



**FY08**  
**Third Quarter Report to the Area Board**

**June 5, 2008**

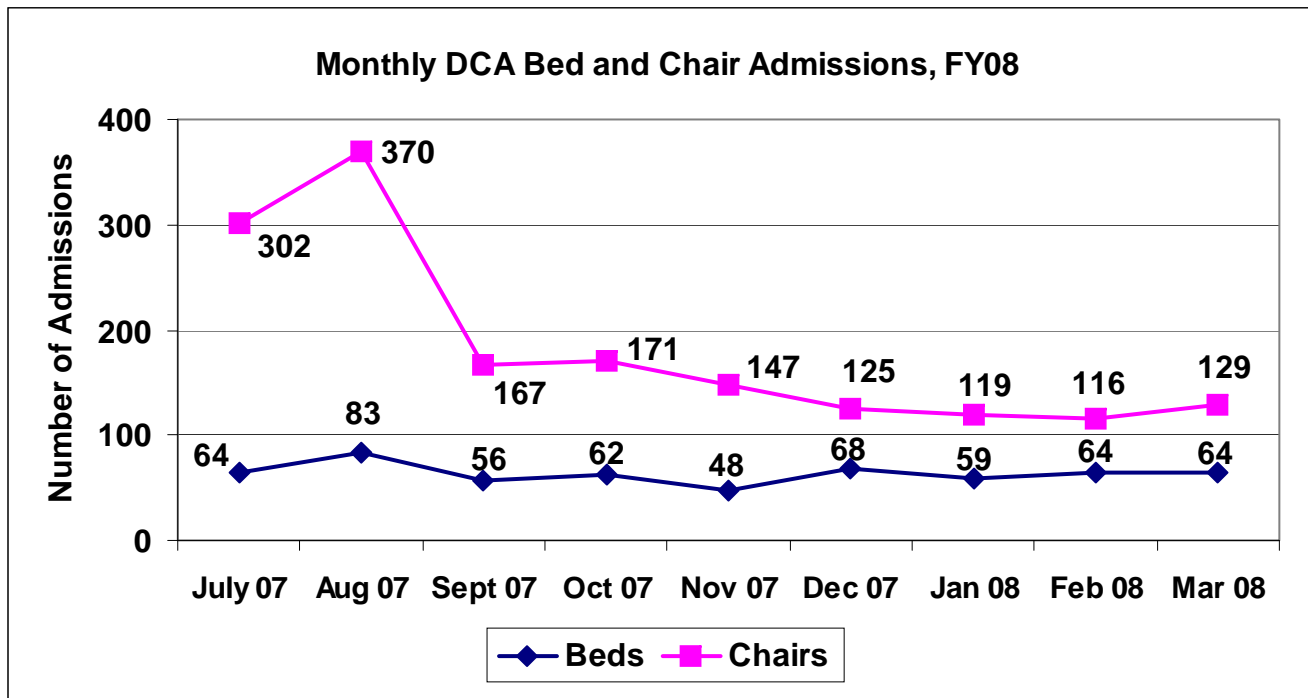
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## DURHAM CENTER ACCESS

