MENTAL HEALTH BLOCK GRANT

RSN Name:	North Sound	Behavioral F	lealth Organizatio	Date of Report:						
Contract Number:					For Month of :					
Category/Sub Category	<u>Current</u>	<u>Current</u>	YTD Undup. #	Total for Adults with	Total for Children	Non-Direct Service	A19 Total	Notes/Comments		
	<u>Month</u>	Month # of	<u>Served</u>	<u>a SMI</u>	with a SED	<u>Activities</u>				
	Undup. #	Svs.								
Prevention & Wellness - Costs associated with activities th	Served	Provided the ability of	communities to e	ffectively provide men	al health prevention					
Prevention & Wellness - Costs associated with activities that enhance the ability of communities to effectively provide mental health prevention and wellness services:										
Screening, Brief Intervention and Referral to Treatment (SBIRT)							-			
Brief Motivational Interviewing							-			
Parent Training							-			
Facilitated Referral							-			
Relapse Prevention/Wellness Recovery Support							-			
Warm Line							-			
Sub Total	0	0	0	-	-	-	-			
Engagement Services - Costs associated with providing eventheir families to engage in mental health services:	aluations, as	sessments, a	nd outreach to as	sist persons with menta	al health issues, and					
Assessment							-			
Specialized Evaluations(Psychological and Neurological)							-			
Service Planning (including crisis planning)							-			
Consumer/Family Education							-			
Outreach							-			
Sub Total	0	0	0	-	-	-	-			
Outpatient Services - Costs associated with providing outp	atient thera	py services fo	or persons with m	ental health issues:						
Individual Evidenced Based Therapies							-			
Group Therapy							-			
Family Therapy							-			
Multi-Family Counseling Therapy							-			
Consultation to Caregivers							-			
Sub Total	0	0	0	-	-	-	-			
Medication Services - Costs associated with providing medication and related laboratory services for persons with mental illness:										
Medication Management							-			
Pharmacotherapy (including MAT, Medication-Assisted Treatment)							-			
Laboratory Services							-			
Sub Total	0	0	n	_	_	-	-			
Community Support Services - Costs associated with the p	rovision of c	•	ased programs tha	at enhance independen	t functioning for					
persons with mental health issues:		,	,		, and the second					
Parent/Caregiver Support							-			

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	Month	Month # of	<u>Served</u>	<u>a SMI</u>	with a SED	<u>Activities</u>				
	Undup.#	Svs.								
	Served	Provided								
Skill Building (social, daily living, cognitive)							-			
Case Management							-			
Continuing Care							-			
Behavior Management							-			
Supported Employment							-			
Permanent Supported Housing							-			
Recovery Housing							-			
Therapeutic Mentoring							-			
Traditional Healing Services							-			
Sub Total	0	0	0	-	-	-	-			
Recovery Support Services - Costs associated with the de persons with mental health issues to live a self-directed I				s that focus on improvi	ng the ability of					
Peer Support							-			
Recovery Support Coaching							-			
Recovery Support Center Services							_			
Supports for Self Directed Care							_			
Sub Total	0	0	0	_	_	_	_			
Other Supports - Costs associated with providing unique services for persons with mental health issues:										
Personal Care							-			
Respite							-			
Supported Education							-			
Transportation							-			
Assisted Living Services							-			
Recreational Services							-			
Trained Behavioral Health Interpreters							-			
Interactive Communication Technology Devices							-			
Sub Total	0	0	0	-	_ =	_	-			
Intensive Support Services - Costs associated with provid	ing intensive,	therapeutic,	coordinated and	structured support serv	vices to help stabilize			•		
and support persons with mental illness:										
Partial Hospital							-			
Assertive Community Treatment							-			
Intensive Home Based Services							-			
Multi-systemic Therapy							-			
Intensive Case Management							-			
Sub Total	0	0	0	-	-	-	-			

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	Month	Month # of		a SMI	with a SED	Activities		
	Undup. #	Svs.		·				
	Served	Provided						
Out of Home Residential Services - Costs associated with providing out of home stabilization and/or residential services in a safe and stable								
environment for persons with mental health issues:								
Crisis Residential/Stabilization							-	
Adult Mental Health Residential							-	
Children's Residential Mental Health Services							-	
Therapeutic Foster Care							-	
Sub Total	0	0	0	-	-	-	-	
Acute Intensive Services - Costs associated with providing acute intensive services requiring immediate intervention for persons with apparent								
mental health issues:								
Mobile Crisis							-	
Peer Based Crisis Services							-	
Urgent Care							-	
23 Hr. Observation Bed							-	
24/7 Crisis Hotline Services		_					-	
Sub Total	0	0	0	-	-	-	-	
Grand total	0	0	0	-	-	-	-	