

ANNUAL REPORT OF THE

JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIPS (JJSAMHP)

2016-2017



*Health and
Human Services*



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Section A: Overview of the Juvenile Justice Substance Abuse Mental Health Partnerships (JJSAMHP)

The Juvenile Justice Substance Abuse Mental Health Partnerships (JJSAMHP) are local teams across North Carolina working together to deliver effective, family-centered services and supports for juvenile justice-involved youth with substance use and/or mental health challenges. The partnerships require an organized, person-centered system that operates under the following System of Care principles:

- ❖ Family Driven & Youth Guided
- ❖ Child & Family Team Based
- ❖ Natural Supports
- ❖ Collaboration
- ❖ Community Based
- ❖ Culturally & Linguistically Competent
- ❖ Individualized
- ❖ Strengths Based
- ❖ Persistence
- ❖ Outcomes and Data Based Driven

The Partners can include any individual/agency in the community that wants to help address these issues but at a minimum, includes:



- A Local Management Entity/Managed Care Organization
- Local Juvenile Justice Court Leadership
- Local Treatment Provider(s)
- Coordination with Juvenile Crime Prevention Councils

The Partnerships work together to ensure the following for juvenile justice involved youth:

- ❖ Completion of comprehensive substance use and mental health clinical assessments by appropriately licensed substance use and mental health treatment professionals
- ❖ Provision of evidence-based treatment options to youth referred for substance use, mental health and co-occurring disorders by appropriately licensed and qualified mental health professionals
- ❖ Use of the Child and Family Team Meetings
- ❖ Involvement of Family Members and Youth Advocates
- ❖ Involvement of Juvenile Crime Prevention Councils in programming

Additionally, the JJSAMHP teams are requested to problem solve about the following domains:

- Discussion of funding such as Medicaid, Health Choice, Child Mental Health and Child Substance use funding in collaboration with their LME/MCO financial liaisons
- Utilization of methods/practices for engaging youth and families
- Increase accessibility of services through offering after hour or non-traditional service provision times
- Providing choice for families in service locations including at JJ offices, in homes, and in the community
- Establishing a relationship amongst providers to develop a service array
- Work on decision making about processes for out of home placements
- Assist in training staff on Evidence Based Treatments (EBT) and Evidence Based Practices (EBP)

This Annual Report provides information about the JJSAMHP 2016-2017 fiscal year. Although no report can capture every detail of a statewide initiative, the purpose of this document is to provide the main highlights and overall information about JJSAMHP. It is divided up in the following sections:

- ◆ **Section A** is this overview of the document.
- ◆ **Section B** outlines the Local Management Entities (LME)/Managed Care Organizations (MCOs) involved with JJSAMHP
- ◆ **Section C** outlines the JJSAMHP Service Domains that are expected to be addressed by each JJSAMHP local team. This section also includes overall statistics for the JJSAMHP across all sites.
- ◆ **Section D** outlines Activities and the Accomplishments of the overall JJSAMHP.
- ◆ **Section E** details the local JJSAMHP processes including screening, assessment, and admission to treatment for each local team as reported at the end of the fiscal year 2016-2017.

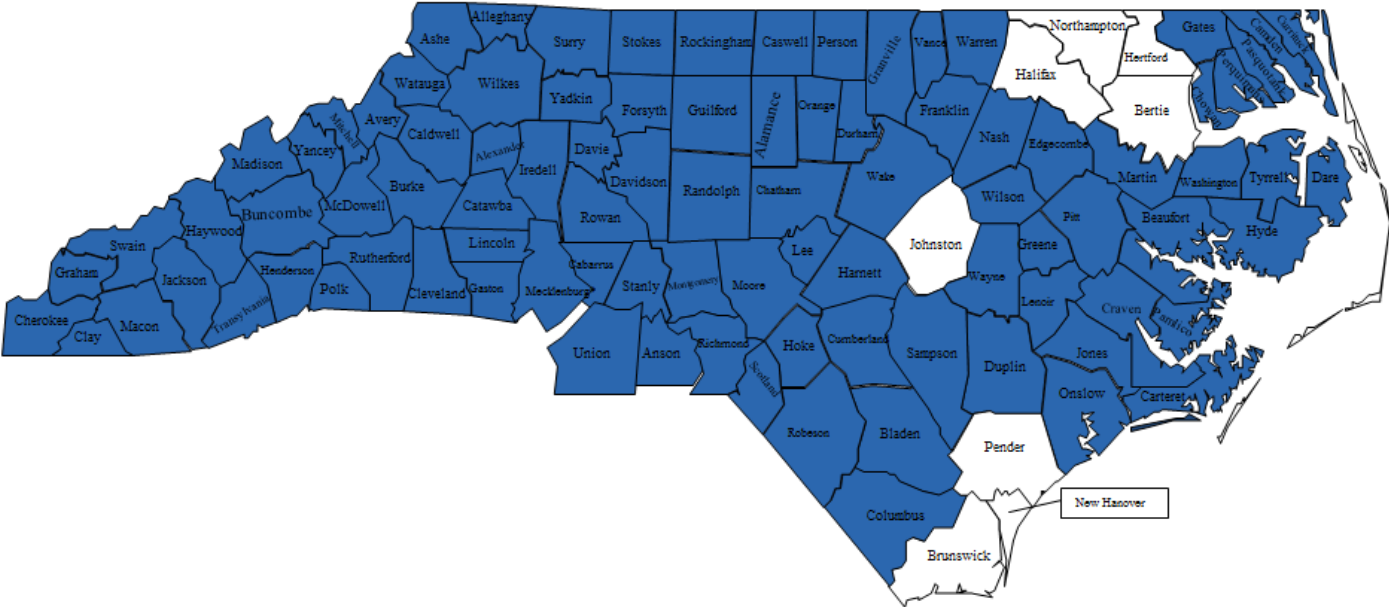
Section B: Local Management Entity/Managed Care Organization Involvement

As noted, JJSAMHP teams must involve the Local Management Entity/Managed Care Organization (LME/MCO). The role of the LME/MCO is to help to ensure that the principles of the JJSAMHP are facilitated through the local teams and to support local team activities. During this fiscal year, there were 7 LME/MCOs associated with JJSAMHP serving 93 counties. Within the LME/MCO’s, there are 20 locally driven teams that work to address juvenile justice involved youth and family needs.

The major teams associated with JJSAMHP are as follows (with their 2016-2017 nomenclature):

Alliance Behavioral Healthcare (3 teams)	Cardinal Innovations Healthcare Solutions (6 teams)	Eastpointe (3 teams)
Partners Behavioral Health Management (3 teams)	Sandhills Center (2 teams)	Trillium Health Resources (2 teams)
	Vaya Health (1 team)	

Juvenile Justice Substance Abuse Mental Health Partnerships Across North Carolina



Section C: JJSAMHP Service Domains

Although local teams define service provision within their area, there are five domains that are expected to have some uniformity to ensure that youth engage in services based on best practices. These five domains are: Screening/Referral, Assessment, Engagement, Evidence Based Treatments, and involvement with Juvenile Crime Prevention Councils. Most of these overall domains are represented by a national initiative, Reclaiming Futures (RF). Reclaiming Futures “helps teenagers caught in cycle of drugs, alcohol and crime. The project began in 2001 with \$21 million from Robert Wood Johnson Foundation (RWJF) for 10 pilot sites to create a six-step model that promotes new standards of care and opportunities in juvenile justice” (<http://www.reclaimingfutures.org>)

The RF six steps include a Coordinated Individualized Response of: 1) Initial Screening; 2) Initial Assessment and 3) Service Coordination and Community Directed Engagement plan for: 4) Initiation; 5) Engagement; and 6) Transition. Although all of the JJSAMHP teams do not have to follow this model (there are seven RF sites in NC), the concepts are complementary to JJSAMHP service domains. Please note these five domains below. It is also noted that most of the team processes within each of the first four domains for each LME/MCO are outlined in the JJSAMHP Compendium of Services, which can be viewed online at: <http://www.jjsamhp.org/publications/>.

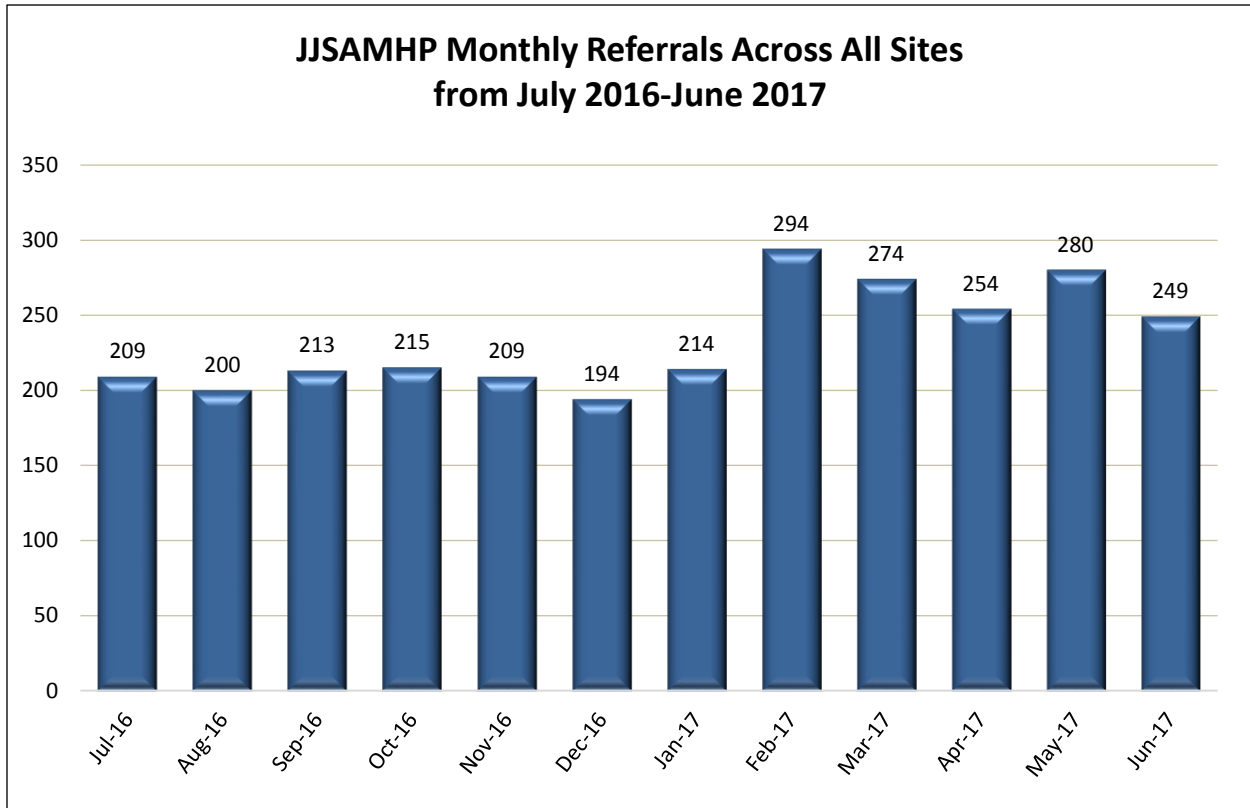
JJSAMHP Service Domains



JJSAMHP Domain I: Screening and Referral

The first domain is Screening and Referral. According to Reclaiming Futures, screening involves usage of a reputable tool to identify youth who potentially have a substance use problem. In the case of JJSAMHP, the tool should also be able to detect possible mental health challenges. 100% of the JJSAMHP teams identify a uniform screening process from JJ to a local provider. The tool that is used in North Carolina is the Global Appraisal of Individual Needs- Short Screener (GAIN-SS).

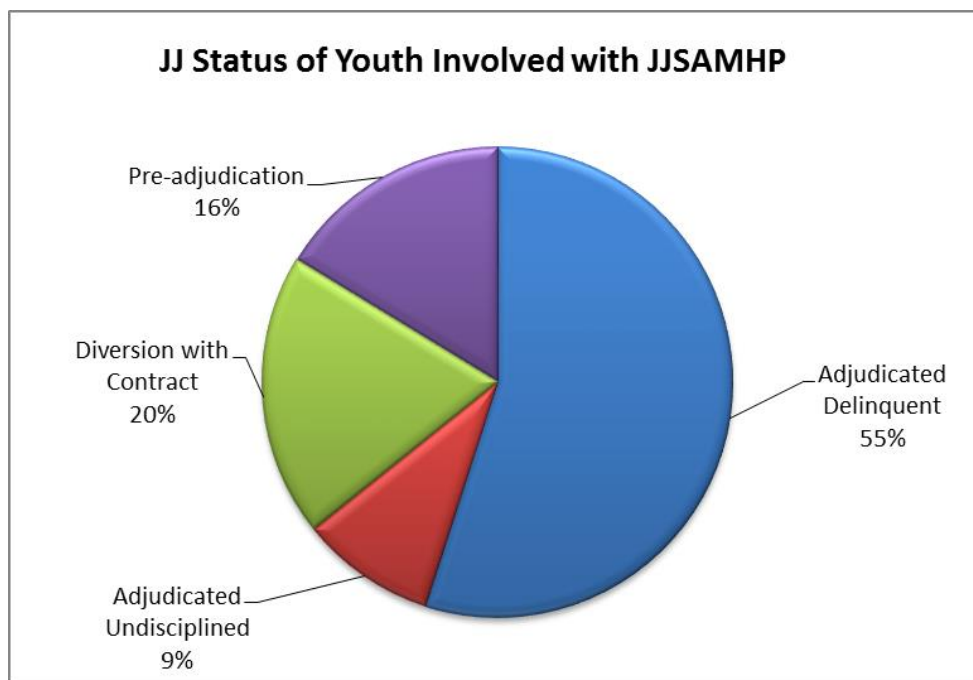
Based on data submitted by the local teams, there were 2,805 referrals from Juvenile Justice (JJ) screening to local provider(s) for assessments from July, 2016 to June, 2017. This averages to 234 referrals per month. For the first half of the fiscal year (July through December) there were 1,240 referrals and for the second half of the fiscal year (January through June), there were 1,565 referrals. To determine the number of referrals for each team across this time period, please see the section entitled "Local Team Processes." The graphs below represent the total referrals completed across all JJSAMHP teams for 2016-2017, and then a comparison of this fiscal year with the seven previous fiscal years.



