

DIV	Appropriation Name	Amount	Performance Measure	End of FY15	Amount Spent
EDO	211	500,000	Management of workforce and IVR (Target 90% of calls to referral line answered within 3 minutes) Knowledgeable resource staff (Target 75% of eligible staff nationally certified)	211 has indicated that they have met the goal of 90% of calls to referral line answered within 3 minutes 100% of eligible staff have been certified.	498,100
DSAMH	Early Intervention	1,500,000	Youth outcome questionnaire (YQO) School based services - School Office Disciplinary Referrals (SDR) Mental health early intervention data and outcomes report	Outcome measures are combined for all of the mental health early intervention services regardless of one-time or on-going funding. The primary measuring tool used is the Youth Outcome Questionnaire (YQO). The goal of the YQO is to show an improvement in overall functioning, indicated by a lowering of overall scores. As of Q3 of FY15 (end of March), the average drop in YQO scores for individuals participating in Early Intervention services is 8.64.	1,500,000
	Local Medicaid Match	2,000,000	Numerous measures can be found on the Mental Health Scorecard (http://dsamh.utah.gov/data/outcome-reports/) and Annual Report (http://dsamh.utah.gov/data/annual-reports/)	The money has been used to pull down the additional Medicaid funding to support the program/services offered by the counties/local authorities. This has happened. The target is to serve all Medicaid recipients that request/need/qualify for services. In SFY 2015 36,613 individuals were provided services through Medicaid. 1,392,736 mental health service events were provided. The outcomes for FY2015 are posted at the listed website.	2,000,000
	Behavioral Medical Match	4,400,000	Numerous measures can be found on the Mental Health Scorecard (http://dsamh.utah.gov/data/outcome-reports/) and Annual Report (http://dsamh.utah.gov/data/annual-reports/)	The money has been used to pull down the additional Medicaid funding to support the program/services offered by the counties/local authorities. This has happened. The target is to serve all Medicaid recipients that request/need/qualify for services. In SFY 2015 36,613 individuals were provided services through Medicaid. 1,392,736 mental health service events were provided. The outcomes for FY2015 are posted at the listed website.	4,400,000
	USH Medicaid Allocation	1,200,000	The Joint Commission accreditation is current Certification by the centers for Medicare/Medicaid Service Rapid Remission (within 30 days of discharge) Adult BPRS (avg reduction in symptoms) Adult SOQ score improvement from admission to discharge.	The Joint Commission accreditation is current. Certification by the centers for Medicare/Medicaid Service is current. Rapid Remission was 1 which exceeds the target of 6. Adult BPRS (avg reduction in symptoms) was 18.1 which exceeds the target of 15. Adult SOQ score improvement from admission to discharge was 21.9 which exceeds the target of 10.	1,200,000
	Positive Action Group	300,000	Increase number of individuals served at the Drop In Center by 15% over FY2014 levels Reduce number of vacancy days during FY2015 by 10% from FY2014 levels.	Increase the number of individuals served at the Grantee's Drop-in Center by fifteen percent (15%) each year of the Grant and Reduce the number of vacancy days, defined as the number of days the housing unit is unoccupied, each year of the Grant by ten percent (10%) under the levels of the prior year. The drop in center has increased by 15%, tenants accumulated 1008 housing days, 10.5% of the total at the Royal and 11.8% of the total at 949 Washington. In 2015 participation has grown from an average of fourteen people daily in 2014 to meeten-play by mid-March 2015. Vacancy days have been reduced by 10% from the previous year. The annual occupancy rate varied by facility as follows: in calendar 2014 the following occupancy percentages were noted: Royal Hotel (20 beds) 74.6%, 949 Washington (11 beds) 96.9%, 21st Street (8 beds) 71.5%, 22nd Street (6 beds) 85.7%, Stamey Apartments (10 beds) 92.9%, Bramwell Court (20 beds) 93.1%. In calendar 2014 the following percentages were logged: Royal Hotel (20 beds) 83.5%, 949 Washington (11 beds) 94.4%, 21st Street (8 beds) 83.2%, 22nd Street (6 beds) 79.1%, Stamey Apartments (10 beds) 99.4%, Bramwell Court (20 beds) 97.8%. Factors such as repairs and remodeling and holding apartments while people qualify for SSI (Supplemental Security Income) account for the variations in occupancy.	300,000
	HS Behavioral Integration	1,440,800	How many unique clients have been served by the behavioral health home, the type of services received, and the number of hours of direct care provided. How many clients from admission to discharge show improved health and functioning related to obesity, cholesterol, triglycerides, blood pressure, blood sugar, smoking and mental illness symptoms	As of June 2015, 222 people have enrolled. Of those 126 have 3 or more risk factors. WHS reports that 116 clients have been in services with Health Connections for at least 6 months and follow-up data has been collected on 60, or 57%. WHS has established a target for collection of follow-up data of at least an 80% follow-up rate by September 1, 2015. The target is increased improvement in each of these areas after 6 months of participation. The bullets below identify the number of individuals with a risk factor and the percent who have shown improvement after 6 months of participation: -Systolic Blood Pressure 43, 29% -Diastolic Blood Pressure 43, 42% -Waist Circumference 94 (Hemoglobin (Diabetes) 67 16% -LDL Cholesterol 80 10% -HDL Cholesterol 48 17% -Triglycerides 45 13% Weber Human Services also reports total number of hours dedicated to services: Evaluation 216, Nursing Service 450, Care Coordination 5,015, Peer Support 17.	720,400