### DCA Admissions

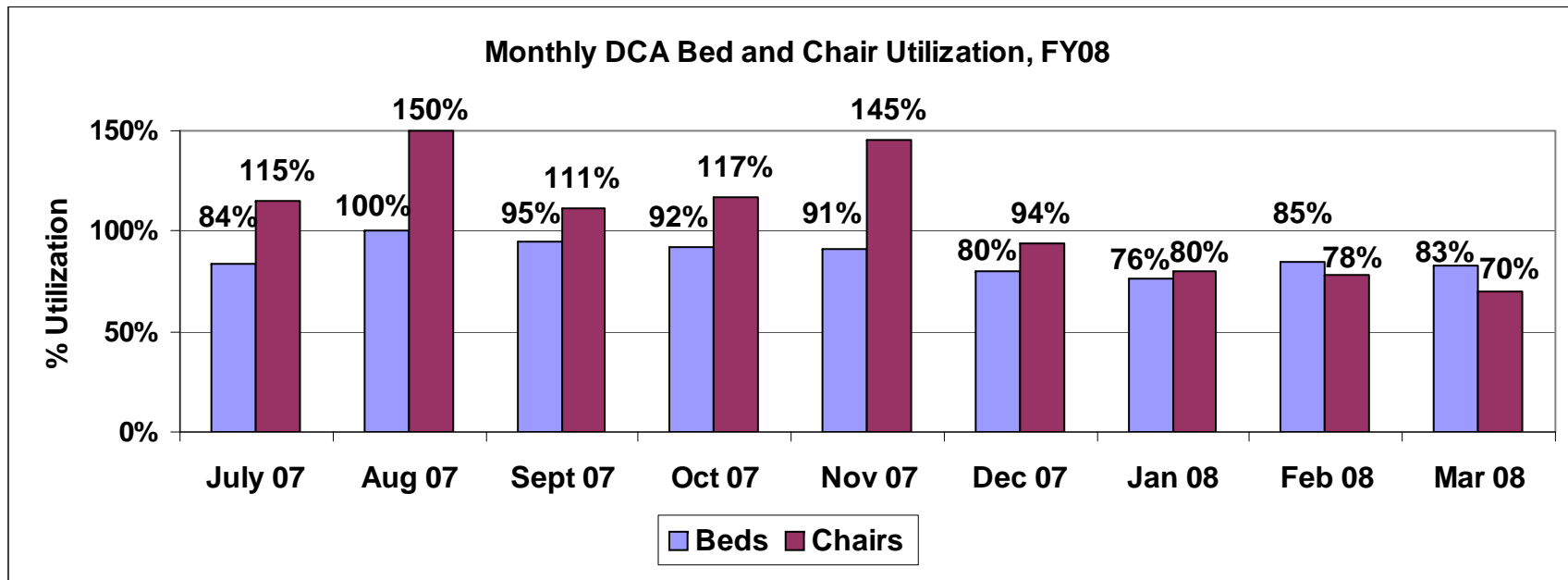
Comparing third quarter to second quarter of FY08, there has been a 5% increase in the monthly average of bed admissions and a 18% decrease in chair admissions. Due to the high number of repeated chair admissions by the same individuals, the criteria for using the chairs was revised in December to include clearer and more measurable behavioral indicators. The number of admissions to the CEO services was higher during the second quarter compared to the third quarter. The low number of individuals being served allowed the staff to work with them more intensely to decrease the amount of time required to develop a comprehensive discharge plan. The quantity of services increased which resulted in less time needed for stabilization.