JJSAMHP Monthly Referrals-Fiscal 2010-2017													
Fiscal	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
2017	209	200	213	215	209	194	214	294	274	254	280	249	2805
2016	238	216	249	252	241	207	232	271	350	285	316	329	3186
2015	255	245	215	295	280	275	323	278	363	334	312	346	3521
2014	247	209	197	323	265	249	259	245	316	301	259	246	3116
2013	211	238	245	271	267	235	263	279	313	289	232	241	3084
2012	240	203	257	251	309	209	299	249	317	315	332	250	3231
2011	250	280	286	281	271	269	290	300	400	333	282	270	3512
2010	205	136	131	186	187	201	262	266	394	365	317	288	2938

JJ Categories for Youth Involved with JJSAMHP

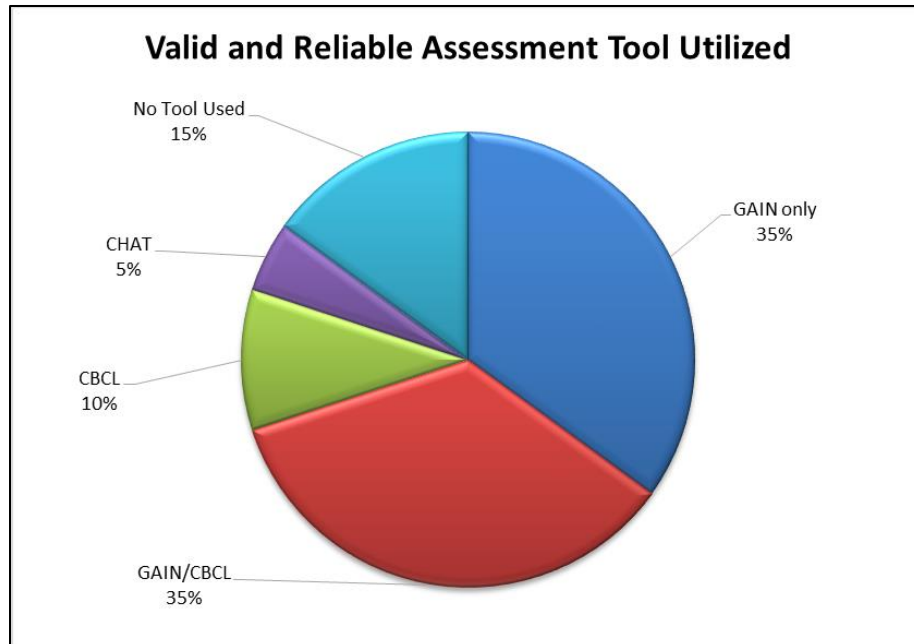
There are different categories or levels of juvenile justice involvement for youth referred within JJSAMHP. Data is collected on youth admitted to services. The four most common categories of juvenile justice involvement at admission to a provider are as follows: Adjudicated Delinquent, then Diversion with Contract, then Pre-Adjudication and Adjudicated Undisciplined. This is represented graphically below.



JJSAMHP Domain II: Assessment

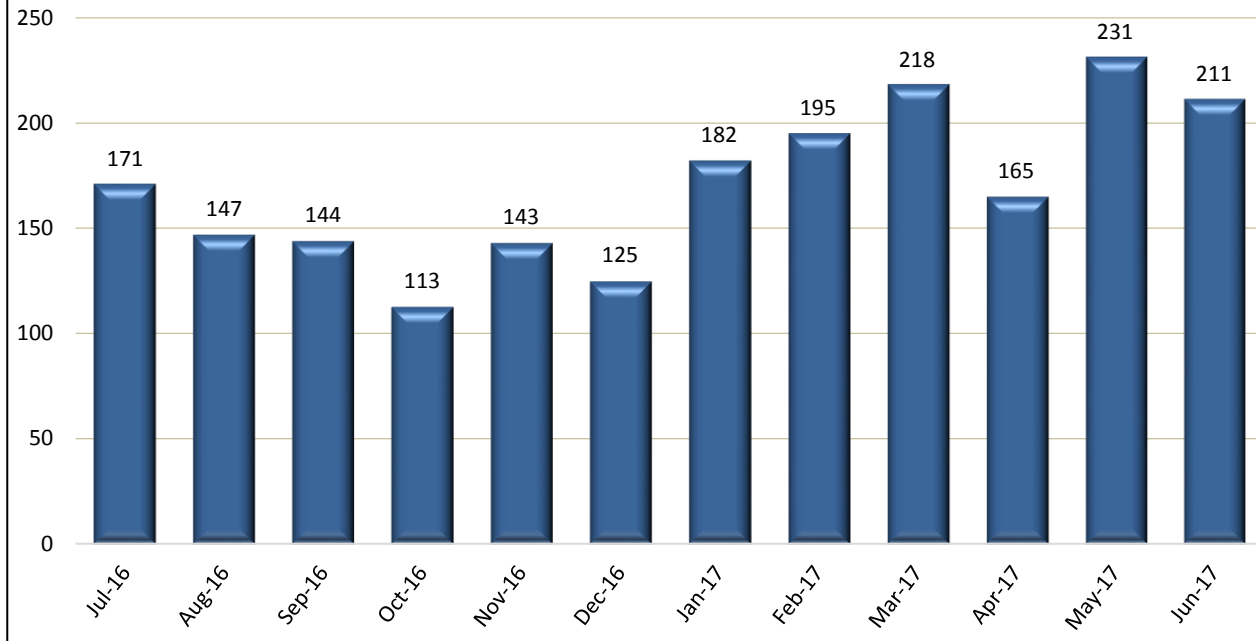
The second JJSAMHP domain is Assessment. The Assessment tool used by JJSAMHP teams must gather information on substance use and mental health challenges. According to Reclaiming Futures, a comprehensive assessment involves usage of a tool to ascertain a wide range of individual and family risk factors, service needs, as well as the youth's strengths and assets. There is data collection on types

of Evidence Based Tools that teams utilized to assess youth once they were referred to a provider. The tools that were collected this year included the Global Appraisal of Individual Needs (GAIN), the Child Behavior Checklist, and the Comprehensive Health Assessment for Teens (CHAT) or some combination. Seventeen out of 20 teams reported using an evidence based (valid and reliable) assessment tool for mental health and substance use. This was also compared to the teams' reports of monthly data and if the team classified that they are using another tool such as a Comprehensive Clinical Assessment (CCA), then this was classified as "No Tool Used" below. The chart to the right outlines the most frequently cited valid and reliable assessment tools used by teams.



Additionally, teams collect data on the number of assessments completed each month. Based on data submitted by the local teams, there were 2,045 assessments completed by partnering providers for the JJSAMHP during 2016-2017. This represents 73% of the youth referred being assessed. This averages to 170 assessments per month. For the first half of the fiscal year (July through December) there were 843 assessments and for the second half of the fiscal year (January through June), there were 1,202 assessments. The assessments completed represent 68% of the referrals for the first half of the year and 77% of the referrals for the second half of the year. To determine the number of assessments for each LME/MCO across this time period, please see the section entitled "Local Team Processes." The chart below represent the total assessments completed across all JJSAMHP sites for 2016-2017 and the next graph represents a comparison of this fiscal year with the previous seven fiscal years.

JJSAMHP Monthly Assessments Completed Across All Sites from July 2016-June 2017



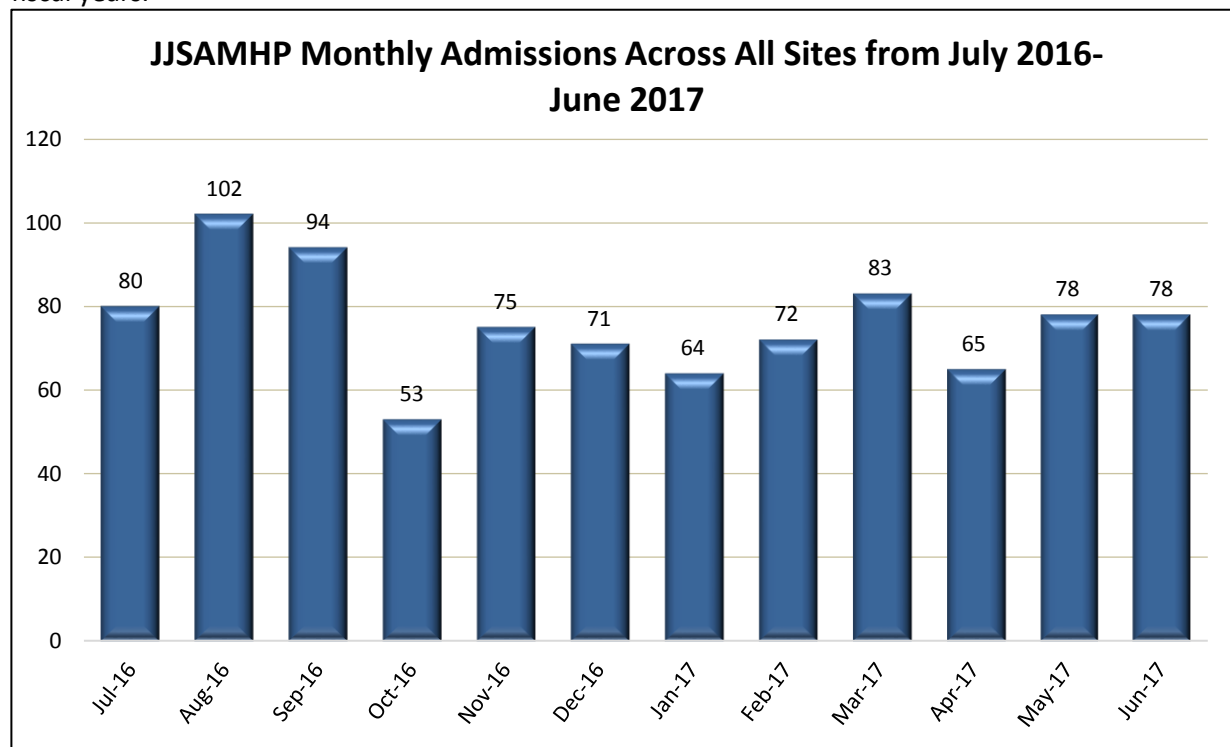
JJSAMHP Monthly Assessments-Fiscal 2010-2017

Fiscal	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
2017	171	147	144	113	143	125	182	195	218	165	231	211	2045
2016	165	155	196	171	169	150	151	201	171	219	190	173	2111
2015	211	198	173	237	191	188	250	154	268	227	201	202	2500
2014	194	148	126	221	148	147	176	196	244	223	208	165	2196
2013	188	178	168	207	161	173	221	199	206	270	155	176	2302
2012	196	174	205	197	208	179	195	203	187	230	244	187	2405
2011	197	222	205	204	208	180	226	264	297	233	250	221	2707
2010	103	88	120	117	118	150	198	171	291	311	227	214	2108

JJSAMHP Domain III: Engagement

The third JJSAMHP domain is Engagement—particularly utilizing System of Care Principles. Although engagement can entail various areas, including partnering with families and youth, the focus was ensuring admission to a partnering provider who agreed to include Child and Family Teams as part of the continuum of care. 100% of the teams cite regular usage of Child and Family Teams. For this fiscal year, there were 915 admissions to JJSAMHP providers during 2016-2017. It is noted that several of the teams do not have the capability to track when referring youth outside of the partnering provider array, so there are likely youth who are referred to another provider but not captured in these numbers since it is based on admissions by partnering providers only. For the few teams that did track this information, there were an additional 102 admissions for a total of 1017 documented admissions. To determine the

number of admissions to JJSAMHP providers for each team across this time period, please see the section entitled “Local Team Processes.” The following graphs represent the total admissions to JJSAMHP partner providers for 2016-2017 and then a comparison of this fiscal year with the previous fiscal years.

