APPENDIX F

1/10th of 1% Data 2019 Report

Developed By:

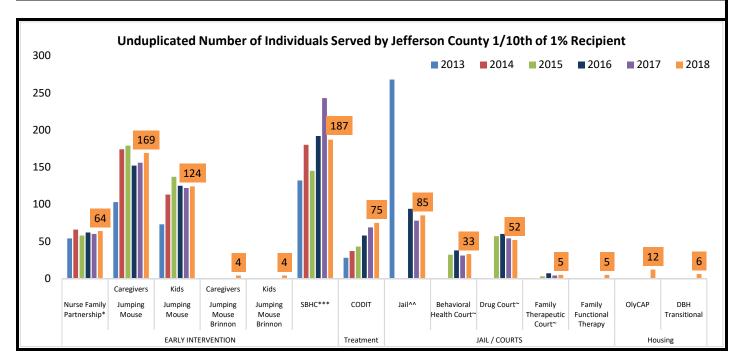
Kitsap Public Health Epidemiology Team for the Behavioral Health Advisory Committee

Tabulated & Summarized By: KPH Epidemiology Team

Jefferson County One Tenth of One Percent Tax Fund Evaluation 2018 Annual Report

Background: In the 2005 Washington State legislative session, Senator Hargrove passed the Omnibus Mental Health and Substance Abuse Reform Act SB 5763 to expand substance abuse and mental health treatment. The bill allows local governments to increase a sales tax to improve local services. In 2005, Jefferson County Board of County Commissioners (BoCC) adopted this tax and established the Jefferson County Mental Health and Substance Abuse Sales Tax Advisory Committee to review community needs and local Requests for Proposals (RFP) from vendors in order to provide a continuum of enhanced mental health and substance abuse treatment services. This fund provides an average of \$400,000 a year. Fund recipients submit quarterly reports of service outputs, as well as participant characteristics and outcomes to Kitsap Public Health District under contract to monitor and evaluate the impact of these funds. Purple and blue text denotes increases and decreases from 2017 (except where noted), respectively.

ANNUAL C	OUNT OF UNDUPLICATED IND	IVIDUAL	S SERVE	D (not a	vailable	prior to	2013)	
		2013	2014	2015	2016	2017	2018	
	Nurse Family Partnership*	54	66	58	62	60	64	*two individuals per family
	Jumping Mouse Caregivers	103	174	179	152	156	169	
EARLY	Jumping Mouse Kids	73	113	137	125	122	124	~started reporting in 2018
INTERVENTION	Jumping Mouse Brinnon Caregivers						4	~started reporting in 2018
	Jumping Mouse Brinnon Kids						4	
	SBHC***	132	180	145	192	243	187	***data: 13-14, 14-15, 15-16; 16-17; 17-18; 18-19
Treatment	CODIT	28	37	43	58	69	75	^^14-15 no data; 16-17 DBH contracts started Q3
	Jail^^	268	N/A	N/A	94	78	85	
	Behavioral Health Court∼			32	38	31	33	~started reporting in 2015
JAIL / COURTS	Drug Court~			57	60	54	52	~started reporting in 2015
	Family Therapeutic Court∼			3	7	4	5	~started reporting in 2015
	Family Functional Therapy						5	~started reporting in 2018
Housing	OlyCAP						12	~started reporting in 2018
Housing	DBH Transitional						6	~started reporting in 2018
	Total:	658	570	654	788	817	825	Note: Some individuals may have been served by more than one funded program.



2018 Annual Report 1 November, 2019

Nurse Family Partnership (NFP) - Jefferson County Public Health SUMMARY

Program Description: Serves low-income first time pregnant mothers with social/health indicators that will increase the risk of poor outcomes for mother and infant. The majority of participants either have a recent personal history of substance use and/or mental illness or these risks currently or historically in the immediate family environment. Nurse treats the mother using behavior change theory and motivational interviewing for quitting substances, preventing relapse, treating mental illness, and addressing intergenerational patterns within the family system. NFP is an evidence based prevention program and JCPH collects extensive data to be confident in the quality and fidelity of services thus assuring the community that our families will have similar positive, long term outcomes as seen in the research trials.

- The unduplicated number of families served in 2018 was 32, approximately the same as 2017 (30).
- The average number of individuals participating per quarter has increased from previous few years. Note that the 1/10th of 1% funds only cover services for 4 families.
- 47% participate for at least 6 months, a 18% decrease from 2017.
- Consistent with previous years, the majority of mothers are

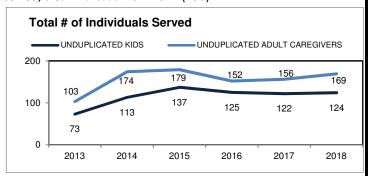
age 18-24. However in 2018, there were notably fewer age 25-44 than last year but more in line with historical trends.

- In 2018, on average 1/3rd of participants are from South Jefferson, East Jefferson, and Port Townsend (decreasing).
- In 2018, on average each quarter, 109 visits were completed (82% more than 2017), another 5 were attempted.
- The most common mental health diagnoses among women served are unchanged, anxiety and then major depression.

Jumping Mouse Children's Center SUMMARY

Program Description: This funding provides services to traumatized children whose care is otherwise uncompensated, specifically to those who have been directly impacted by a parent's substance abuse and/or mental illness. With these funds, we are reaching some of the most at-risk members of our community, preventing substance abuse and mental health problems before they begin. In 2015 through 2018, unduplicated annual data are reported for several measures.

- The unduplicated number of children served in 2018 was 125, a slight increase from 2017 (122).
- The unduplicated number of adult caregivers served in 2018 was 169, a 8% increase from 2017 (156).
- There were 112 service inquiries in 2018, up from 105 in 2017; approximately 1 in 3 children are enrolled right away.
- 73% of children served are from the 98368 ZIPcode, 41% are ages 7 to 9 (decrease from 2017), and 58% are male.
- Similar to previous years, nearly 2 in 5 children served come from single parent homes; 1 in 7 have a history of alternative care (primary caregiver not a biological parent): 5% foster care, 4% adoptive care, and 5% kinship care (categories are not mutually exclusive).



Individuals served: 1/10th of 1% funds 13% of the

20 22

26

Q3 Q4

25

20 21 23

16 17 Q1

NFP budget, the cost for 4 families 30

7/10-

12/10

- Most common mental health diagnoses for served children are generalized anxiety (42%) and adjustment disorder (19%).
- 61% of children served were or are currently exposed to household substance use; 15% were exposed during pregnancy.

2018 Annual Participant Data: Low income: 81% Ever experienced homelessness: 0% (some data not collected)

Any abuse/neglect: 50% Average # Adverse Childhood Experiences: 3.88 6 or more ACEs: 29%

- 90% of children served either successfully completed or are continuing services, an increase of 5% from 2017 (85%).

