

State Comments/Notes: Data is collected in MIS by a self-reported question "Have you been arrested in the past 30 days?". 2019 has fewer arrests are reported; may be impacted by new re-entry programs which are funded partial with new grants (e.g., KY Opioid Response Effort.)

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Footnotes:

E. Performance Indicators and Accomplishments

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; specify time period for criminal justice involvement; explain whether treatment data are collected).

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

For Consumers in Service for at least 12 months

T1			T2			T1 to T2 Change						Impact of Services					
"T1" Prior 12 months (more than 1 year ago)			"T2" Most Recent 12 months (this year)			If Suspended at T1 (Prior 12 Months)			If Not Suspended at T1 (Prior 12 Months)			Over the last 12 months, the number of days my child was in school have					
# Suspended or Expelled	# Not Suspended or Expelled	No Response	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# Greater (Improved)	# Stayed the Same	# Fewer days (gotten worse)	# Not Applicable	No Response	Total Responses
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender																	
Male	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
Not Available	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

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

T1			T2			T1 to T2 Change						Impact of Services					
"T1" 12 months prior to beginning services			"T2" Since Beginning Services (this year)			If Suspended at T1 (Prior 12 Months)			If Not Suspended at T1 (Prior 12 Months)			Since starting to receive MH Services, the number of days my child was in school have					
# Suspended or Expelled	# Not Suspended or Expelled	No Response	# Suspended or Expelled	# Not Suspended or Expelled	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# with an Expelled or Suspended in T2	# with No Suspension or Expulsion at T2	No Response	# Greater (Improved)	# Stayed the Same	# Fewer days (gotten worse)	# Not Applicable	No Response	Total Responses
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Gender																	
Male	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
Not Available	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

Source of School Attendance Information:

- 1. Consumer survey (recommended items)
- 2. Other Survey: Please send us items
- 3. Mental health MIS
- 4. State Education Department
- 5. Local Schools/Education Agencies
- 6. Other (specify) _____

Measure of School Attendance:

- 1. School Attendance
- 2. Other (specify): _____

Mental health programs include:

- 1. Children with SED only
- 2. Other Children (specify) _____
- 3. Both

Region for which data are reported:

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

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

Child/Adolescents:

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:

Prior to 2014, this data was collected on a subset of KY SED population via an outcomes instrument. In 2014 the instrument was changed and since then the data for school suspensions & expulsions has not otherwise been collected.

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Footnotes:

E. Performance Indicators and Accomplishments

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

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

	Total number of Discharges in Year	Number of Readmissions to ANY STATE Hospital within		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	7024	535	1555	7.62 %	22.14 %
Age					
0-12 years	0	0	0	0.00 %	0.00 %
13-17 years	6	0	0	0.00 %	0.00 %
18-20 years	374	23	71	6.15 %	18.98 %
21-64 years	6241	477	1409	7.64 %	22.58 %
65-74 years	317	31	66	9.78 %	20.82 %
75+ years	86	4	9	4.65 %	10.47 %
Not Available	0	0	0	0.00 %	0.00 %
Gender					
Female	2889	188	596	6.51 %	20.63 %
Male	4133	347	958	8.40 %	23.18 %
Gender Not Available	2	0	1	0.00 %	50.00 %
Race					
American Indian/Alaska Native	18	1	5	5.56 %	27.78 %
Asian	41	4	6	9.76 %	14.63 %
Black/African American	930	53	241	5.70 %	25.91 %
Hawaiian/Pacific Islander	0	0	0	0.00 %	0.00 %
White	5822	470	1269	8.07 %	21.80 %

Hispanic *	66	2	12	3.03 %	18.18 %
More than one race	71	4	12	5.63 %	16.90 %
Race Not Available	76	1	10	1.32 %	13.16 %
Hispanic/Latino Origin					
Hispanic/Latino Origin	66	2	12	3.03 %	18.18 %
Non Hispanic/Latino	6882	532	1533	7.73 %	22.28 %
Hispanic/Latino Origin Not Available	76	1	10	1.32 %	13.16 %

Are Forensic Patients Included? Yes No

Comments on Data:

ARH, CSH, ESH, WSH only. Hispanic is reported as Race by Facilities. Asian and Pacific Islander are reported as same category by Facilities; Hawaiian is not collected by facilities. Change in 180-readmission rate for American Indian & Asia due to low n.