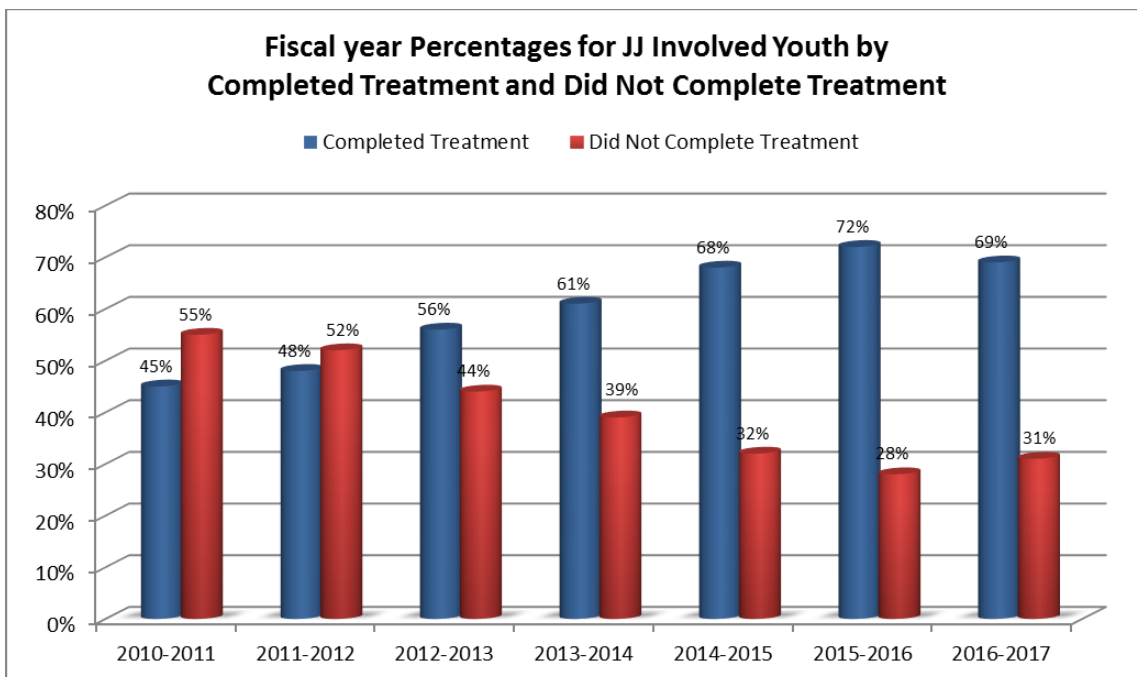
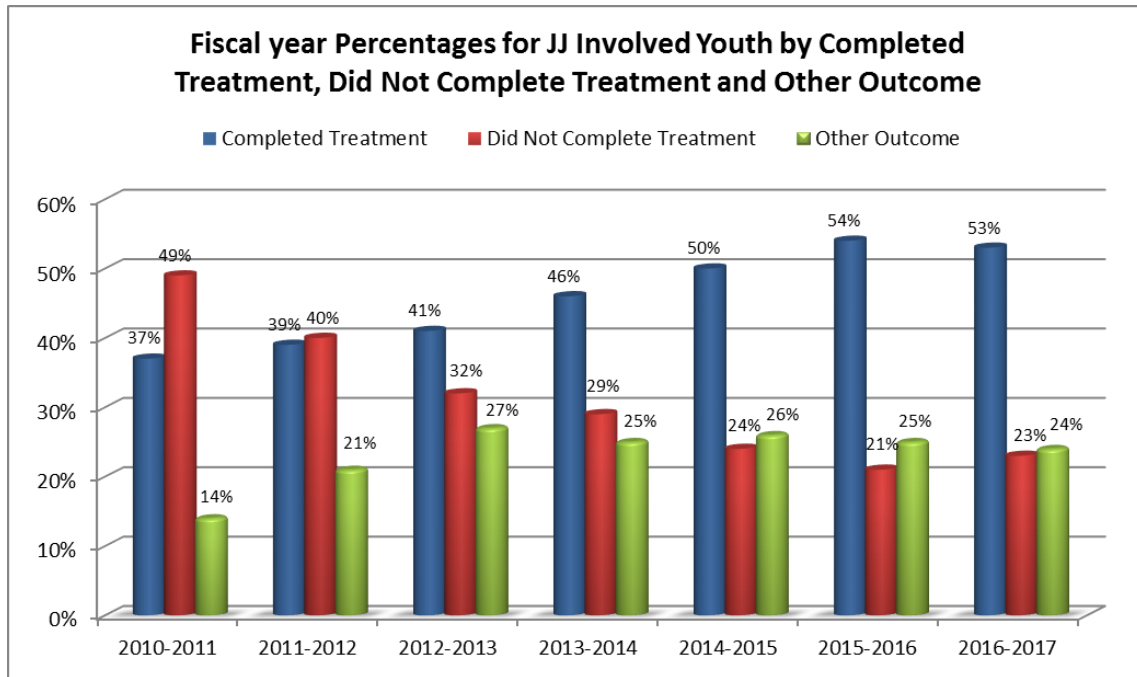


JJSAMHP Monthly Admissions-Fiscal 2010-2017													
Fiscal	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
2017	80	102	94	53	75	71	64	72	83	65	78	78	915
2016	93	96	154	125	99	83	96	118	114	117	109	97	1301
2015	102	163	126	108	96	103	125	84	107	138	106	95	1353
2014	149	107	95	179	147	164	125	132	165	135	138	113	1649
2013	165	162	118	159	124	124	158	176	156	164	129	137	1772
2012	131	135	144	151	162	129	163	138	150	176	193	138	1810
2011	147	163	152	147	158	146	184	190	213	175	184	161	2020
2010	55	41	40	151	66	74	116	123	214	213	169	166	1428

Discharge Completion Rates for JJSAMHP across Fiscal Years 2011, 2012, 2013, 2014, 2015, 2016, 2017

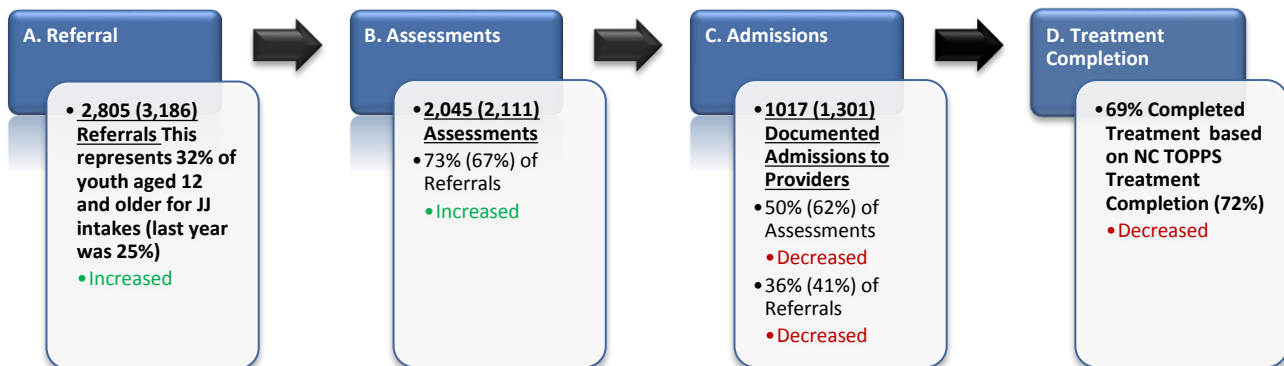
Another area that has been outlined is percentage of youth who have successfully completed treatment across the fiscal years. NC-TOPPS (see Section D) data is completed by treatment providers for youth who initiate and complete treatment. The **Completed Treatment** group includes that youth who successfully completed treatment services. The **Did Not Complete Treatment** group includes that youth

who never received any treatment/services, were discharged at the program initiative, refused treatment, incarcerated, and did not return as scheduled within 60 days. The **Other Outcome** group includes youth who were institutionalized, moved out of area, changed to a service not required by NC-TOPPS and youth who died during the fiscal year. The first chart outlines all juvenile justice discharges and the second chart only the Completed Treatment and Did Not Complete treatment groups. This is the first time in seven years that this number decreased.

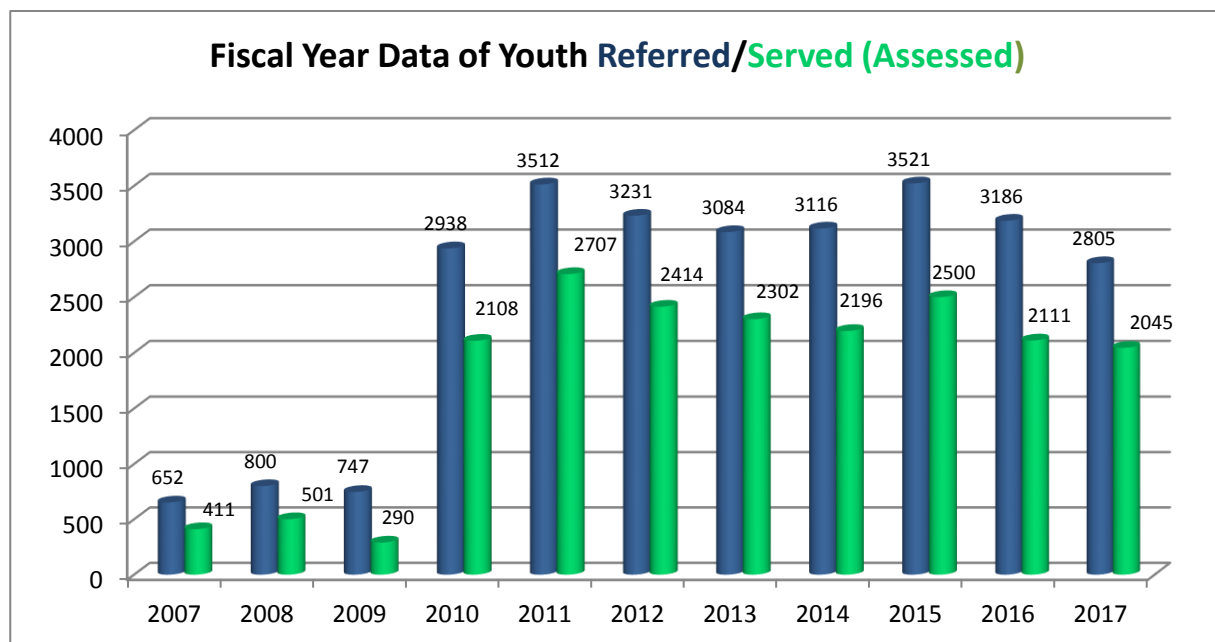


Overall Process Numbers for JJSAMHP for 2016-2017

The graphic below outlines key process points for JJSAMHP over the last fiscal year in the following areas: a) the number of youth that had documented referrals from JJ to JJSAMHP assessment provider; b) the number of youth assessed and documented by a JJSAMHP provider; c) the number of youth admitted by a JJSAMHP provider (it is again noted that youth can be referred outside of partnership to a provider who is not tracking data and based on family choice and needs); and d) the percentage of youth who successfully completed treatment based on data provided to the state by providers (see this information below). **The numbers in parentheses represent previous fiscal year data (2015-2016).**



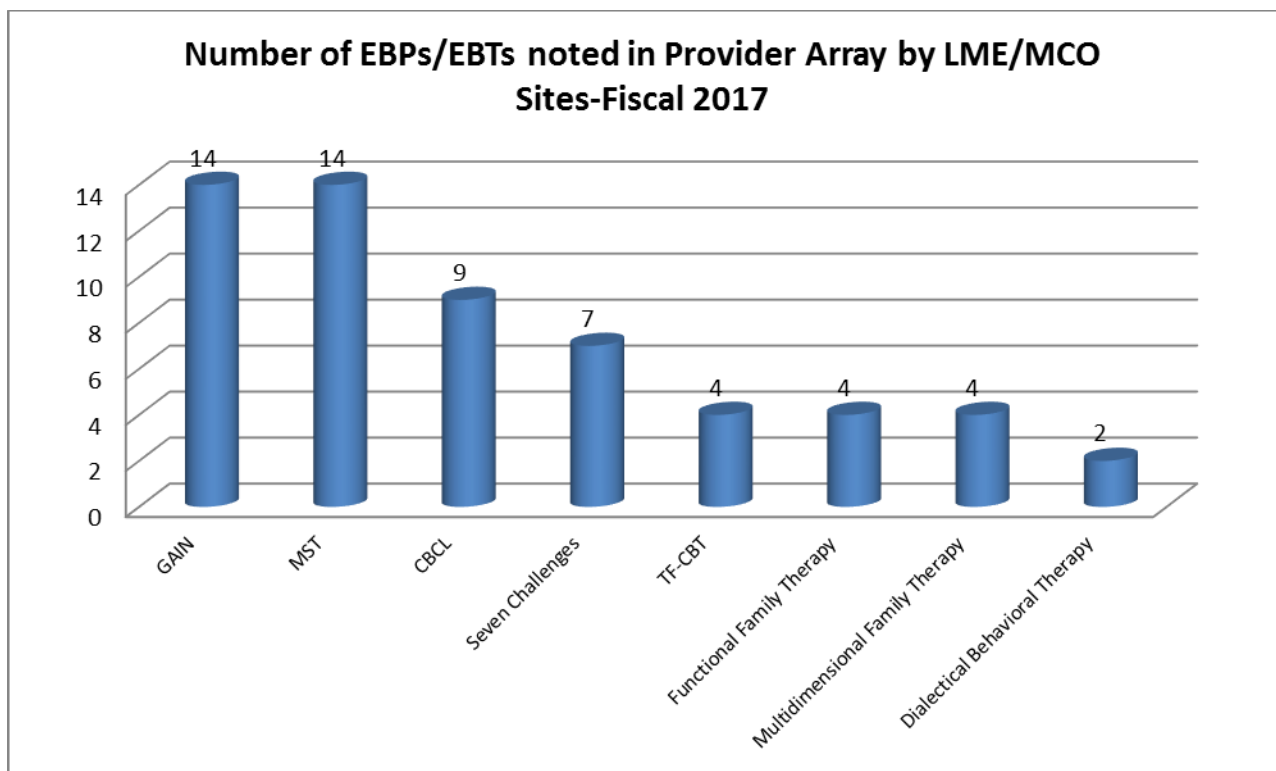
Additionally, there is data on the number of youth referred by JJ to a JJSAMHP provider (formerly MAJORS), and the number of youth who were assessed by a JJSAMHP provider for services. The next chart outlines this information over the last fiscal years. Notably, during Years 2007, 2008, 2009 (MAJORS), only youth with substance use issues were being tracked and in 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017 (JJSAMHP), youth with mental health issues were also tracked across multiple providers.