School Based Health Clinic, Discovery Behavioral Health SUMMARY

Program Description: DBH (formerly Jefferson Mental Health Services) had mental health professionals providing direct service on site to students and their families in the Port Townsend, Chimacum, Quilcene, and Brinnon School Districts. In Fall 2016, DBH added Brinnon with other funding and received 1/10th 1% funding for 2017 - Brinnon data since 9/2016 are included in this report. In the fall of 2018, MCS Counseling took over providing these services from DBH. Easy access to experienced professionals with no financial burden to the family is the intention and has proven its worth in high levels of participation at all sites. Please note that non-1/10th funded services for an additional day of service at Brinnon are included.

- The 2017-18 school year had the highest number of students served (243 with 1,355 visits); in 2018-2019, 187 students were served at the four SBHCs by mental health professionals in 1,066 visits.

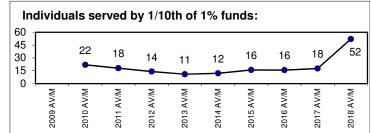
	Unduplicated Individuals:				Total Visits:					Av	Range in # Visits:							
	PT	Chim	Quil	Brinnon	Total	PT	Chim	Quil	Brinnon	Total	PT	Chim	Quil	Brinnon	PT	Chim	Quil	Brinnon
9/2010-6/2011	54	86	19		159	245	517	318		1080	4	6	16		1-17	1-33	1-46	
9/2011-6/2012	66	44	27		137	229	141	372		742	3	3	14		1-20	1-23	1-42	
9/2012-6/2013	57	62	24		143	303	386	347		1036	5	6	14		1-21	1-26	1-48	
9/2013-6/2014	50	58	24		132	282	350	244		876	6	6	10		1-23	1-36	1-27	
9/2014-6/2015	77	74	29		180	599	471	225		1295	8	6	8		1-31	1-35	1-21	
9/2015-6/2016	75	45	25		145	479	431	118		1028	6	10	5		1-31	1-52	1-25	
9/2016-6/2017	103	54	21	14	192	628	646	172	177	1623	6	12	8	13	1-14	1-15	1-8	1-9
9/2017-6/2018	106	110	17	10	243	584	598	94	79	1355	6	5	6	8	1-14	1-10	0-8	0-9
9/2018-6/2019	110	50	17	10	187	569	178	79	240	1066	5	4	5	24				

- The most common visit reason identified either student or clinician at Port Townsend and Chimacum nearly every year has been family problems and was in 2018-19 at Brinnon; and in 2017-18 at Quilcene (2018-19 too) and Brinnon it was stress.
- At least 63% of visits each school are for 30 minutes or less. Visits are shortest at Chimacum and longest at Brinnon.
- SBHC MH service utilization by gender varies, with Port Townsend seeing notably more females (66%) and Brinnon seeing notably more males (56%). SBHC MH service utilization rates in 2018-19 were 8% at PT, 9% at Chimacum, 9% at Quilcene, and 35% at Brinnon. All schools except Brinnon (no high school) service elementary, middle and high school students.
- In 2018-19, Brinnon had the highest number of visits per clinic day (6.7), then Port Townsend (5.6), Chimacum (3.7), and Quilcene (3.6).

Discovery Behavioral Health, CODIT Program SUMMARY

Program Description: In 2016, Discovery Behavioral Health (formerly Jefferson Mental Health) began running the CODIT program on their own, previously it was run by JMH and Safe Harbor together. CODIT provides direct individual and group services to clients with both Substance Abuse/Dependence and Mental Health Disorders. These services, along with access to medical specialists, a case manager and peer counselor, experienced in serving this population, provide a broad spectrum of treatment possibilities not otherwise available in this county. Reporting is done monthly.

- The unduplicated number of individuals served in 2018 is 75, up from 69 in 2017.
- The average number of individuals participating in CODIT each month increased in 2018 96% from 2017.
- In 2018, 86% of those served were male (an increase from 2017) and two-thirds came from the 98368 ZIP code (a decrease from 2017), age distributions were similar.
- The program provides individual sessions, case management and other services.

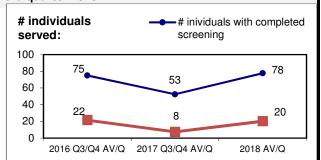


- The most common mental health diagnoses among CODIT participants are major depression and PTSD, followed by schizophrenia / schizoaffective disorder.
- The most commonly reported substances used in order are alcohol, marijuana, methamphetamines, and tobacco.

Discovery Behavioral Health, JAIL Program SUMMARY

Program Description: A DBH case manager and chemical dependency professional trainee provide the following services in the jail: a) assessment of the majority of subjects booked into the jail for substance use disorder and mental health conditions and onsite engagement and coordination of outpatient treatment post-discharge; b) outreach and engage inmates in Relapse Prevention Education groups; c) provide assessment, early intervention and follow-up for substance use disorders and mental health issues; d) prepare for and coordinate outpatient treatment and post-discharge appointments; e) work with Jefferson County residents post-discharge. **DBH began providing these services in 3rd quarter 2016.**

- 141 unduplicated individuals served in 2018, up from 78 in 2017.
- 233 individuals completed screening, 61 were served post-release.
- Four-fifths (81%) of those screened were from the 98368 ZIP code, the majority are age 25-44 (62%) and male (75%).
- Prior to jail: 46% individuals reported renting/owning their own home;
 30% reported having full or part time work; and 75% reported having
 Medicaid insurance.
- 63% have known mental health; 77% have known substance use.
- 683 referrals to community services were made to individuals served in jail; 145 referrals to those served post-release.



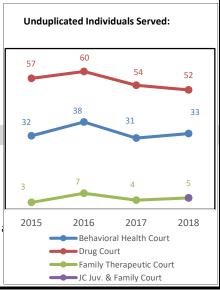
Behavioral Health Court - reporting started for 2015 - SUMMARY

The Jefferson County Behavioral Health Court (BHC) program is a pre- and post-conviction program for Jefferson County defendants who are mentally ill and have not been successful in obtaining mental health treatment or compliance with treatment. All defendants must meet the initial clinical criteria established by the state of Washington to determine serious and persistent mental illness. The MHTC team consists of the District Court Judge, County and City Prosecutors, Probation, Defense Attorney, Chemical Dependency Provider, Mental Health Provider, OlyCAP, Jefferson Co Sheriff, and Port Townsend Police Department. The programs consists of intensive supervision of clients by a mental health professional, frequent appearances before the BHC team, required mental health counseling, taking medications a prescribed and not using non-prescribed substances. When a participant completes the required activities for a particular phase, the defendant becomes eligible to advance to the next phase. Upon completion of the four phases, the client will then graduate from the program. For preadjudication cases, this may result in dismissal of charges. For post adjudication cases, participants may enter this program instead of probation. The entire program length is determined by the participant's progress, on average it takes approximately 24 months to complete.