	Electronic Health Record	106,000	Improve state data submission accuracy rate from 50% to 90% Decrease annual HER operating costs from \$172,000 to \$57,000	Utah County Substance Abuse has successfully implemented software starting July 1, 2015. The software current reports 97.1% accuracy rate fiscal year-to-date (only 5 of 170 records submitted were rejected). The FY budgeted operating cost for the new system is \$80,000.	106,000
	Alliance House	120,000	Increase employment of CU members by 25%	Measures of success include total number and percentage of members employed, number of hours of psychoeducational and social skills services provided, and reduction in inpatient hospitalizations as measured by direct report and number of outreaches to clients. The target is to serve all individuals that request/need/qualify for services. Members are employed in transitional, supported and independent positions. This program has been very effective providing 64,626.5 hours of psychoeducational and social supports and reducing psychiatric hospitalizations to 24 over the last 6 months. Employment of CU members increased by 39% in FY15.	120,000
	Wait List	1,000,000	Percent of people who are satisfied with their staff, support coordinator, and fiscal agent	% of people who are satisfied with their staff: 83.3% % of people who are satisfied with their support coordinator: 94.9% % of people who are satisfied with their fiscal agent: 93.4%	1,008,900
	Mandated Additional Needs	1,048,800	Percent of people who are satisfied with their staff, support coordinator, and fiscal agent	% of people who are satisfied with their staff: 83.3% % of people who are satisfied with their support coordinator: 94.9% % of people who are satisfied with their fiscal agent: 93.4%	1,444,200
Youth Aging Out	455,200	Percent of people who are satisfied with their staff, support coordinator, and fiscal agent	% of people who are satisfied with their staff: 83.3% % of people who are satisfied with their support coordinator: 94.9% % of people who are satisfied with their fiscal agent: 93.4%	521,100	
Respite Care	330,200	Percent of individuals who indicated an improvement in overall quality of life based on a survey of individuals receiving one-time respite services.	Satisfaction with overall quality of life increased by 24.5% from 52.32% to 76.82% after receiving short-term limited respite services.	893,400	
Transportation	335,100	Percent/dollar amount rate increase for transportation service.	The one-time increase was added to the general 10.5% increase in April 2015 (resulting in an 11% rate increase)	393,300	
Best Buddies	40,000	Match a minimum of 260 students with Intellectual and Developmental Disabilities in a one to one friendship with non-disabled peers by June 30, 2015.	370 students with Intellectual and Developmental Disabilities were matched in one to one friendship with non-disabled peers as of 6/30/15	40,000	
ORS	Food Stamp Study	70,000	Study completed and submitted to Office of LFA by September 1, 2014.	Food Stamp Study was completed September 2014 and findings were presented to the Social Services Appropriations Subcommittee during the interim sessions.	50,000
DCFS	Domestic Violence Shelters	693,500	Number of shelter nights	92,912 shelter days reported.	693,500
	MH Service Rates	559,600	Did children in foster care receive mental health assessments in required time frames (SAFE measure) is the child making reasonable progress toward stable and adequate functioning emotionally and behaviorally, at home and at school?	85% of children in foster care had a mental health assessment completed on time. Jan 2015 - July 2015 Weber County 782.5 hours serving 148 clients. Cache and Box Elder counties - 321.5 hours and 39 clients. **	570,100
	Grant Families	600,000	Improvement in observed and reported behavior and education	The mortgage will be paid in full allowing freed up resources to serve children and families. Build a 1,837 sq ft addition to serve as a crisis/respite nursery.	200,000
	Hyrum Comm Center	150,000	More than 300 families will be served in 1 year.	Building has been completed and center is providing services.	150,000
	Garland Resource Center	104,000	Families will have increased access to services, education, health, and life skills	Remodel of Garland building is finished. The center is providing services.	104,000
GFR Children's Account	50,000	Number of presentations	Served 67 children (22 with disabilities), 80 adults, and 56 families that did not designate as either child or adult. Does not duplicate individuals reported.	56,200	
DCFS RRF	750,000	Improved access to formal and informational supports with the assistance of the Navigators (Access to educational supports, connecting with informal family and non-family supports, mental health, etc.)	Higher Education Navigators referred a total of 27 clients for FY 2015.	36,500	
DAAS	Nutrition	150,000	Number of clients served & number of meals served	The NARS report is not due for completion until Jan. 2016, estimates project 19,521 meals served to an additional 338 additional clients.	150,000