IJSAMHP Domain IV: Evidence Based Practices/Evidence Based Treatments

The fourth domain is usage of Evidence Based Practices/Treatments. All teams cite having providers that use evidence based treatments within their service array. This information is provided by the teams but this is not a check into the actual fidelity of the treatment/practice. The most commonly used EBP/EBTs are included in this report. The Evidence Based Practices/Treatments include: Global Appraisal of Individual Needs (GAIN), Multisystemic Therapy (MST), Child Behavior Checklist (CBCL), Seven Challenges, Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Functional Family Therapy, Multidimensional Family Therapy, and Dialectical Behavior Therapy. All of the listed areas are Evidence Based Treatments except the GAIN and CBCL which are Evidence Based Assessments. Any practices/or treatments that had more than one team endorsing the usage was included in the tabulation. For more information on these EBP's/EBT's, please refer the primer in the following link:

<http://www.ijsamhp.org/publications/>.



IJSAMHP Domain V: JCPC Involvement-Developing Recovery Oriented Systems of Care and Ensuring “Beyond Treatment” Activities

The last domain involves inclusion of Juvenile Crime Prevention Council (JCPC) programming, particularly with respect to Recovery Oriented Systems of Care (ROSC).

ROSC is defined as the following:

Recovery-oriented systems of care are designed to support individuals seeking to overcome substance use disorders across the lifespan. Participants at the Summit declared, “There will be no wrong door to recovery” and also recognized that

recovery-oriented systems of care need to provide “genuine, free and independent choice” (SAMHSA, 2004) among an array of treatment and recovery support options. Services should optimally be provided in flexible, unbundled packages that evolve over time to meet the changing needs of recovering individuals. (USDHHS, 2009)

For the purposes of JJSAMHP, the focus is to build upon treatment services to address the needs of not only youth with substance use issues, but also youth with mental health issues as well. This is described by Reclaiming Futures as “Beyond Treatment” and entails involvement in other community based activities such as mentoring and leadership development to address the holistic needs of the youth and their families as recovery often includes natural supports and helps that can only be provided by the community. JJ leadership is involved with both JJSAMHP and the local JCPC team.

Section D: Activities and Accomplishments of JJSAMHP for Fiscal 2016-2017

This section outlines the overall Activities and Accomplishments of the JJSAMHP for the 2016-2017 Fiscal Year. This will be detailed in four (4) areas that helped shape the review of activities: 1) Strengthen Partnerships, Communication, and Information Sharing; 2) Improve Data Reporting; 3) Provide Support for Training and Technical Assistance; 4) Provide Support for Usage of Evidence Based Practices/Evidence Based Treatments/Best Practices. Each of these areas is outlined below.

1. Strengthen Cross-System Partnerships, Communication and Information Sharing

One of the goals for this fiscal year was to provide support for teams to continue their work in cross-system partnerships, including strengthening information sharing mechanism, documentation of activities, and providing opportunities for cross-system training and collaboration. Local teams meet at varying frequencies from quarterly to every week (for clinical staffing). This information can be found in the Compendium of Services that is updated at least once per quarter at <http://www.jjsamhp.org/publications/>. Additionally, the state level partnership meets to review and discuss the initiative and processes and to obtain and provide feedback. The main activities for JJSAMHP are highlighted below:

- A. Overall, there were a total of 15 Cross-System (Juvenile Justice, Behavioral Health Providers, LME/MCO representatives and others) trainings/meetings, including the regional meetings below. There were 425 documented attendees across the 15 trainings/meetings. As in every year, one of the major activities for this fiscal year was the provision of Regional meetings. The state team worked with trainers, Dr. Joanna Linn and Michelle Edelen, on Cultural Competence training for the JJSAMHP teams. This included several planning sessions and then implementation in the regional meeting dates noted below. Additionally, the state team worked on sustainability of best practices training that was also implemented at the regional meetings. The meetings focusing on Cultural Competence and Sustainability are noted below and include locations and number of participants.
 - a. 5/1/2017-Western/Piedmont (Hickory, NC) -70 Cross System Team members
 - b. 5/4/2017-Eastern (Greenville, NC)-51 Cross System Team members
 - c. 5/22/17-Central (Durham, NC)-68 Cross System Team members
- B. UNCG developed a “tool kit” to accompany Process Improvement training. This will be a supplemental workbook for the training participants that provides “how to” guides for tools and original training worksheets for tool implementation. The workbook will support transfer of learning by participants to local team members to increase team functioning. UNCG supported three cross system teams in their participation of the modified Process Improvement training.
- C. UNCG supported 4 Information Sharing refresher trainings for juvenile justice leaders across the state. UNCG provided for consultations to 7 teams on their information sharing processes and provided direct support to 4 cross-system teams in this area.

- D. UNCG provided cultural competence/implicit bias training (outside of the regional meetings) to 3 cross system teams.
- E. UNCG provided 7 teams with team fitness training and activities.
- F. There were 49 state level team meetings and other meetings that link to JJBH issues such as the Juvenile Justice Behavioral Health state team and subcommittee meetings, System of Care State Collaborative, the Health Disparities Subcommittee, the Juvenile Re-Entry Engagement Task Force Subcommittee, and the Cross Area Substance Use Detention and Residential meetings.
- G. The Compendium of Services was maintained as a resource document through work with local teams (specifically LME/MCO liaisons). Again this year, it was helpful to involve a Family Partner and an undergraduate student in attaining information from LME/MCO liaisons. This allows for individuals to see various roles that Family Partners can play in working with JJSAMHP teams. The Compendium of Services outlines key team partners, juvenile justice youth served, services provided, referral, assessment, and treatment processes. The link to the Compendium is located at <http://www.jjsamhp.org/publications/>.
- H. It was important to continue to update the JJSAMHP website, including weekly updates of the Substance Use Residential beds for those in state seeking this resource for juvenile justice involved youth. The Residential census that is updated by UNCG students is at the following link: <http://www.jjsamhp.org/residential-census/>
- I. A monthly updated Technical Assistance (TA) document was provided to state and regional level partners to ensure better understanding of the type of work being completed by sites. Each TA on-site visit and each substantial contact (such as teleconferences or research requests) is noted in the TA Document, which is described in more detail in Section 4.
- J. A Family Member forum was held in June, 2017 and provided opportunity for family members affiliated with JJSAMHP teams to meet and provide feedback on processes.

2. Improve Data Reporting

This second area for the fiscal year was to improve already existing data reporting mechanisms to help increase the ability to describe local and state processes. This includes two forms of data: the monthly report that is required by the Division of LME/MCO partners and the collection of North Carolina Treatment Outcomes and Program Performance System that is required by providers:

- A. The teams continued to use the data system, Qualtrics, through UNCG to submit their monthly data reports. This allowed local teams to generate a report of their data at the time of submission. The main data points continue to be referrals, assessments, admissions, evidence based assessments and evidence based treatments.
- B. UNCG worked with teams on the data system and compliance/accuracy of data submissions. This includes training new liaisons since there were many staff changes through the year. Reports were generated and provided to state level partners and local teams when requested. This year UNCG worked with state DMH liaison on a process to prevent late reports. This process includes notification of the LME/MCO liaison on the 11th of the month if a report is not turned in on time so that there is time to find out from the provider or other data reporter any

barriers and address them. The survey questions for the monthly reports are located in Appendix A.

- C. The second domain was obtaining/cleaning/linking and distribution of NC-TOPPS data. This is to assist in providing more information about quality and treatment provided to youth who are admitted to services. UNCG provided end of previous fiscal year and mid-year information out to the state and local teams about NC-TOPPS data. NC-TOPPS interview forms can be found here: <https://nctopps.ncdmh.net/dev/GettingStartedWithNCTOPPS.asp>
- D. The UNCG evaluation team continued to provide information to state and local team partners regarding the de-identified database in which access was granted in 2012 and continued during this fiscal year. Teams can access analyses per request and the questions are outlined in Appendix B. Two emailers on NC TOPPS data were sent out this year: one on diagnostic pattern differences for African-American and Caucasian youth and the other on suspensions and relationship to treatment outcomes. These emailers can be sent per request to slfrison@uncg.edu.

3. Provide Support for Training and Technical Assistance

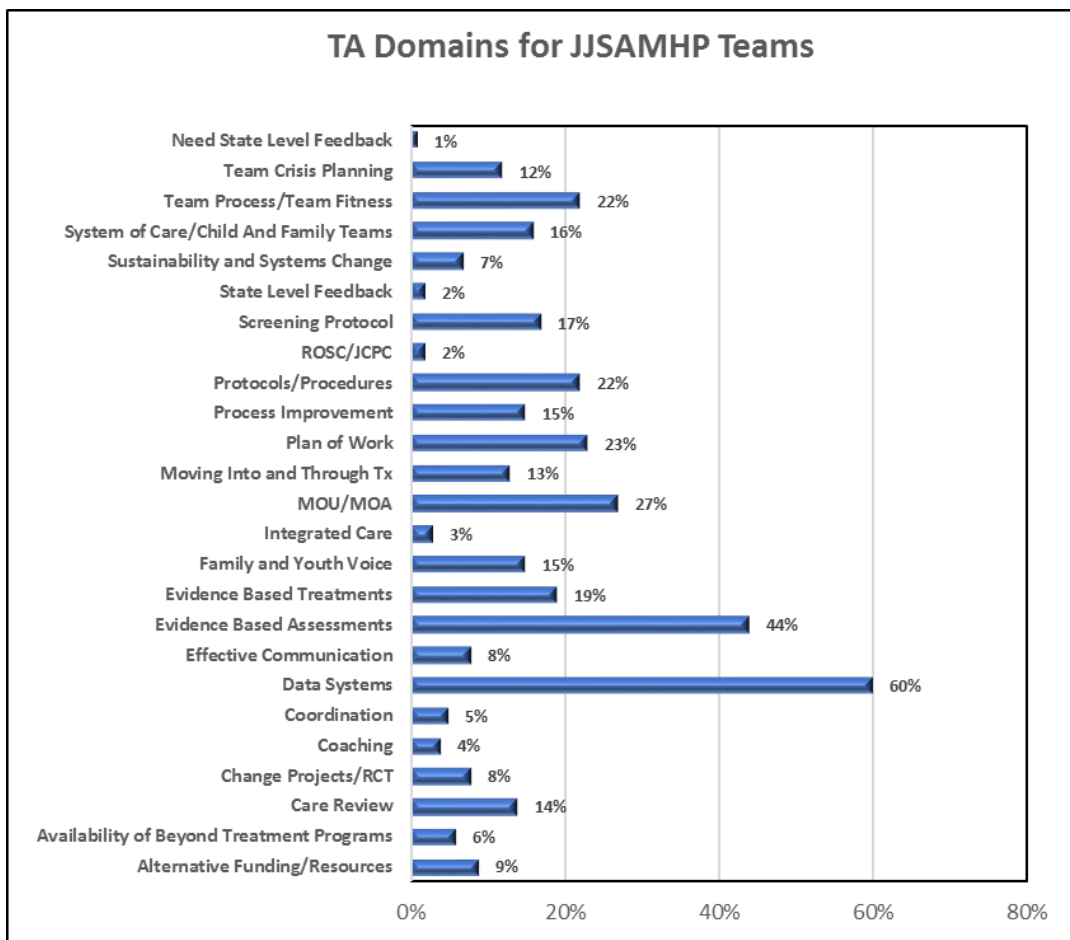
- A. Technical Assistance. Another activity of the JJSAMHP was to provide technical assistance directly to local teams. The state level partners requested that teams be visited at least two times during the year. There were a total of 155 site visits to teams from July, 2016 through June, 2017. These visits helped to identify barriers at the local team level and possible solutions/information from state level partners, information sharing on evidence based practices, and sharing of other team's processes as ways to address barriers and encourage use of funds to support processes. There were an additional 41 other substantial contacts that required data generation, research or work other than routine phone calls and questions. There were numerous emails and short phone calls that are not documented here but this was also provided to teams, particularly around evidence based treatment questions, data collection, or general JJSAMHP processes.