- 33 individuals served in 2018, up from 31 in 2017; 10 graduates and 5 discharges.
- In 2018, 54% of participants were from the 98368 ZIP code; 32% are from 98358/98339/98325/98365.
- 63% of participants were age 25-44, another 32% are age 45-64; 47% are male.
- The most common mental health diagnosis was PTSD (28%) and then schizophrenia / schizoaffective disorder (11%), major depression (9%) and Bipolar disorder (9%).

Drug Court - reporting started for 2015 - SUMMARY

- 52 individuals served in 2018, down from 54 in 2017; 6 graduates and 5 discharges. In 2018, 45% of participants are from the 98368 ZIP code and 34% are from 98339.
- 79% of participants are age 25-44, another 12% are age 18-24; 71% are male.
- 61% of participants were sanction free and 4% of participants were on warrant status on ϵ
- 24% of participants were free of positive UA results on average.

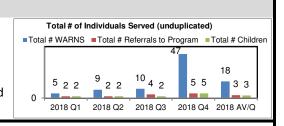


Family Functional Therapy - reporting started for 2018 - SUMMARY

5 individuals served in 2018.

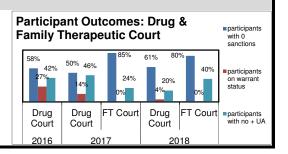
In 2018, 100% of participants are from the 98368 ZIP code.

- 100% of participants are age 0-18, 89% are male.
- 18 WARNS assessments yielded 3 referrals to the program, all of which resulted in enrolled children.



Family Therapeutic Court - reporting started for 2015 - SUMMARY

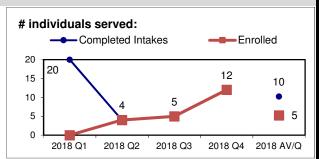
- 5 individuals served in 2018, up from 4 in 2016; 1 graduate and 1 discharge.
- In 2018, 42% of participants are from the 98368 ZIP code, and 42% are from 98358/98339/98325/98365 on average.
- 56% of participants are age 25-44 and 44% are age 45-64; 69% are female.
- 80% of participants were sanction free and 0% of participants were on warrant status on average.
- 40% of participants were free of positive UA results on average.



OlyCAP Housing - reporting started for 2018 - SUMMARY

Through 1/10th of 1% funding, OlyCAP supports between 30 and 40 individuals using transitional housing at the Haines Street Cabins.

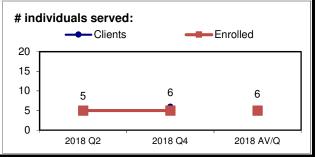
- 10 intakes completed and 5 individuals enrolled in 2018.
- In 2018, 54% of participants were from the 98368 ZIP code and 46% from 98358/98339/98325/98365, 52% were 25-44 and 32% were 18-24, and 65% were male.
- 10 individuals discharged to permanent housing, 3 relapsed (MH/SUD), 2 were lost, and 3 were classified as "other" in 2018.



Discovery Behavioral Health Transitional Housing - reporting started for 2018 - SUMMARY

Through 1/10th of 1% funding, DBH supports up to 20 individual through the following types of housing: permanent (Thomas Street Apt), transitional (Bayside Housing), and short term (one hotel room at Harborside).

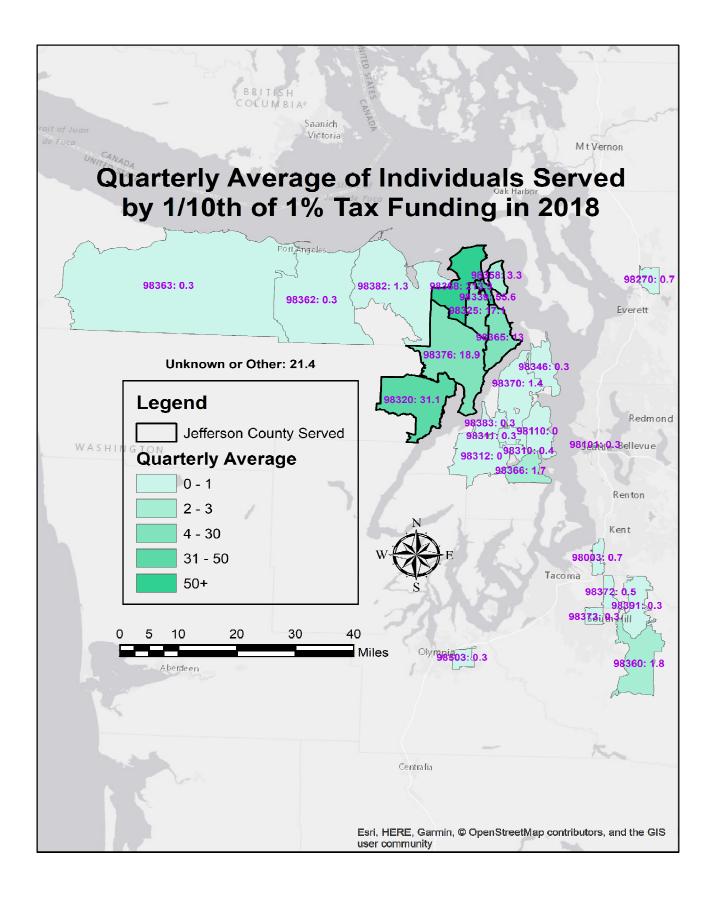
- In 2018, 100% of participants were from the 98368 ZIP code, 55% were 25-44, 27% 45-64, and 18% 65+, and 80% were female.
- 1 individual discharged to permanent housing, 1 to jail, 1 refused services, 1 was classified as "other" in 2018.