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

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

Footnotes:

E. Performance Indicators and Accomplishments

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

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

	Total number of Discharges in Year	Number of Readmissions to ANY STATE Hospital within		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	852	0	15	0.00 %	1.76 %
Age					
0-12 years	0	0	0	0.00 %	0.00 %
13-17 years	0	0	0	0.00 %	0.00 %
18-20 years	33	0	0	0.00 %	0.00 %
21-64 years	799	0	14	0.00 %	1.75 %
65-74 years	18	0	1	0.00 %	5.56 %
75+ years	2	0	0	0.00 %	0.00 %
Not Available	0	0	0	0.00 %	0.00 %
Gender					
Female	162	0	5	0.00 %	3.09 %
Male	690	0	10	0.00 %	1.45 %
Gender Not Available	0	0	0	0.00 %	0.00 %
Race					
American Indian/Alaska Native	0	0	0	0.00 %	0.00 %
Asian	2	0	0	0.00 %	0.00 %
Black/African American	203	0	9	0.00 %	4.43 %
Hawaiian/Pacific Islander	0	0	0	0.00 %	0.00 %
White	641	0	6	0.00 %	0.94 %

Hispanic *	5	0	0	0.00 %	0.00 %
More than one race	0	0	0	0.00 %	0.00 %
Race Not Available	1	0	0	0.00 %	0.00 %
Hispanic/Latino Origin					
Hispanic/Latino Origin	5	0	0	0.00 %	0.00 %
Non Hispanic/Latino	846	0	15	0.00 %	1.77 %
Hispanic/Latino Origin Not Available	1	0	0	0.00 %	0.00 %

Comments on Data:

KCPC serves adults only and is the only state supported forensic psychiatric facility in Kentucky. Notice 2019 fewer 180-day readmissions; low n. Also, we'll study to identify other causes.

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

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

Footnotes:

E. Performance Indicators and Accomplishments

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

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

	Total number of Discharges in Year	Number of Readmissions to ANY Psychiatric Inpatient Care Unit Hospital within		Percent Readmitted	
		30 days	180 days	30 days	180 days
TOTAL	7876	540	1635	6.86 %	20.76 %
Age					
0-12 years	0	0	0	0.00 %	0.00 %
13-17 years	6	0	0	0.00 %	0.00 %
18-20 years	407	23	72	5.65 %	17.69 %
21-64 years	7040	482	1484	6.85 %	21.08 %
65-74 years	335	31	70	9.25 %	20.90 %
75+ years	88	4	9	4.55 %	10.23 %

Not Available	0	0	0	0.00 %	0.00 %
Gender					
Female	3051	188	614	6.16 %	20.12 %
Male	4823	352	1020	7.30 %	21.15 %
Gender Not Available	2	0	1	0.00 %	50.00 %
Race					
American Indian/Alaska Native	18	1	5	5.56 %	27.78 %
Asian	43	4	6	9.30 %	13.95 %
Black/African American	1133	56	270	4.94 %	23.83 %
Hawaiian/Pacific Islander	0	0	0	0.00 %	0.00 %
White	6463	472	1320	7.30 %	20.42 %
Hispanic *	71	2	12	2.82 %	16.90 %
More than one race	71	4	12	5.63 %	16.90 %
Race Not Available	77	1	10	1.30 %	12.99 %

Hispanic/Latino Origin					
Hispanic/Latino Origin	71	2	12	2.82 %	16.90 %
Non Hispanic/Latino	7728	537	1613	6.95 %	20.87 %
Hispanic/Latino Origin Not Available	77	1	10	1.30 %	12.99 %

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

2. Are Forensic Patients Included? Yes No

Comments on Data:

ARH, CSH, ESH, WSH & KCPC. Hispanic is reported as a Race in KY Facility data. Asian & Pacific Islander are reported in the same category; Hawaiian is not collected by facility data.

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

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

Footnotes:

Kentucky Behavioral Health Planning & Advisory Council

275 East Main Street, 4W-G, Frankfort, Kentucky 40601

November 14, 2019

Grants Management Officer
Office of Financial Resources, Division of Grants Management
Substance Abuse and Mental Health Services Administration
5600 Fisher Lane, Rm 17E20
Rockville, MD 20857

To Whom It May Concern:

I am writing on behalf of Kentucky's Behavioral Health Planning and Advisory Council to confirm that Council members have reviewed Kentucky's FY 2019 SAPT and CMHS Block Grant Behavioral Health Report, which reports on the federal funds expended during state fiscal year 2019 and prior. Time was allocated at today's Council meeting to discuss the report, including the data tables required for submission on December 1, 2019. The Department for Behavioral Health, Developmental and Intellectual Disabilities welcomes recommendations and comments prior to and after submission of the 2020 Behavioral Health Report.

Thank you for the continued support of community-based services for adults and youth with behavioral health disorders. Our Council membership is honored to serve as advisors for planning in Kentucky.

Sincerely,



Gayla Lockhart
Chair, Kentucky Behavioral Health Planning and Advisory Council

Cc: Michele Blevins, Assistant Director, Division of Behavioral Health