The following visits were completed by UNCG or UNCG contractors:

Type of Contact	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
On-Site Visits	1. 7/1/2016-Cardinal ACOC Team	1. 10/4/16-Cardinal ACOC Team	1. 1/5/2017-Sandhills 8 County	1. 4/7/17-Cardinal Triad RSD
	2. 7/6/16-Cardinal Innovation Mecklenburg	2. 10/5/16-Cardinal Triad	2. 1/11/17-Eastpointe Lumberton	2. 4/13/17-Cardinal Innovation Person
	3. 7/8/16 Cardinal Piedmont Team	3. 10/5/16-Sandhills 8 County	3. 1/11/17-Sandhills Guilford	3. 4/18/17-Alliance Wake
	4. 7/13/16-Eastpointe Lumberton	4. 10/6/16-Alliance Durham	4. 1/12/17-Alliance Durham	4. 4/24/17-District 6
	5. 7/14/16-Cardinal Innovation Person	5. 10/7/16-Cardinal Triad	5. 1/12/17-Cardinal Innovation Person	5. 4/25/17-Cardinal-ACOC Team
	6. 7/15/16-Cardinal ACOC Team	6. 10/12/16-Cardinal Piedmont Team	6. 1/17/17-Alliance Wake	6. 5/11/17-Cardinal Innovation Mecklenburg
	7. 7/19/16-Alliance Wake	7. 10/13/16-Cardinal Innovation Mecklenburg	7. 1/17/17-Cardinal Five County Team	7. 5/16/17-Cardinal- Five County Team
	8. 7/19/16-Cardinal Five County Team	8. 10/19/16-Partners Southern	8. 1/18/17-Partners Southern	8. 5/21/17-Alliance Durham
	9. 7/20/16-Partners Southern	9. 10/21/16-Cardinal ACOC Team	9. 1/20/17-Cardinal ACOC Team	9. 5/25/17-Cardinal- Five County Team
	10. 7/22/16-Alliance Cumberland	10. 10/21/16-Sandhills 8 County	10. 1/20/17-Sandhills 8 County	10. 5/25/17-District 6
	11. 7/22/16-Alliance Cumberland	11. 10/25/16-Cardinal Innovation Mecklenburg	11. 1/23/17-Eastpointe Kinston	11. 6/1/17-Partners Northern
	12. 7/22/16-Sandhills Guilford	12. 10/27/16-Alliance Wake	12. 1/24/17-Partners Central	12. 6/2/17-Cardinal Piedmont Team
	13. 7/22/16-Sandhills 8 County	13. 10/28/16-Alliance Cumberland	13. 1/25/17-Sandhills Guilford	13. 6/2/17-Cardinal Triad
	14. 7/26/16-Partners Central	14. 10/28/16-Cardinal Triad RSD	14. 1/26/17-Trillium North	14. 6/5/17-Trillium Central
	15. 7/28/16-Eastpointe Kinston	15. 10/28/16-Sandhills Guilford	15. 1/27/17-Alliance Cumberland	15. 6/6/17-Partners Northern
	16. 7/28/16-Trillium ECBH Northeast	16. 11/4/16-Cardinal Triad	16. 1/27/17-Alliance Cumberland	16. 6/8/17-Alliance Durham
	17. 8/4/16-Partners Northern	17. 11/7/16-Cardinal Triad RSD	17. 1/30/17-District 6	17. 6/14/17-Sandhills Guilford
	18. 8/4/16-Partners Southern	18. 11/7/16-Sandhills Guilford	18. 2/3/17-Cardinal Piedmont Team	18. 6/14/17-Eastpointe-Lumberton
	19. 8/5/16-Smoky Mountain Center	19. 11/7/16-Vaya Health	19. 2/6/17-Trillium Central	19. 6/15/17-Alliance Durham
	20. 8/7/16-Sandhills 8 County	20. 11/8/16-Cardinal Five County Team	20. 2/8/17-Eastpointe Lumberton	20. 6/20/17-Alliance Wake
	21. 8/9/16-Eastpointe Rocky Mount	21. 11/8/16-Cardinal Innovation Mecklenburg	21. 2/8/16-Sandhills Guilford	21. 6/21/17-Partners Southern
	22. 8/11/16-Alliance Durham	22. 11/9/16-Eastpointe Lumberton	22. 2/9/17-Cardinal Innovation Mecklenburg	22. 6/26/17 District 6
	23. 8/11/16-Eastpointe Kinston	23. 11/10/16-Alliance Durham	23. 2/9/17-Cardinal Innovation Person	23. 6/27/17-Partners-Central
	24. 8/16/16-Cardinal Five County Team	24. 11/10/16-Cardinal Innovation Mecklenburg	24. 2/13/17-Sandhills 8 County	
	25. 8/19/16-Cardinal ACOC Team		25. 2/16/17-Eastpointe Rocky Mount	
		26. 2/17/17-Cardinal ACOC Team		

Type of Contact	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
	26. 8/22/16-Eastpointe Lumberton 27. 8/23/16-Partners Central 28. 8/26/16-Alliance Cumberland 29. 8/26/16-Alliance Cumberland 30. 8/26/16-Sandhills-Guilford 31. 8/29/16-Trillium ECBH Northeast 32. 9/6/16-Smoky Mountain Center 33. 9/7/16-Cardinal ACOC Team 34. 9/8/16-Cardinal Innovation Person 35. 9/9/16-Cardinal - Triad 36. 9/12/16-Trillium ECBH-Southern 37. 9/14/16-Eastpointe Lumberton 38. 9/16/16-Cardinal ACOC Team 39. 9/23/16-Alliance Cumberland 40. 9/23/16-Alliance Cumberland 41. 9/26/16-Eastpointe Kinston 42. 9/26/16-Sandhills 8 County 43. 9/27/16-Partners Central 44. 7/14/16-Eastpointe Rocky Mount	25. 11/10/16-Cardinal Person Team 26. 11/12/16-Eastpointe Rocky Mount 27. 11/14/16 Sandhills 8 County 28. 11/15/16-Alliance Wake 29. 11/18/16-Cardinal ACOC Team 30. 11/18/16-Sandhills Guilford 31. 11/21/16-District 6 32. 11/22/201-Partners Central 33. 11/28/16-District 6 34. 11/28/16-Eastpointe Kinston 35. 12/1/16-Partners Northern 36. 12/2/16-Cardinal Piedmont Team 37. 12/2/16-Cardinal Triad 38. 12/8/16-Alliance Durham 39. 12/8/16-Cardinal Person Team 40. 12/9/16-Sandhills Guilford 41. 12/12/16-Alliance Cumberland 42. 12/12/16-Cardinal Innovation Mecklenburg 43. 12/14/16-Eastpointe Lumberton 44. 12/16/16-Cardinal ACOC Team	27. 2/21/17-Cardinal Five County Team 28. 2/21/17-District 6 29. 2/22/17-Sandhills Guilford 30. 2/24/17-Alliance Cumberland 31. 2/24/17-Alliance Cumberland 32. 2/28/17-Partners Central 33. 3/2/17-Cardinal Innovation Mecklenburg 34. 3/2/17-Partners Northern 35. 3/3/17-Cardinal-Piedmont Team 36. 3/3/17-Cardinal Triad 37. 3/9/17-Cardinal Innovation Person 38. 3/15/17-Eastpointe Kinston 39. 3/17/17-Cardinal ACOC Team 40. 3/21/17-Alliance Wake 41. 3/23/17-Trillium North 42. 3/27/17-District 6 43. 3/27/17-Eastpointe Goldsboro 44. 3/28/17-Partners Central	
Scheduled or planned phone technical assistance phone conferences or other Substantial Contact	1. 8/8/16 Partners - Southern 2. 7/26/16 Partners - Northern 3. 8/1/16 Cardinal Innovation-Mecklenburg 4. 8/2/16 Cardinal Innovation- Person 5. 8/10/16 Cardinal-Piedmont Team	1. 10/6/16 Partners - Northern 2. 10/10/16 Cardinal Innovation-Mecklenburg 3. 10/13/16 Cardinal-ACOC Team 4. 10/18/16 District 6 5. 10/24/16 Cardinal-Person Team	1. 1/10/2017 Cardinal-Piedmont Team 2. 3/23/2017 Partners - Northern 3. 1/1/2017 Cardinal - Triad RSD 4. 2/20/2017 Cardinal-ACOC Team	1. a. 6/19/17 Alliance Cumberland

<i>Type of Contact</i>	<i>First Quarter</i>	<i>Second Quarter</i>	<i>Third Quarter</i>	<i>Fourth Quarter</i>
	6. 8/16/16 Cardinal Innovation- Person	6. 10/26/16 Cardinal-ACOC Team		
	7. 8/22/16 Sandhills-Guilford	7. 11/3/16 Cardinal Innovation-Mecklenburg		
	8. 8/29/16 Sandhills-8 County	8. 11/15/16 Cardinal-ACOC Team		
	9. 9/1/16 Alliance Durham	9. 11/15/16 Partners - Southern		
	10. 9/14/16 Sandhills-Guilford	10. 12/7/16 Sandhills-8 County		
	11. 9/20/16 Cardinal-Five County Team	11. 12/12/16 Cardinal-ACOC Team		
	12. 9/22/16 Trillium-ECBH Northeast	12. 12/19/16 Partners - Central		
	13. 9/29/16 Partners - Northern	13. 12/19/16 Partners - Northern		
	14. 7/8/2019 Sandhills-8 County	14. 12/19/16 Partners - Southern		
	15. Cardinal - Triad RSD	15.		
	16. 7/8/16 Cardinal-ACOC Team			
	17. 8/5/16 Cardinal - Triad			
	18. 8/16/16 Cardinal Innovation-Mecklenburg			
	19. 9/20/16 Alliance Wake			
	20. 9/20/16 Partners - Southern			
	21. 9/22/16 Alliance Cumberland			
	22. 9/22/16 Cardinal Innovation-Mecklenburg			
	23.			



- B. Additionally, monthly TA updates are provided to both state and regional level partners. Also, there is contact on each report with Division liaison about information provided in report and follow up on concerns noted as well as key discussion points of the meetings. This includes focus on Data Systems, Evidence Based Assessments, MOU/MOA processes, protocols and procedures, and the overall Plan of Work. The percentage of time that teams had these areas addressed in meetings is in the chart above.
- C. Additionally, there was a focus again on increasing capacity for Evidence Based Assessments and Treatments and best practices in service delivery.
- a. UNCG strengthened the 4-part series for effective teams. The three trainings that were executed were I.-III. below with elements of IV. being implemented with team members during this fiscal year:
 - i. Process Improvement Training (Feedback was positive and teams wanted more training-this was extended to a full day and a manual was developed)
 - ii. Youth and Family Engagement training was expanded during this fiscal year by including components for teams to conduct focus groups and for teams to better engage youth and families into their service appointments
 - iii. Team Fitness was expanded during this fiscal year and moved from an activity to an actual training that can be done with team members and frontline staff
 - iv. Elements of Facilitation skills training was done with team members

- v. Additional trainings can be found at the following link:
<http://www.jjsamhp.org/training-options-for-jjbh-teams/>.
- b. Besides the 15 Cross-system trainings with at least 425 attendees noted in Section 1, UNCG provided or facilitated discipline specific training as noted here:
 - i. 12 Juvenile Justice specific trainings with 289 Juvenile Justice attendees.
 - ii. 4 Behavioral Health specific trainings with 63 Behavioral Health clinician attendees.
 - iii. 1 Training with Family members with 5 Family member attendees
 - iv. 1 Training with Juvenile Court Judges with at least 110 attendees.
 - v. A brief description of all trainings conducted this year is below.