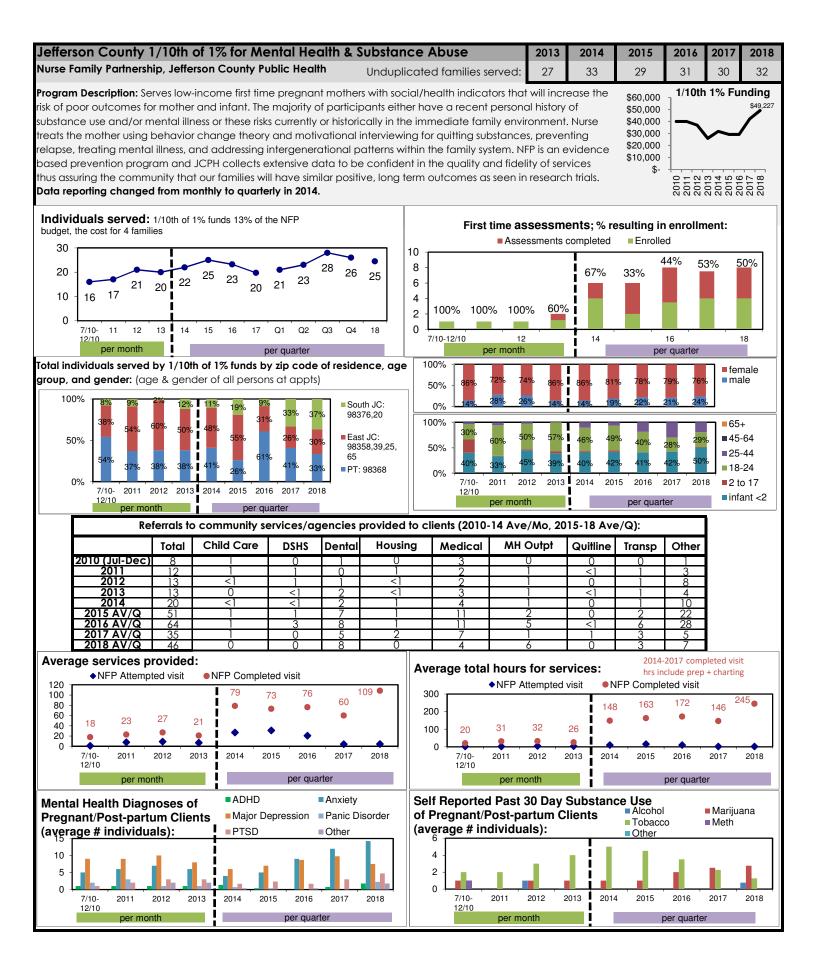


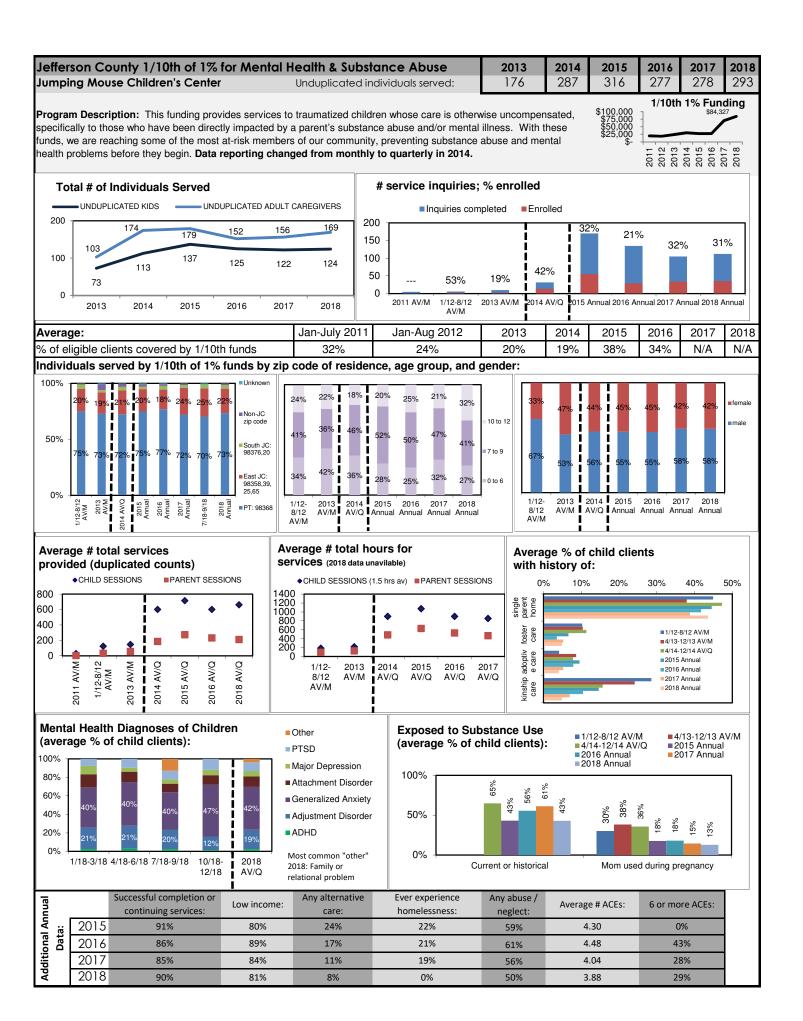
Jumping Mouse Children's Center Brinnon Pilot - reporting started for 2018 - SUMMARY

- Through 1/10th of 1% Funding, JMCC supports an additional four children weekly in long-term therapy and provides support and education for the parents/caregivers and teachers/staff of these children. Fuding is also used to support supervision of these therapists working at the Brinnon Site.
- 4 children and 4 adult caregivers were served in 2018.
- 75% of participants were from 98376/98320 and 25% were from 98358/98339/98325/98365, 50% were 0-6, and 100% were male.
- All 4 participants remained in services at the conclusion of 2018.

Total # of Individuals Served (unduplicated) UNDUPLICATED KIDS UNDUPLICATED ADULT CAREGIVERS UNDUPLICATED KIDS 4 4 4 4 4 4 4 2018 AV/Q



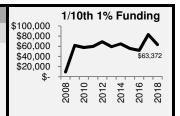




Jefferson County 1/10th of 1% for Mental Health & Substance Abuse

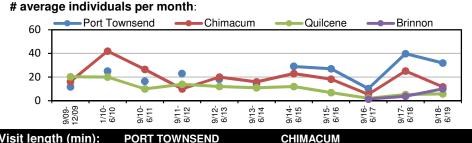
School Based Health Clinic, DBH and MCS Counseling

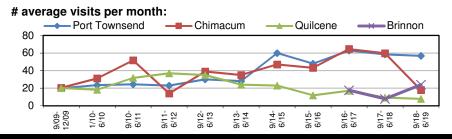
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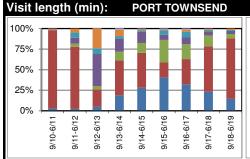


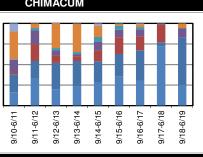
	ι	Jnduplica	ated In	dividuals	::			Total Vis	its:		Ave	erage Visit	ts/Perso	on:		Range in	# Visit	s:
	PT	Chim	Quil	Brinnon	Total	PT	Chim	Quil	Brinnon	Total	PT	Chim	Quil	Brinnon	PT	Chim	Quil	Brinnon
9/2010-6/2011	54	86	19		159	245	517	318		1080	4	6	16		1-17	1-33	1-46	
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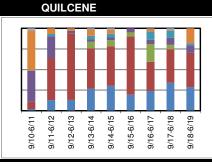
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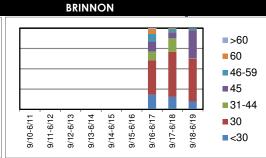


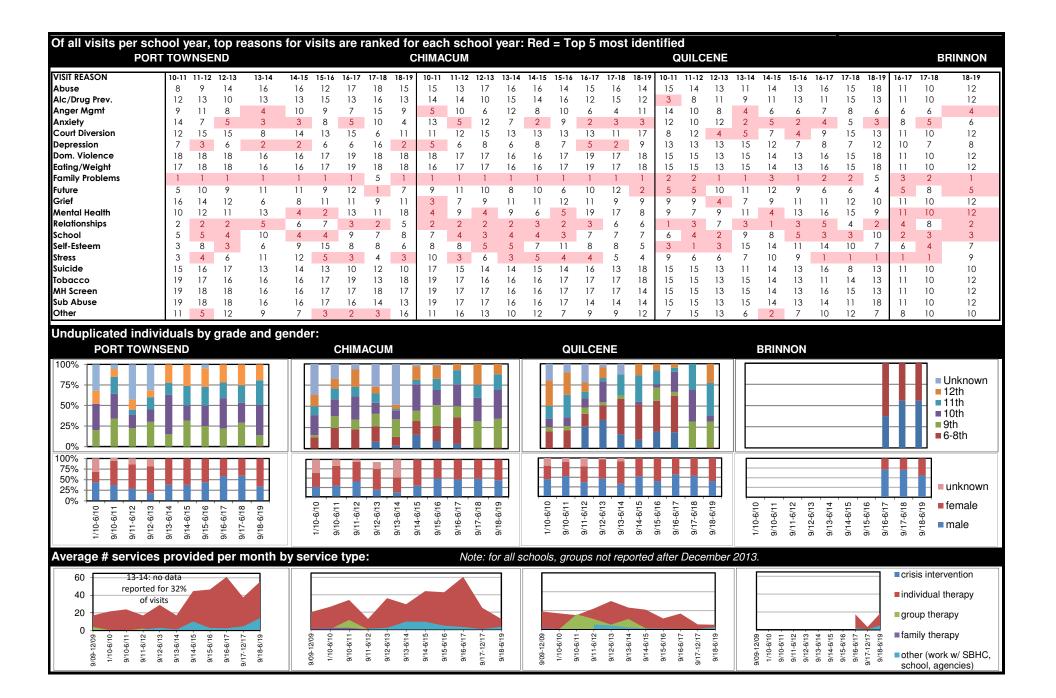


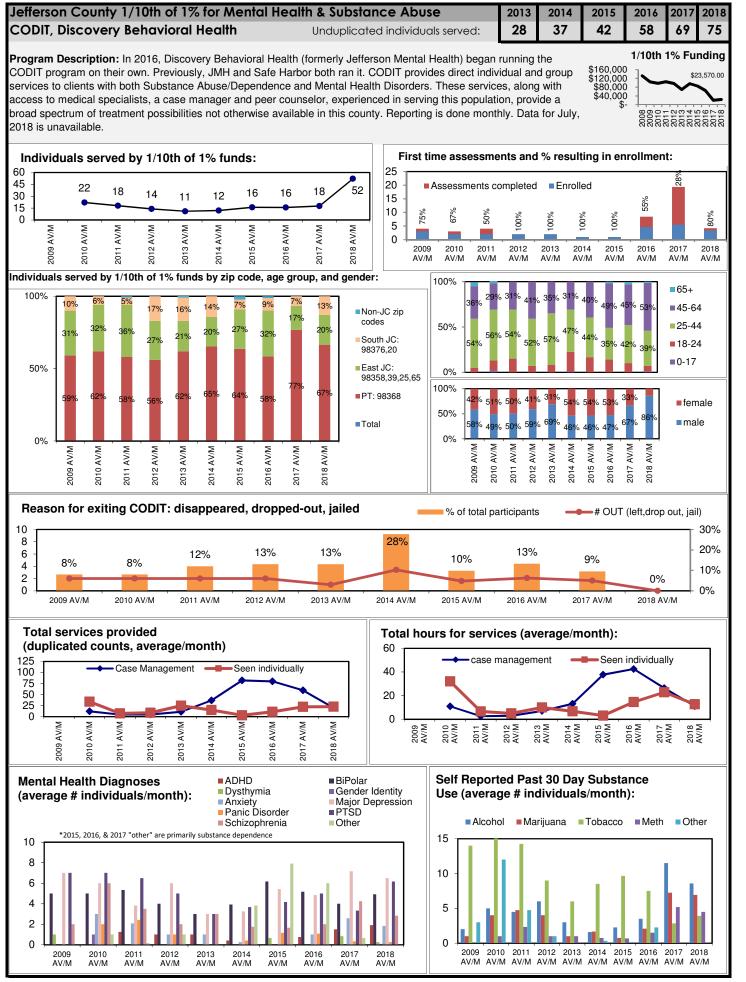


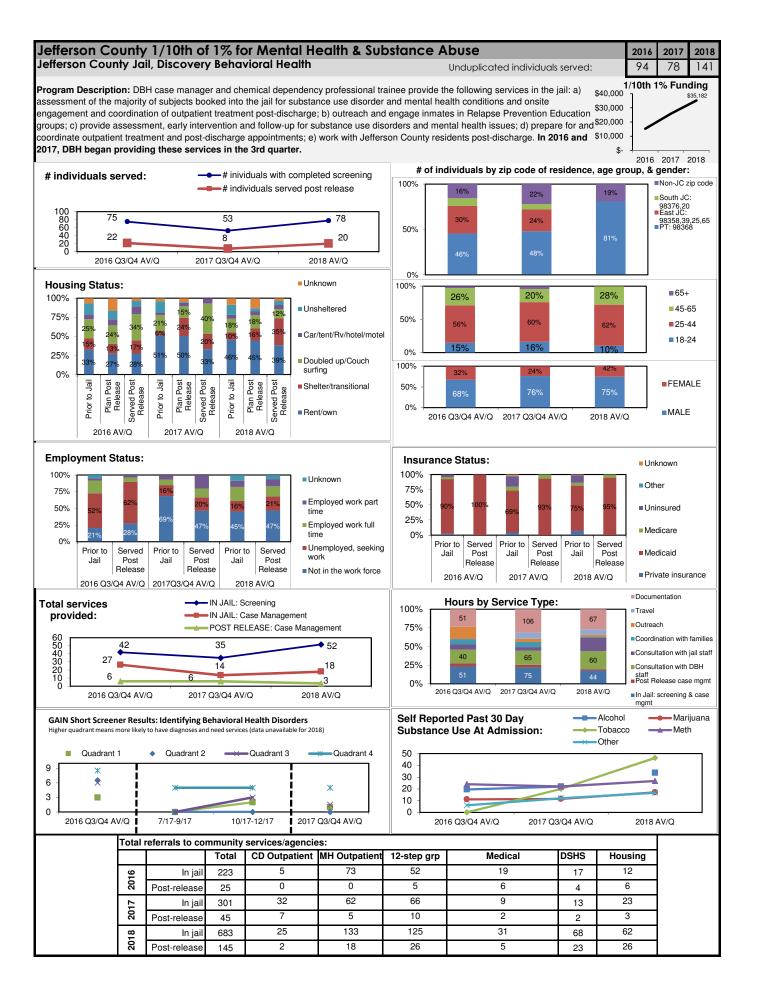




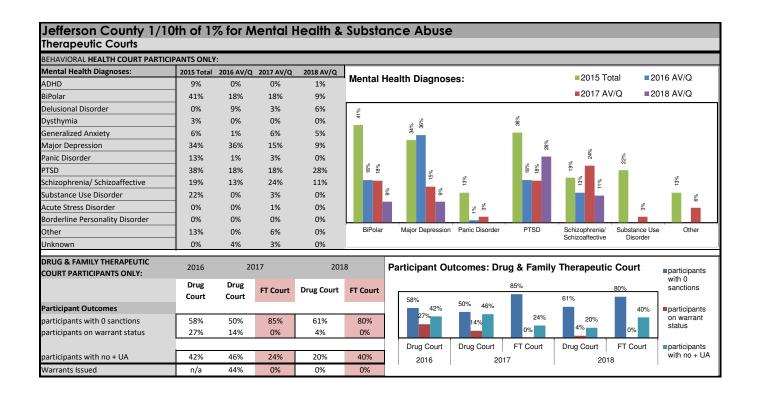


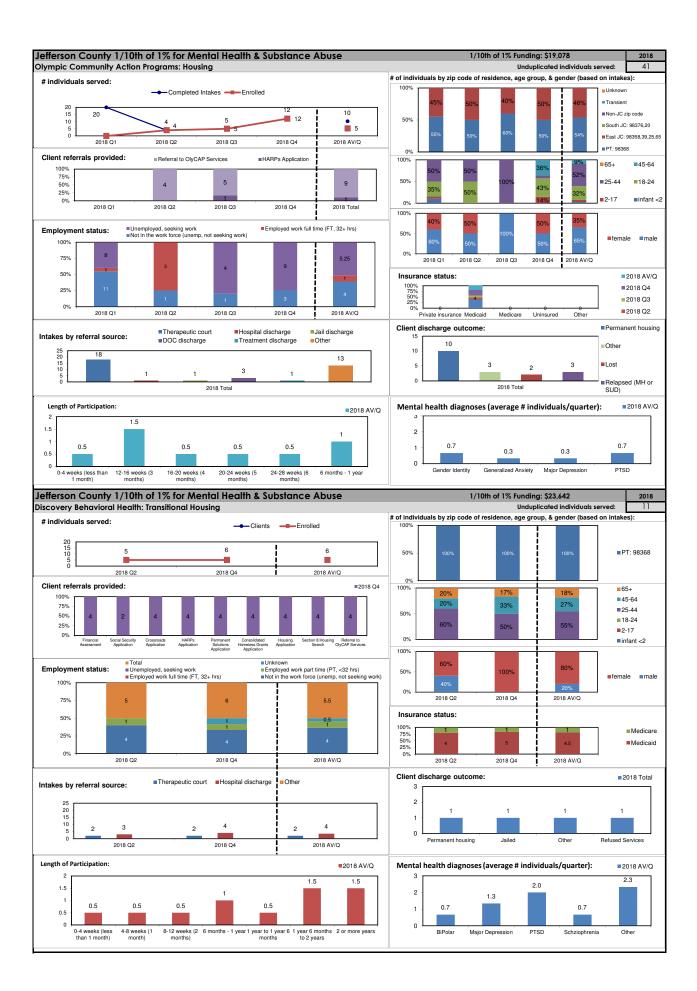


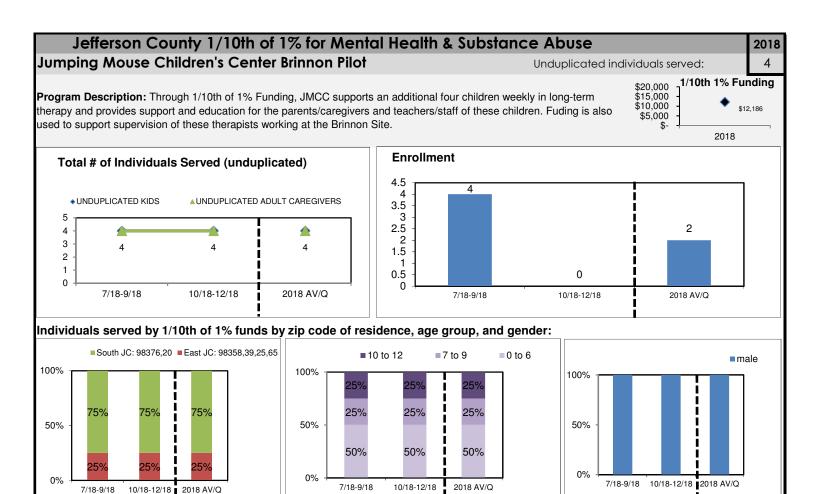




Jefferson County 1/10	th of 19	% for M	lental H	ealth &	Substa	ance A	buse								
Therapeutic Courts		2015		2016						2018					
	Behavioral Health Court	2015 Drug Court	Family Therapeutic Court	Behavioral Health Court	2016 Drug Court	Family Therapeutic Court	Behavio Health Court		Family Therapeutic Court	Behaviora Health Court		JC Juv. & Family Court	Family Therapeutic Court		
Actual spent	\$15,000	\$15,000	\$5,754	\$15,801	\$15,508	\$5,799	\$40,19	8 \$39,852	\$11,279	\$44,412	\$41,239	\$2,910	\$9,522		
Individuals served (unduplicated)	32	57	3	38	60	7	31	54	4	33	52	5	5		
Graduates	2	12	1	5	16	2	6	12	0	10	6	n/a	1		
Children reunited	n/a	n/a	2	n/a	n/a	3	0	0	0	0	0	n/a	0		
Discharges	5	11	0	2	13	1	12	24	0	5	5	n/a	1		
Average Individuals served/quarter	n/a	n/a	n/a	24	36	4	22	31	5	20	41	2	3		
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2015 TOTAL	-	- 2	2016 AV/QT	R		2017 AV/QT	R		2018 A	V/QTR			
Participant zip code of residence:	32	61	3	24	36	4	22	31	5	20	41	2	3		
98368	11	23	2	15	25	3	13	12	3	11	14	0	1		
98358	1	1	0	0.5	0	0.3	1	0	0	0	1	1	0		
98339	4	12	1	5	6	0.3	2	8	2	5	13	1	1		
98325	4	4	0	2	1	0	1	2	0	0	4	0	0		