Trainings Completed During the Year			
Date	Name of Training	Total Participants	Location
7/14/2016	JJSAMHP Orientation Training	13 Cross-System (Provider, LME/MCO, and Juvenile Justice and others) Team Members	Mecklenburg, NC
8/12/2016	Information Sharing Refresher Training Juvenile Justice Chiefs/Supervisors	8 Juvenile Justice Chiefs/Supervisors	Piedmont
8/12/2016	JJSAMHP Overview and Team Building	35 Cross-System Team Members	Rocky Mount, NC
8/24/2016	Information Sharing Refresher Training Juvenile Justice Chiefs/Supervisors	14 Juvenile Justice Chiefs/Supervisors	Western
8/24/2016	Process Improvement	8 Cross-System Team Members	Cardinal Piedmont
8/25/2016	Information Sharing Refresher Training Juvenile Justice Chiefs/Supervisors	18 Juvenile Justice Chiefs/Supervisors	Eastern
8/30/2016	Process Improvement	13 Cross-System Team Members	Mecklenburg, NC
9/8/2016	Team Fitness	11 Cross-System Team Members	Durham, NC
9/27/2016	Information Sharing Refresher Training Juvenile Justice Chiefs/Supervisors	9 Juvenile Justice Chiefs/Supervisors	Central

Trainings Completed During the Year

Date	Name of Training	Total Participants	Location
10/26/2016	Juvenile Justice Referral/Assessment Flow Chart training - District 9	9 Juvenile Justice staff	Roxboro, NC
11/15/2016	Trauma Screening Assessment and Treatment Planning for BH Clinicians	9 Behavioral Health Clinicians/Others	NC TIDE in Greensboro
12/12/2016	JJ Referral/Assessment Flow Chart training - District 9	13 Cross-System Team members	Hillsborough, NC
12/15/2016	Difficult Conversations: Cultural Competency and Implicit bias - Cardinal Triad	22 Cross-System Team members	Winston-Salem, NC
3/1/17	Introduction to Implicit Bias	24 Cross-System team members	Greensboro, NC
3/13/2017	GAIN Training	6 Behavioral Health Clinicians	UNC Greensboro, NC
3/27-3/29/17	Seven Challenges Initial Training	40 Behavioral Health clinicians	UNC Greensboro, NC
3/29/17	Team Fitness-Improving Outcomes for Juvenile Justice Involved Youth through Improved Group Work Skills and Communication	23 Cross-System Team members	Asheboro, NC
4/12/2017	GAIN SS Training for District 16 Juvenile Justice Staff	15 Juvenile Justice staff	Lumberton, NC
4/25/2107	Process Improvement Module: Flow Charting	7 Cross System team members	Henderson, NC
4/26/2017	Team Fitness Training - Improving Outcomes for Juvenile Justice Involved Youth through Improved Group Work Skills and Communication	31 Cross-System team members	Carthage, NC
5/1/2017	Regional Meeting-Western/Piedmont	70 Cross-System team members	Hickory, NC
5/4/2017	Regional Meeting-Eastern	51 Cross-System team members	Greenville, NC
5/15/2017	Emerging Drug Trends Training for Juvenile Justice staff	56 Juvenile Justice staff	Wilson, NC

Trainings Completed During the Year			
Date	Name of Training	Total Participants	Location
5/15/17	GAIN SS Training due to all new leadership	7 Juvenile Justice staff	Halifax, NC
5/17/17-5/19/17	Seven Challenges Leader Training	19 Behavioral Health Clinicians	Greensboro, NC
5/22/2017	Emerging Drug Trends Training for JCCS	52 Juvenile Justice staff	Lillington, NC
5/22/2017	Regional Meeting-Central	68 Cross-System team members	Durham, NC
6/7/2017	Introduction to Cultural Competence: Exploring Challenging Conversations, Culture and Implicit Bias	36 Cross-system team members	Gastonia, NC
6/8/17-6/9/17	Brief Challenges Training	8 Behavioral Health clinicians	Greensboro, NC
6/13/17	Juvenile Court Counselor Orientation to JJSAMHP and the role of the GAIN-SS in the JJSAMHP process	21 Juvenile Justice staff	Hickory, NC
6/15/17	Emerging Drug Trends Training for JCCS	61 Juvenile Justice staff	Morganton, NC
6/21/17	Navigating the Mental Health System for Juvenile Court Judges	At least 110 Juvenile Court Judges	Wrightsville Beach, NC
6/23/17	Juvenile Court Counselor Orientation to JJSAMHP and the role of the GAIN-SS in the JJSAMHP process	19 Juvenile Justice staff	Raleigh, NC
6/27/17	Family Partner/Family Member Focused Discussion	5 Family Members	Greensboro, NC

4. Provide Support for Usage of Evidence Based Practices/Evidence Based Treatments and Best Practices

The goal is to encourage and support teams in the utilization of evidence based practices/evidence based treatments and opportunities for teams to increase their ability to provide more effective services to juvenile justice involved youth and their families. This entailed the following activities (See training section for actual support provided for training by JJSAMHP).

- A. See table above for EBP training including strengthening EBP including GAIN Training and Seven Challenges Training.
- B. Team members often request support from JJSAMHP on research of evidence based practices or providing information. An additional document was updated on Evidence Based Assessments this year.
- C. Provided support to teams on Seven Challenges and GAIN related issues-contacting management from both Seven Challenges and GAIN and linking teams to training information.

Section E: LOCAL TEAM PROCESSES

This section outlines all of the local team processes within each of the local JJSAMHP sites by LME/MCO. As a reminder, there are some sites where there is more than one team, and even differentiation within team based on Court District preferences. The following table provides a general overview of Evidence Based Assessment, Practices, and Treatments for each of the teams in which juvenile justice involved youth are engaged for JJSAMHP and only lists those for which at least two teams are utilizing this practice. It is noted that these are the practices based on the team's monthly data of what was actually done. More information on teams can be obtained from the Compendium of Services at <http://www.jjsamhp.org/publications/>. More information on evidence based practices can be found in a primer, also found in the publications link.

	GAIN	MST	CBCL	Seven Challenges	Trauma – Focused CBT	Functional Family Therapy	Multidimensional Family Therapy	Dialectical Behavioral Therapy
Alliance Cumberland	X	X		X			X	
Alliance Durham	X	X				X	X	
Alliance Wake	X	X			X		X	
Cardinal ACOC (changed)	X	X	X	X				
Cardinal 5 County		X						
Cardinal Person	X	X	X				X	
Cardinal Piedmont	X	X	X	X				
Cardinal Mecklenburg			X					
Cardinal Triad	X			X				
Eastpointe Kinston	X	X						
Eastpointe Lumberton	X		X					

	GAIN	MST	CBCL	Seven Challenges	Trauma – Focused CBT	Functional Family Therapy	Multidimensional Family Therapy	Dialectical Behavioral Therapy
Eastpointe Rocky Mount	X	X						
Partners South								
Partners Central								
Partners North		X	X		X			
Sandhills 8 County	X	X	X					
Sandhills Guilford	X	X	X	X		X		X
Smoky	X			X	X	X		
Trillium Central (uses CHAT)				X	X	X		
Trillium North	X	X						
Vaya	X	X	X	X	X	X		X

ALLIANCE BEHAVIORAL-CUMBERLAND TEAM

Key Team Members

Tina Higgs
Community Relations Specialist

Terrasine Gardner
Community Relations Manager

Sharon Glover
System of Care Coordinator

Damali Alston
Quality Review Coordinator

Miguel Pitts
Chief-District 12

Joe Comer
Provider Network Development Specialist

LaVondra McCloud
Access Family Services

Dr. Kim Young
Alexander Youth Network

Danell Leigh-Triola
Carolina Outreach

Sarah Hallock
Cumberland County Communicare

Jasun Thompson
Extended Reach

Dr. Tony Haire
Haire Enterprises

Joceyln Stephens
Pinnacle Family Services

Roderick Brown
Yelverton Enrichment Services

Farrah Delgado
Youth Villages

Affiliated Counties: Cumberland

Other JJ Initiatives Reclaiming Futures

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	10	20	21	30	18	12	29	40	7	0	29	30	246	---
Assessments	17	7	17	8	15	4	11	17	7	0	5	17	125	51%
Admissions	0	3	11	1	5	0	1	0	1	0	1	1	24	10%
Overall EBA	17	7	17	8	15	4	11	17	7	0	15	17	135	---
GAIN	17	7	17	8	15	4	11	17	7	0	15	17	135	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	1	0	1	---
Multisystemic Therapy	0	0	0	1	0	0	0	0	0	0	0	0	1	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	9	0	4	0	0	0	0	0	0	1	14	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

ALLIANCE BEHAVIORAL-DURHAM TEAM

Key Team Members

Kimberly Hayes-Johnson
Provider Network Development Specialist

Dawn Manus
System of Care Coordinator

Damali Alston
Director of Quality Management

Tasha Butts
Chief-District 14

Anthony Reid
B&D Behavioral Health Services

Robin Sartin
Carolina Outreach

Rosanna De La Rosa
Easter Seals MST

Rose Hylton
Easter Seals UCP

Sarelli Rossi
El Futuro, Inc.

Karen Reeder
Turning Point Family Care

Rhonda French
Visions Counseling Studio, PLLC

Martha Mathis
Easter Seals-Detention Assessor

Jamarr Garris
Youth Extensions

Christopher Jones
Youth Villages MST

Affiliated Counties: Durham

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	6	7	5	11	11	6	15	14	9	15	7	14	120	---
Assessments	8	6	4	7	7	11	7	9	9	9	8	9	94	78%
Admissions	2	2	1	0	3	3	2	1	2	1	2	3	22	18%
Overall EBA	5	6	1	7	6	10	7	9	9	9	8	9	86	---
GAIN	5	6	1	7	6	10	7	9	9	9	8	9	86	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	1	1	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Multidimensional Family Therapy	1	0	0	0	0	0	0	0	0	0	0	0	1	
Multisystemic Therapy	0	1	1	0	3	2	0	0	0	1	0	0	8	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	1	0	0	0	0	0	0	1	---

ALLIANCE BEHAVIORAL-WAKE TEAM

Key Team Members

Eric Johnson
Community Relations Supervisor

Donald Pinchback
Chief-District 10

Mala Ross
Fellowship Health Resources

James Ward
Sigma Health Services

Wendy Wenzel
Turning Point

Damali Alston
Quality Review Coordinator

Ashley Barber
Carolina Outreach

Patricia Cardoso
Haven House

Katherine Glass
Southlight Healthcare

Christopher Jones
Youth Villages

Stephanie Pollard
Court Liaison

Adel Winner
Easterseals UCP, Inc.

Trish Wisse
Hope Services

Kimberly Dekan
Triangle Family Services

Affiliated Counties: Wake

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	14	17	17	13	20	16	13	25	21	27	23	13	219	---
Assessments	11	8	11	9	13	9	10	8	17	12	11	15	134	61%
Admissions	0	1	1	0	6	1	2	1	2	3	3	3	23	11%
Overall EBA	0	2	11	9	7	7	10	8	7	6	11	15	93	---
GAIN	0	2	11	9	7	7	10	6	7	6	11	15	91	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	2	0	0	0	0	2	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	1	0	1	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Multisystemic Therapy	0	1	0	0	4	0	1	1	1	0	0	1	9	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	1	0	0	0	0	0	0	0	1	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

CARDINAL INNOVATIONS-ACOC TEAM

Key Team Members

Stephanie Jones
System of Care Coordinator

Beth Pfister
Regional System of Care Manager

Peggy Hamlett
Chief-District 15

David Carter (until 7/17)
Chief-District 9

Amanda Farris/Steven Sadler
JCC Supervisor

Tina Mitchell
Amethyst Consulting and Treatment

Belinda Younger
Faith in Families Solutions CSA

Carol McLelland
Freedom House Recovery Center

Chandrika Brown
North Carolina Families United

Starkesha Daye
Pinnacle Family Services

Tom McQuiston
Reintegration Support Network

Tom Lesniak
RHA

James Strickland
Solutions Community Supports

Allison Smith
Youth Villages

Affiliated Counties: Alamance, Caswell, Orange, Chatham (Caswell until July, 2017)

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	6	10	8	12	18	15	10	10	11	14	6	16	136	---
Assessments	5	6	5	8	5	6	4	10	5	8	0	6	68	50%
Admissions	2	5	1	5	6	5	1	10	4	8	0	6	53	39%
Non-JJSAMH Provider Admissions*									3	2	1	2	8	
Overall EBA	6	3	0	0	0	7	0	0	0	0	0	0	16	---
GAIN	2	0	0	0	0	6	0	0	0	0	0	0	8	---
CBCL	2	3	0	0	0	1	0	0	0	0	0	0	6	---
CHAT	2	0	0	0	0	0	0	0	0	0	0	0	2	---
Adolescent Community Reinforcement	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	4	4	1	2	2	0	0	0	0	0	0	5	18	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	2	0	0	0	0	0	0	0	2	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

* Team wanted this data reported for their admissions to non-JJSAMHP providers -started tracking in March. All Teams did not track data for non-JJSAMHP providers.

CARDINAL INNOVATIONS-FIVE COUNTY-FOUR COUNTY TEAM

Key Team Members

Clarette Glenn
System of Care Coordinator

Sonynia Leonard
Chief-District 6

David Carter
Chief-District 9

Dana Greenway
DAYMARK Recovery Services, Inc.