98365	1	0	0	1	1	0	1	1	0	1	0	0	1		
98376	5	5	0	0	1	0	1	4	0	1	4	0	0		
98320	0	2	0	0.3	1	0	1	1	0	2	2	0	1		
Other	3	4	0	0	1	0	1	3	0	0	0	0	0		
transient	3	0	0	0	0	0	0	0	0	0	0	0	0		
non-Jefferson	0	4	0	1	1	0.5	0	0	0	0	3	0	0		
Unknown	0	6	0	0.3	0.3	0.3	1	0	0	0	0	0	0		
PT: 98368	34%	40%	67%	62%	69%	69%	59%	39%	60%	54%	34%	0%	42%		
East JC: 98358,39,25,65	31%	30%	33%	33%	22%	14%	23%	35%	40%	32%	45%	100%	42%		
South JC: 98376,20	16%	12%	0%	1%	5%	0%	9%	16%	0%	13%	15%	0%	17%		
Non-JC zip code	9%	7%	0%	3%	3%	11%	0%	0%	0%	0%	7%	0%	0%		
Transient	9%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%		
Unknown	0%	11%	0%	1%	1%	6%	5%	0%	0%	1%	0%	0%	0%		
		11/0	■ Behavioral	100%		070	370	070	070	170	0,0	070	070		
Unduplicated Individuals S	Served		Health Court			33%	2200		40%			Unknown			
57 60 54	52	-	Drug Court	75%	· +	33	% 42% 1	23%	32%		-	Transient			
20	-			50%	31% 30	%		35%		45% 100%	42%	Non-JC zip c	ode		
32 38 31	33	-	— Family	30%		67% 00	ov 69% 69	9%				South JC: 98	376.20		
	5		Therapeutic	25%	240/ 40	% 62	9, 33 %	7° 59% 39%	60% 54%	249/	420/				
3 7 4	•		Court JC Juv. &		34%			337	' I	34%		East JC: 983	58,39,25,65		
2015 2016 2017	2018	8	Family Court	0%	BHC DO 2015 T		IC DC F 2016 AV/QTR	TC BHC DC 2017 AV	FTC BHC	DC FFT 2018 AV/QTR	FTC	PT: 98368			
Participant Age:		2015 TOTAL			2016 AV/QT			2017 AV/QT			2018 A	V/OTR			
0-17 *FFT 0-18	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	100%	0%		
18-24	9%	28%	0%	5%	28%	25%	15%	14%	0%	5%	12%	0%	0%		
25-44	41%	53%	33%	53%	58%	35%	50%	75%	60%	63%	79%	0%	56%		
								75%			79%				
45-64 65+	. 47% . 3%	19% 0%	67% 0%	38% 4%	13% 0%	40% 0%	30% 5%	7% 4%	40% 0%	32% 0%	2%	0% 0%	44% 0%		
100%	370	U%	0%	470	100%	0%	3%	470	U%	0%	270	U76 Unkno			
75% 44% 28% 25% 55%	21% 50%	53%	9% 11% 69%	female male	75% 50%	31% 30%	33% 33%	. 2 <mark>2%</mark> _{14%}	23% 35%	40% 32%	45% 100%	2%			
50% - 100% 75% 75% 75% 75%	79%	170/	1% 89%]	25%		67% 62%	69% 69%	59%	60% 54%		- Courth	JC: 98376,20		
0%	3070	4/70	31%		0%	34% 40%			39%		34%	270			
BHC DC FTC BHC DC FTC			DC FFT FTC		076	BHC DC	FTC BHC		BHC DC			TC 98358	IC: 1,39,25,65 3368		
2015 TOTAL 2016 AV/QTR 2017 AV/QTR 2018 AV/QTR					2015 TO	TAL	2016 AV/QTR	2017 AV/Q	rR	2018 AV/QTR					
Participant Gender:		2015 TOTAL			2016 AV/QT			2017 AV/QT				V/QTR			
male	56%	72%	0%	45%	75%	5%	50%	79%	0%	47%	71%	89%	31%		
female	44%	28%	100%	55%	25%	95%	50%	21%	100%	53%	29%	11%	69%		
# Uoure his Activitie Time	2015 AV/Q	2015 AV/Q	2015 Q4	2016 AV/Q	2016 AV/Q	2016 AV/Q	2017 AV/	Q 2017 AV/Q	2017 AV/Q	2010 41/2	2018 AV/Q	2019 41//0	2018 AV/Q		
# Hours by Activity Type:										2018 AV/Q		2018 AV/Q			
Client Supervision/ Case Mgmt	n/a	n/a	n/a	35	21	9	N/A	43	22	n/a	31	n/a	12		
Court Time	n/a	n/a	n/a	32	38	22	N/A	38	26	n/a	36	n/a	26		
Administration	n/a	n/a	n/a	23	44	15	N/A	68	15	n/a	64	n/a	10		