Carol McClelland
Freedom House Recovery

Paul Roodhuyzen
RHA

Sharon Garrett
Vision Behavioral Health Services

Bobbie Jo Hopf
Youth Villages

Affiliated Counties: Franklin, Granville, Halifax, Vance, Warren

Other JJ Initiatives: Juvenile Justice Treatment Continuum (Reclaiming Futures) – District 6– Halifax

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	1	1	3	9	4	2	1	6	2	4	3	1	37	---
Assessments	0	1	2	2	3	0	1	3	1	2	1	2	18	49%
Admissions	0	4	3	0	1	0	0	0	1	1	1	1	12	32%
Overall EBA	0	0	0	0	0	0	0	0	0	0	0	0	0	---
GAIN	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Multisystemic Therapy	0	4	3	0	1	0	0	0	0	0	0	0	8	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

CARDINAL INNOVATIONS–PERSON TEAM

Key Team Members

Stephanie Jones
System of Care Coordinator

Beth Pfister
Regional System of Care Manager

David Carter
Chief-District 9

Allison Smith
Youth Villages

Antoniquan Johnson
Securing Resources

Chandrika Brown
North Carolina Families United

Martha Pickett
Freedom House Recovery

Ronnie Dunevant
Roots and Wings of Person County

Starkesha Daye
Pinnacle Family Services

Tina Mitchell
Amethyst Consulting and Treatment

Affiliated Counties: Person (until July, 2017)

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	5	2	2	4	5	4	4	3	3	7	4	3	46	---
Assessments	1	2	0	2	4	2	1	2	0	3	1	3	21	46 %
Admissions	1	2	1	1	5	1	1	2	0	3	1	2	20	443 %
Non-JJ Admissions							2	0	0	3	1	0	6	
Overall EBA	2	2	0	0	4	2	0	0	0	0	0	0	10	---
GAIN	1	1	0	0	0	2	0	0	0	0	0	0	4	---
CBCL	1	1	0	0	4	0	0	0	0	0	0	0	6	---
CHAT	0		0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	1	0	0	0	0	1	---
Multisystemic Therapy	0	1	1	0	1	1	0	0	0	0	0	0	4	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

CARDINAL INNOVATIONS-PIEDMONT TEAM

Key Team Members

Tressy McLean Hickey
System of Care Manager

Beth Pfister
MHSA Care Coordination Manager

David Wall
Chief-District 19

Calvin Vaughan
Chief-District 20

Krista Hiatt
Chief-District 22

Shannon Shore
Children's Hope Alliance

Jean Tillman
Daymark Recovery Services

Tim Tilley
Family Services of Davidson

Chris Abbey
Monarch

Chuck Hill
RHA

Dr. Arlana Sims
Sims Consulting and Clinical Services

Jesse Stroud
Turning Point Family Services

Andrew Stehberger
Youth Villages

Affiliated Counties: Cabarrus, Davidson, Rowan, Stanly, Union

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	28	29	9	8	22	9	24	17	18	25	4	14	207	---
Assessments	21	30	15	7	18	8	23	23	12	33	9	23	222	107%
Admissions	15	21	7	2	10	12	13	12	8	9	4	7	120	58%
Overall EBA	1	19	14	0	17	8	0	23	11	0	6	0	99	---
GAIN	1	2	0	0	0	0	0	0	0	0	0	0	3	---
CBCL	0	0	0	0	0	0	0	0	0	0	6	0	6	---
CHAT	0	17	14	0	17	8	0	23	11	0	0	0	90	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	
Multisystemic Therapy	0	0	0	1	3	4	0	0	0	0	0	0	8	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	1	0	0	0	0	0	0	0	1	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

CARDINAL INNOVATIONS – MECKLENBURG TEAM

Key Team Members

Noel Thomas-Lester
System of Care Manager

Beth Pfister
MHSA Care Coordination Manager

Russell Price
Chief-District 26

Stacy Huss
Supervisor-District 26

Katherine Fitzgerald
Reclaiming Futures Project Director

Amanda Elder
AMI Kids, Inc.

Wanda Douglas
Family Partner

Dawn Shelley
Anuvia

Mackie Johnson
Anuvia

Katherine Hogan
Carolinas Health Care

Libby Safrin
Carolinas Health Care

Becky Smith
Children’s Hope Alliance

John Waller
Family First

Angie Walker
Mecklenburg County

Josh Martin
Support, Inc.

Shante Vines
Support, Inc.

Betsy Thompson
Teen Health Connection

Jesse Stroud
Turning Point Family Services

Andrew Stehberger
Youth Villages

Judge Elizabeth Trosch (Reclaiming Futures
Judicial Fellow)

Affiliated Counties: Mecklenburg

Other JJ Initiatives: Reclaiming Futures

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals*	*	*	15	33	8	27	14	39	47	27	41	40	250	---
Assessments	*	*	0	8	9	5	15	11	27	13	28	23	122	49%
Admissions	*	*	0	0	3	3	0	4	2	0	0	8	17	7%
Overall EBA	*	*	0	0	0	4	4	4	9	4	13	0	38	---
GAIN	*	*	0	0	0	0	0	0	0	0	0	0	0	---
CBCL	*	*	0	0	0	4	4	4	9	4	13	0	38	---
CHAT	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement	*	*	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Dialectical Behavioral Therapy	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Structural Family Therapy	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	*	*	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	*	*	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	*	*	0	0	0	0	0	0	0	0	0	0	0	---

**Team started reporting in September after a transition*

CARDINAL INNOVATIONS-TRIAD TEAM

Key Team Members

Kim Morgan
System of Care Coordinator

Rusty Slate
Chief-District 17

Stan Clarkson
Chief-District 21

Krista Hiatt
Chief-District 22

Mary Beth Robinson
The Children's Home

James Harner
Insight Human Services

AMI Kids

Children's Hope Alliance

Affiliated Counties: Davie, Forsyth, Rockingham, Stokes

Other JJ Initiatives Reclaiming Futures

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	24	21	28	13	15	11	8	6	2	4	9	8	149	---
Assessments	19	17	44	13	15	11	8	6	2	4	9	8	156	105%
Admissions	12	26	23	5	8	11	8	6	2	4	9	8	122	82%
Overall EBA	1	1	0	0	0	0	0	0	0	0	0	0	2	---
GAIN	1	1	0	0	0	0	0	0	0	0	0	0	2	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	8	7	3	5	2	4	1	3	1	2	0	1	37	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

EASTPOINTE-KINSTON TEAM

Key Team Members

Andrea Boney-Dickens
System of Care Specialist

Stacy Justiss
Family Partner Coordinator/NCFU

Angela Wilson
Lead SOC/Care Coordinator

Jennifer Short/Jerry Burns
Chief/Supervisor-District 8

Tracy Arrington
Chief-District 4

Constance Olatidoye
New Dimension Group

Jocelyn Stephens
Pinnacle Family Services

Christina Allen
Pride in NC

Don Neal Jr.
Waynesboro Family Clinic

Affiliated Counties: Duplin, Greene, Lenoir, Sampson, Wayne

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	8	2	4	7	0	3	3	7	5	2	4	0	45	---
Assessments	3	1	1	0	12	1	4	0	3	1	8	4	38	84%
Admissions	3	0	0	0	0	0	0	0	0	0	0	0	3	7%
Overall EBA	3	1	4	6	0	2	3	5	4	2	4	0	34	---
GAIN	3	0	3	6	0	2	3	5	4	2	4	0	32	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	1	1	0	0	0	0	0	0	0	0	0	2	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	
Multisystemic Therapy	0	0	0	0	0	0	4	0	0	0	0	0	4	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

EASTPOINTE-LUMBERTON TEAM

Key Team Members

Robert Williams
System of Care Specialist

Stacy Justiss
Family Partner Coordinator/NCFU

Angela Wilson
Lead SOC/Care Coordinator

Lance Britt
Chief-District 13

Randy Jones
Chief-District 16

Alice Hunt
Primary Health Choice

Barry Graham
Advantage Behavioral

Ivan Pride/Martha Locklear
RHA

Ryan Estes/Stephen Rieman
Coastal Horizons Center

Paul Russ
Consumer & Family Advisory Committee Chair
(CFAC)

Affiliated Counties: Bladen, Columbus, Robeson, Scotland

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	3	2	11	1	0	1	4	9	10	3	9	4	57	---
Assessments	1	2	3	4	0	1	3	7	1	6	8	3	39	68%
Admissions	0	0	3	2	0	0	0	0	0	0	0	0	5	9%
Overall EBA	1	2	6	3	0	0	4	6	4	3	5	1	35	---
GAIN	0	0	3	1	0	0	4	6	4	3	5	1	27	---
CBCL	0	0	0	2	0	0	0	0	0	0	0	0	2	---
CHAT	1	2	3	0	0	0	0	0	0	0	0	0	6	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

EASTPOINTE-ROCKY MOUNT TEAM

Key Team Members

Cotina Thorne
System of Care Specialist

Stacy Justiss
Family Partner Coordinator/NCFU

Mike Walston
Chief-District 7

Terri Proctor
Supervisor-District 7

Angela Wilson
Lead SOC/Care Coordinator

Katherine Mitchel/Sandra Pierce
Pinnacle Family Services

Sandy Wilkey/Nicole Bauer
Easter Seals UCP NC & VA, Inc.

Candance Sutton-Sauls
Pride in NC

Affiliated Counties: Edgecombe, Nash, Wilson (Until July, 2017)

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	7	11	7	1	3	7	9	7	7	8	10	13	90	---
Assessments	18	12	1	0	0	0	0	0	0	0	27	8	66	73%
Admissions	11	0	1	0	0	0	0	0	0	0	0	0	12	13%
Overall EBA	18	22	7	1	3	7	9	5	4	6	7	13	102	---
GAIN	0	10	6	1	3	7	9	5	4	6	7	13	71	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	18	12	1	0	0	0	0	0	0	0	0	0	31	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	0	5	0	0	0	0	0	0	0	0	0	0	5	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

PARTNERS-NORTH TEAM

Key Team Members

Stephanie Funderburk
System of Care Coordinator

Rusty Slate
District 17

Krista Hiatt
District 22

Bill Davis
District 23

Kevin Angell
Children's Hope Alliance

George Edmonds
Youth Villages

Brittany Morgan-Parks
Family Partner

Zachary Hawks
Easter Seals

Duane Gaskins
Daymark Recovery

Affiliated Counties: Iredell, Surry, Yadkin

Other JJ Initiatives Reclaiming Futures

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	17	9	3	0	9	13	9	12	8	14	19	10	123	---
Assessments	14	9	3	5	7	13	7	7	10	9	10	5	99	80%
Admissions	3	3	2	0	2	6	0	0	2	1	10	1	30	24%
Overall EBA	0	0	0	0	0	0	0	0	0	0	0	1	1	---
GAIN	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	1	1	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	0	0	0	0	0	0	0	0	0	0	2	0	2	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	4	0	4	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

PARTNERS-SOUTH TEAM

Key Team Members

Jeanne Patterson
System of Care Coordinator

Carol Cecus McManus
Chief-District 27

Shante Vines
Support, Inc.

Casey Pruitt
Family Partner

Monica Cambria
Alexander Youth Network

Judge Richard Abernathy

Michael Bridges
PORT Program

Affiliated Counties: Gaston

Other JJ Initiatives Reclaiming Futures

2016-2017 Data

	July 2015	August 2015	September 2015	October 2015	November 2015	December 2015	January 2016	February 2016	March 2016	April 2016	May 2016	June 2016	Total	% of Ref.
Referrals	8	14	10	6	4	7	4	8	25	9	10	3	108	---
Assessments	8	13	7	5	5	5	7	6	16	7	13	0	92	85%
Admissions	7	6	8	5	4	4	1	2	10	4	7	3	61	56%
Overall EBA	0	0	0	0	0	0	0	0	0	0	0	0	0	0%
GAIN	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Other EBA	0	0	0	0	0	0	0	0	0	0	0	0	0	---

SANDHILLS CENTER-GUILFORD TEAM

Key Team Members

Lisa Salo
System of Care Coordinator

Carmen Graves (until Spring, 2017)
Chief-District 18

Judge Avery Crump
District Court 18

Ron Carter/Megan Johnson (until Spring, 2017)
Carter's Circle of Care

Tara Ward
Youth Villages

Tina Mitchell
Amethyst

Van Catterall
Youth Focus, Inc.