	r & Program	CRAADT Objective			2017	/		201	×
	r & Program				_	_			
		SMART Objective	Type of Measure	Num	Den	Result	Num	Den	Result
Early Intervention JCPH N	NFP	% of participants who agree or strongly agree they are more confident they can reduce/eliminate alcohol or other drug use since started working with PHN	Behavior change	2	3	67%	1	4	25%
Early Intervention JCPH N	NFP	% of participants referred to substance abuse treatment (alcohol or drug) are engaged in services	Med/long term	1	2	50%	1	2	50%
Early Intervention JCPH N	NFP	% of participants who agree or strongly agree that emotional health has improved since started working with PHN	Emotional health	8	10	80%	2	4	50%
Early Intervention JCPH N	IFP	% of participants who agree or strongly agree they are more confident they can reduce/eliminate tobacco use since started working with PHN	Behavior change	3	4	75%	2	4	50%
Early Intervention JCPH N	IFP	% of participants who agree or strongly agree they are better able to set and achieve goals since started working with PHN	Behavior change	8	10	80%	2	4	50%
Early Intervention JCPH N	IFP	% of participants referred to MH treatment are engaged in services	Med/long term	9	15	60%	9	15	60%
Early Intervention JCPH N	NFP	% of participants remain in the program (NFP report retention rate)	Med/long term	21	30	70%	21	30	70%
Early Intervention JCPH N	NFP	% of participants who agree or strongly agree they are better able to access community resources since started working with PHN	Behavior change	9	10	90%	3	4	75%
Early Intervention JCPH N	IFP	% of participants who agree or strongly agree they are better prepared to parent new baby since started working with PHN	Behavior change	10	10	100%	3	4	75%
Early Intervention JCPH N	IFP	Average score for participant overall satisfaction with NFP program (scale 1-10)	Satisfaction			95%			90%
Early Intervention JCPH N	NFP	2018: ADD measures related change in risk or to stage of change with MH and SUD, from initial to: 36w, 8w pp, 12mo, 18mo	medium term outcome						
Early Intervention JMCC I	Brinnon	80% of participants will score at least a 4 on the ACE's education session evaluation tool (one per session)	medium/long term ou						
Early Intervention JMCC I	Brinnon	90% of children served will successfully participate in therapy	medium/long term ou						
Early Intervention JMCC I	Brinnon	80% of parents served will successfully develop intended skills/behaviors of program	medium/long term ou						
Early Intervention JMCC I	Brinnon	80% of participants report program has helped them improve parenting skills (4 or 5)	satisfaction outcome						
Early Intervention JMCC I	Brinnon	80% of participants report program has helped them reach goals for family and self (4 or 5)	satisfaction outcome						
Early Intervention JMCC I	Brinnon	80% of teaches and staff report program has helped child and family reach goals(4 or 5)	satisfaction outcome						
Early Intervention Jumpir	ng Mouse	80% of parents served successfully develop intended skills/behaviors of	Med/long term	141	156	90%	152	169	90%
Early Intervention Jumpir	ng Mouse	program 90% of children served successfully participate in therapy	Med/long term	104	122	85%	112	124	90%
1	ng Mouse	88% of participants report program has helped them improve parenting skills (4 or 5) (scale 1-5)	Satisfaction	21	24	88%	22	24	92%
Early Intervention Jumpir	ng Mouse	88% of participants report program has helped them reach goals for family and self (4 or 5) (scale 1-5)	Satisfaction	21	24	88%	24	24	100%
Early Intervention MCS S	ВНС	80% of participants rating 8+ on Miller Session Rating Scale: Overall (scale 1-10)	Satisfaction	536	619	87%	170	196	87%
Early Intervention MCS S	ВНС	80% of participants rating 8+ on Miller Session Rating Scale: Goals and Topics (scale 1-10)	Satisfaction	504	616	82%	175	196	89%
Early Intervention MCS S	внс	80% of participants rating 8+ on Miller Session Rating Scale: Relationship (scale 1-10)	Satisfaction	551	616	89%	179	196	91%
Early Intervention MCS S	внс	80% of participants rating 8+ on Miller Session Rating Scale: Approach or Method (scale 1-10)	Satisfaction	534	616	87%	179	195	92%
Housing DBH To	ransitional	% DBH transitional housing clients who are admitted to SUD and/or MH inpatient who return to DBH post-discharge.	medium/long term ou				0	6	0%
Housing DBH To	ransitional	% enrolled participants successfully move to permanent housing in 2018	medium/long term ou				1	6	17%
Housing DBH To	ransitional	% of individuals who discharge into permanent housing	medium/long term ou				1	5	20%
Housing DBH To	ransitional	The number of hospital bed days for 2018 participants (enrolled at least three months) decreases compared to equivalent time prior.	medium/long term ou				36	55	65%
Housing DBH To	ransitional	% of individuals who make progress on their stability plan obtain birth certificate, write resume, etc.	medium term outcom				4	6	67%
Housing DBH To	ransitional	The proportion of DBH housing participants (enrolled for at least 12 months) with a decrease in relapse events compared to prior 6 months.*	medium/long term ou				3	3	100%
_	ransitional ransitional	% of individuals who obtain employment % of individuals who obtain social security	medium/long term ou medium/long term ou				1 5	1 5	100% 100%
Housing DBH To	ransitional	80% of program participants report favorable feedback about service experience.*	medium/long term ou				3	3	100%

Jefferson County	1/10th of 1% Evaluation								
Annual Outcome					201	7		201	.8
Continuum	Vendor & Program	SMART Objective	Type of Measure	Num	Den	Result	Num	Den	Result
Housing	DBH Transitional	The number of ED visits for 2018 enrolled participants (at least three months) decreases compared to equivalent time prior.	medium/long term ou		-			-	
Housing	DBH Transitional	The number of jail bed days for 2018 participants (enrolled at least three months) decreases compared to equivalent time prior.	medium/long term ou						
Housing	DBH Transitional	The proportion of 2018 participants (enrolled at least three months) who are re-admitted to the hospital within 30 days from discharge decreases compared to equivalent time prior.*	medium/long term ou						
Housing	DBH Transitional	% of individuals who go back to school and/or get job training	medium/long term ou				0	0	
Housing	DBH Transitional	% of individuals who are reunified with their children	medium/long term ou				2	0	
Housing	OlyCAP	% of individuals who obtain employment	medium/long term ou		-		2	44	5%
Housing	OlyCAP	% of individuals who obtain social security	medium/long term ou				7	44	16%
Housing	OlyCAP	% of individuals who discharge into permanent housing	medium/long term ou				13	44	30%
Housing	OlyCAP	% of individuals who go back to school and/or get job training	medium/long term ou				15	44	34%
Housing	OlyCAP	% of individuals who are reunified with their children % of individuals who make progress on their stability plan (Justine to	medium/long term ou				22	44	50%
Housing	OlyCAP	create list of action steps that would count) obtain birth certificate, write resume, etc.	medium term outcom				25	44	57%
Housing	OlyCAP	75% of individuals do not relapse	medium term outcom				31	44	70%
Housing	OlyCAP	overall satisfaction with services	medium/long term ou				40	44	91%
Jail/Courts	DBH Jail	% of individuals screened in jail during repeat incarcerations	medium term						
Jail/Courts	DBH Jail	% of in-jail participants are also served post-release	outcome medium term outcome						
Jail/Courts	DBH Jail	% of individuals referred to mental health treatment who participate in services	medium term outcome						
Jail/Courts	DBH Jail	% of individuals referred to substance use treatment who participate in services	medium term outcome						
Jail/Courts	DBH Jail	% of participants report case manager was helpful	satisfaction outcome						
Jail/Courts	DBH Jail	% of participants report that groups were helpful	satisfaction outcome						
Jail/Courts	DBH Jail	% of participants feel they were offered support after they leave jail	satisfaction outcome						
Jail/Courts	DBH Jail	% of participants are housed	Med / long term outco						
Jail/Courts	Drug Court	% of participants who decrease drug use (quarterly average number with no positive UAs)	Med/long term	40.5	54	75%	42	52	81%
Jail/Courts	FT Court	% of participants who decrease drug use (quarterly average number with no positive UAs)	Med/long term	3	4	75%	2	5	40%