Quentin Leak
Alcohol and Drug Services

Renee' Michaux
Unifour One

Affiliated Counties: Guilford

Other JJ Initiatives: Reclaiming Futures

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	40	12	20	15	17	22	13	21	15	9	23	17	224	---
Assessments	25	16	7	16	7	5	10	11	13	3	11	9	133	59%
Admissions	7	11	5	6	4	4	3	5	6	6	14	8	79	35%
Non-JJ SAMHP Provider Admissions*							21	22	22	3	8	1	77	
Overall EBA	22	13	4	9	8	2	9	6	7	1	2	1	84	---
GAIN	22	13	4	6	7	2	7	6	7	0	1	1	76	---
CBCL	0	0	0	0	0	0	0	0	0	1	0	0	1	---
CHAT	0	0	0	3	1	0	2	0	0	0	1	0	7	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	1	0	0	0	0	0	0	0	0	0	0	0	1	---
---	0	0	0	0	0	0	0	0	0	0	0	0	0	---
---	0	0	0	0	0	0	0	0	0	0	0	5	5	

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Multisystemic Therapy	1	0	3	2	4	3	6	0	5	2	14	0	40	
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	1	0	2	2	0	0	0	0	0	2	1	8	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

** Team wanted this data reported for their admissions to non-JJSAMHP providers -started tracking in March. All Teams did not track data for non-JJSAMHP providers.*

SANDHILLS CENTER-8 COUNTIES TEAM

Key Team Members

Lucy Dorsey
System of Care Coordinator

Marsha Woodall
Chief-District 11

Randy Jones
Chief-District 16

Calvin Vaughan
Chief-District 20

David Wall
Chief-District 19

Shirlyn Smith
NAMI Family Advocate

Bryan Dupree
Pinnacle Family Service

Robert Smith
Sandhills Behavioral Center

Crystal Morrison
Trinity Services

Judy Fradenburg
Youth Unlimited

Jamie Allen/Jerry Earnhart
Daymark Recovery Services

Megan Johnson
Carter's Circle of Care

Affiliated Counties: Anson, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	13	11	9	9	10	6	11	7	16	12	20	16	140	---
Assessments	6	3	5	6	2	5	8	4	12	6	6	9	72	51%
Admissions	4	4	6	4	0	3	2	4	9	7	3	1	47	37%
Non-JJSAMHP Provider Admissions*										1	2	0	3	
Overall EBA	5	3	4	5	3	5	4	6	7	4	1	5	52	---
GAIN	1	0	1	0	0	4	1	0	0	0	0	0	7	---
CBCL	4	3	3	5	3	1	3	3	7	4	1	5	42	---
CHAT	0	0	0	0	0	0	0	3	0	0	0	0	3	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	0	3	3	2	0	1	0	0	0	1	1	0	11	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	2	1	0	0	0	0	0	3	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

**Team wanted this data reported for their admissions to non-JJSAMHP providers-this was started in April. All Teams did not track data for non-JJSAMHP providers.*

TRILLIUM HEALTH RESOURCES- NORTH TEAM

Key Team Members

Tracey Webster
System of Care Coordinator

LaQreshia Bates-Harley (until June, 2017)
Chief-District 1

Bill Batchelor
Chief-District 2

Hope Eley
System of Care Coordinator

Garrett Taylor
Uplift Foundation/Power of U

Affiliated Counties: Beaufort, Bertie, Camden, Chowan, Currituck, Dare, Hyde, Martin, Pasquotank, Perquimans, Tyrrell, Washington, Gates

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	7	9	7	7	10	5	5	15	0	8	15	9	111	---
Assessments	4	5	7	4	7	8	4	6	0	11	11	14	93	84%
Admissions	3	1	1	3	1	2	5	0	0	2	3	5	28	25%
Overall EBA	3	3	2	2	2	2	1	3	0	7	5	11	49	---
GAIN	3	3	2	2	2	2	1	3	0	7	5	11	49	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	3	2	1	3	1	2	5	0	0	2	3	5	29	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	0

TRILLIUM HEALTH RESOURCES-CENTRAL TEAM

Key Team Members

Keith Letchworth
System of Care Coordinator

Karen Reaves
System of Care Coordinator

Jean Kenefick
System of Care Coordinator

Mary Mallard/Brian Stewart
Chief/Supervisor-District 3

**Tracy Williams Arrington/
Russell Turner**
Chief/Supervisor-District 4

Jennifer Hardee/Debbie Sudekum
PORT Human Services

Affiliated Counties: Craven, Jones, Pamlico, Pitt, Onslow, Carteret

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	0	2	0	0	0	0	1	3	2	4	5	5	22	---
Assessments	1	0	0	0	0	0	0	1	4	2	1	3	12	55%
Admissions	1	0	0	0	0	0	0	1	4	2	1	2	11	50%
Overall EBA	1	0	0	0	0	0	0	1	1	1	0	0	4	---
GAIN	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CBCL	0	0	0	0	0	0	0	0	0	0	0	0	0	---
CHAT	1	0	0	0	0	0	0	1	1	1	0	0	4	---
Adolescent Community Reinforcement	0	0	0	0	0	0	0	0	4	1	0	0	5	---
Dialectical Behavioral Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Functional Family Therapy	0	0	0	0	0	0	0	0	1	0	0	0	1	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structural Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Structured Psychotherapy for Adolescents	0	0	0	0	0	0	0	0	0	0	0	0	0	---

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Responding to Chronic Stress														
The Seven Challenges	0	0	0	0	0	0	0	0	2	0	0	1	3	---
Trauma Focused Cognitive Behavioral Therapy	0	0	0	0	0	0	0	0	1	0	0	0	1	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

VAYA HEALTH TEAM

Key Team Members

Christy Satterfield
Provider Relations

Donald Reuss
Director of Provider Relations

Brenda Chapman
Substance Abuse Provider Specialist

Krista Hiatt
Chief-District 22

Bill Davis
Chief-District 23

Lisa Garland
Chief-District 24

Ronn Abernathy
Chief-District 25

Sylvia Clement
Chief-District 28

Rodney Wesson
Chief-District 29

Dianne Whitman
Chief-District 30

Ronn Ross
Appalachian Community Services

Matt Gaunt/Tammy Deitz
Barium Springs/Children's Hope Alliance

Sarah Dunagan
Daymark Recovery Services

Courtney Ownings
Family Preservation Services

Greta Metcalf
Meridian Behavioral Health

Sandy Feutz/Bill Westel
RHA

Vern Eleazer
Swain Recovery Center

George Edmonds
Youth Villages

Affiliated Counties: Alexander, Alleghany, Ashe, Avery, Buncombe, Caldwell, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Watauga, Wilkes, Yancey counties

Other JJ Initiatives: Juvenile Justice Treatment Continuum

2016-2017 Data

	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	Total	% of Ref.
Referrals	12	21	34	36	35	28	25	29	25	44	14	17	320	---
Assessments	6	9	14	12	12	33	45	55	47	46	38	30	347	108%
Admissions	6	12	20	19	21	15	17	22	19	13	12	11	187	58%
Overall EBA	6	9	14	12	12	6	19	39	36	12	32	28	225	---
GAIN	6	9	14	12	12	6	19	11	8	5	4	8	114	---
CBCL	0	0	0	0	0	0	0	28	28	7	28	20	111	---
CHAT	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Adolescent Community Reinforcement Approach	0	3	4	4	15	8	4	7	10	7	7	4	73	---
Dialectical Behavioral Therapy	1	1	1	1	10	2	2	3	3	1	7	3	35	---
Functional Family Therapy	0	0	0	0	0	0	0	0	2	0	0	1	3	---
Multidimensional Family Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	---
Multisystemic Therapy	5	0	2	0	0	6	0	0	2	5	7	4	31	---
Structural Family Therapy	0	3	1	4	0	0	12	3	4	4	2	0	33	---
Structured Psychotherapy for Adolescents Responding to Chronic Stress	0	0	0	0	0	0	0	0	0	0	0	0	0	---
The Seven Challenges	1	1	0	2	0	0	3	1	3	4	0	2	17	---
Trauma Focused Cognitive Behavioral Therapy	0	1	0	2	3	3	9	4	5	2	6	5	40	---
Seeking Safety	0	0	0	0	0	0	0	0	0	0	0	0	0	---

APPENDIX A – JJSAMHP MONTHLY DATA REPORT

JJSAMHP Monthly Data Survey

1. What is the LME/MCO Associated with this Report?

- Alliance Behavioral Healthcare-Cumberland
- Alliance Behavioral Healthcare-Durham
- Alliance Behavioral Healthcare-Wake
- Eastpointe-Kinston
- Eastpointe-Lumberton
- Eastpointe-Rocky Mount Site
- Partners Behavioral Health-North
- Partners Behavioral Health-Central
- Partners Behavioral Health-South
- Cardinal Innovations Healthcare-ACO Area
- Cardinal Innovations Healthcare-Five County-Four County
- Cardinal Innovations Healthcare-Halifax Area
- Cardinal Innovations Healthcare-Mecklenburg
- Cardinal Innovations Healthcare-Person Caswell Area
- Cardinal Innovations Healthcare-Piedmont
- Cardinal Innovations Healthcare-Triad Area
- Sandhills/Guilford-8 County
- Sandhills/Guilford-Guilford Area
- Trillium North
- Trillium Central
- Vaya Health

2. As data reporter, what is your name?

3. What is your agency name?

4. What is your title?

5. What is your email address?

6. What are the counties associated with this report?

7. What is the date of this report?

Month _____

Day _____

Year _____

8. For which month are you reporting this data?

July 2016

August 2016

September 2016

October 2016

November 2016

___ December 2016

___ January 2017

___ February 2017

___ March 2017

___ April 2017

___ May 2017

___ June 2017

9. JJSAMHP Only-Please put in the total number of youth who participate in the following activities during the month of this report.

___ Number of youth referred from JJ

___ Number of assessments completed during the month

___ Number of admissions to JJSAMHP providers during the month

___ Admissions by Non JJ providers

10. Please enter the total number of each type of assessment completed during the month of this report.

___ Total number of Global Appraisal of Individual Needs Assessments

___ Total number of Comprehensive Health Assessments for Teens

___ Total number of Child Behavior Checklists

___ Total number of Substance Abuse Subtle Screening Inventories

11. Please describe the type of juvenile-justice involvement for JJSAMHP admissions during the reporting month (total account for admissions only).

___ # of Consultation youth referred by JJ during the month

___ # of Diversion with Contract youth referred by JJ during the month

___ # of Diversion without Contract youth referred by JJ during the month

___ # of Pre-Adjudication youth referred by JJ during the month

___ # of Adjudicated Delinquent youth referred by JJ during the month

___ # of Adjudicated Undisciplined youth referred by JJ during the month

___ # of Commitment status youth referred by JJ during the month

___ # of Post-Release Supervision youth referred by JJ during the month

___ # of youth with closed cases referred by JJ during the month

___ # of Intake youth referred by JJ during the month

___ # of other youth referred by JJ during the month

12. JJSAMHP-Please describe the type of evidence based treatment that will be provided for JJSAMHP admissions during the reporting month (total count for admissions only). As a reminder, these are for SU and/or MH EBTs and do not include Cognitive Behavioral Therapy or Motivational Interviewing as these are basic tenants of most other EBTs.

___ Adolescent Community Reinforcement Approach

___ Dialectical Behavior Therapy

___ Family Centered Therapy (model)

___ Functional Family Therapy

___ Motivational Enhancement/Cognitive Behavioral Therapy

___ Multidimensional Family Therapy

___ Seeking Safety

___ Seven Challenges

___ Structured Therapy for Adolescents Responding to Chronic Stress

___ Trauma-Focused Cognitive Behavioral Therapy

DETENTION ONLY

1. DETENTION CENTER ONLY DATA –for this current report month (please leave blank if you are not required by the Division to report these activities):

_____ Total number of youth admitted to Detention Center

_____ Total number of referrals to DC SAS clinician

_____ Total number of youth enrolled with a community treatment provider at admission

_____ Total number of GAIN assessments (Quick, Core or Full Initial)

_____ Total number of youth participating in Brief Challenges

_____ Total number of youth participating in 7C sessions

_____ Total number of youth with primary SA diagnosis at discharge

_____ Total number of youth with primary MH diagnosis at discharge

_____ Total number of youth with no diagnosis at discharge

_____ Total number of youth at ASAM level III or higher

2. Other Detention Center Activities for the current reporting month (please leave blank if you are not required by the Division to report these activities):

Name of Activity _____

Total number of youth involved in activity _____

Name of Activity _____

Total number of youth involved in activity _____

Name of Activity _____

Total number of youth involved in activity _____

Name of Activity _____

Total number of youth involved in activity _____

APPENDIX B - Data Request Questions Provided to JJSAMHP Teams

NC-TOPPS Data Request Form for JJSAMHP or Juvenile Justice Partnership teams

1. What is the LME/MCO associated with this report? (If someone contacts us who is not an LME/MCO representative, we will contact the LME/MCO liaison for your team)

- Alliance Behavioral Healthcare-Cumberland
- Alliance Behavioral Healthcare-Durham
- Alliance Behavioral Healthcare-Wake
- Eastpointe-Kinston Site
- Eastpointe-Rocky Mount Site
- Eastpointe-Lumberton Site
- Partners Behavioral Health-North
- Partners Behavioral Health-Central
- Partners Behavioral Health-South
- Cardinal Innovations Healthcare-ACOC
- Cardinal Innovations Healthcare-Person
- Cardinal Innovations Healthcare-Five County
- Cardinal Innovations Healthcare-Halifax Area
- Cardinal Innovations Healthcare-Mecklenburg
- Cardinal Innovations Healthcare-Piedmont
- Cardinal Innovations Healthcare-Triad
- Sandhills 8 County
- Sandhills-Guilford Area
- Trillium-Central
- Trillium-North
- Vaya Health

2. What is your name?

3. What is your agency name?

4. What is your title?

5. What is your email address?

6. What is the best phone number where you can be reached directly?

7. Which data would you like to include in the analyses?

- County level (1)
- District level (2)
- MCO level (3)

8. What time period would you like to request?

- July 2010-June 2011 (1)
- July 2011-June 2012 (2)
- July 2012-June 2013 (3)
- July 2013-June 2014 (4)
- July 2014-June 2015 (5)
- July 2015-June 2016 (6)
- July 2016-June 2017 (7)
- Most Recent data from July 2017 until last data received by UNCG (8)
- Multiple years or another time period-we will describe below in our question(s) section (9)

9. Which data would you like to examine?

- Initial (1)
- Episode Completion (2)
- Both Initial and Episode Completion Together (3)

10. What questions would you like answered by using NC-TOPPS data? (Someone from the UNCG evaluation team- will follow up within a couple of business days)