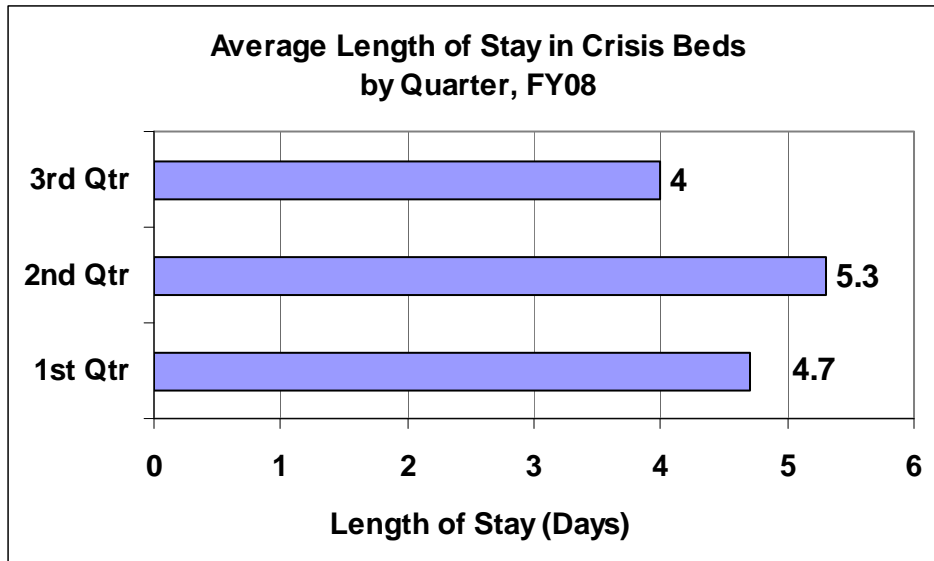
## DURHAM CENTER ACCESS

### DCA Utilization

Comparing third quarter to second quarter of FY08, there has been a 8% overall decrease in monthly utilization of beds and 36% overall decrease for chairs. We have begun to see a utilization rate less than 100%, possibly due to a December revision of utilization criteria for the Crisis Evaluation Observation (CEO) services. The clearer clinical criteria helped community clinicians make better decisions about triage level, i.e., emergent needing CEO versus urgent with community referral. As a result, there were more individuals seeking services for “true” crises related to MH/DD/SA. There were fewer individuals receiving services for high risk factors, such as: significant environmental risks (homelessness, lack of income, inadequate nutrition, dangerous living environment, etc.). Individuals with significant environmental risks may take more time to develop a comprehensive discharge plan.

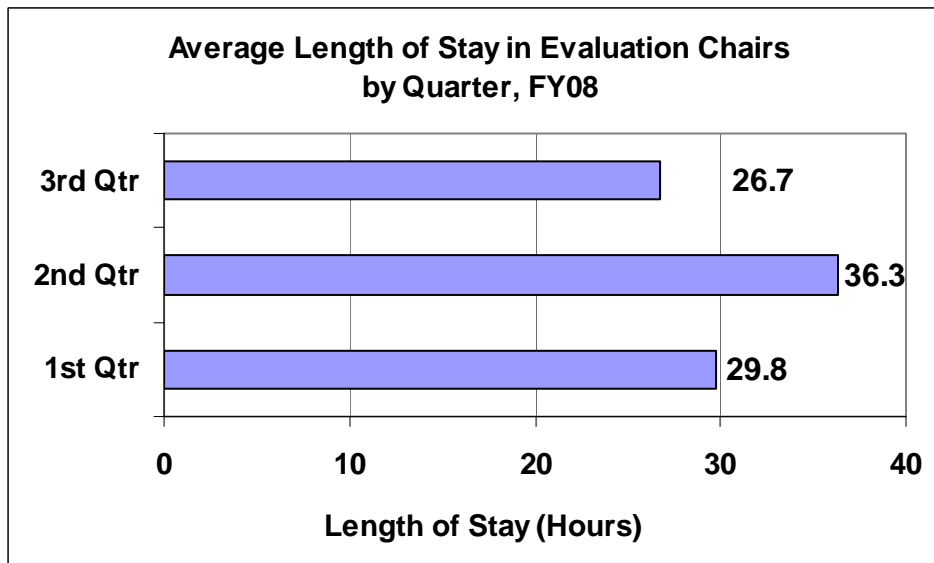


## DURHAM CENTER ACCESS



### Length of Stay at DCA

The adjacent graphs show the average length of stay in beds is approximately four to five days, and the average length of stay in evaluation chairs is approximately 31 hours. Between the second and third quarter, there was a decrease in length of stay for beds and chairs. The increased focus on utilization criteria has also impacted weekly staff discussions regarding barriers that may contribute to longer stays.



In January, for example, the facility use guidelines were examined and revised to ensure individuals were not provided with an environment that encouraged a longer length of stay (i.e. the lobby area used was restricted to a waiting area only, and individuals were no longer allowed to fall asleep or lay down in the area).

## DURHAM CENTER ACCESS

Chair admissions to Durham Center Access (DCA) are either voluntary or involuntary (i.e. through a petition). If the consumer's status changes to voluntary as a result of stabilization while in the chair then a successful hospital diversion has occurred. The table below shows the disposition of involuntary petitions requesting authorization for hospitalization from DCA thus far in FY08. All consumers with community-initiated petitions were evaluated at DCA and a 65% were diverted from state hospitalization, continuing an increasing trend throughout FY08. A greater number of consumers with hospital-initiated petitions were diverted from state hospitalization than the previous two quarters. Overall, nearly one-quarter of individuals with involuntary petitions were diverted from state hospitalization to local resources.

<b>Disposition of Involuntary Petitions Requesting Authorization for Hospitalization from DCA</b>									
Petitioner	# (%) Petitions by Type			# Evaluated at DCA			# (%) Diverted from State Hospitalization		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
Duke Hospital	193	195	165	3	0	0	2	5	11
UNC, VA Hospitals	30	8	20	0	0	0	0	0	0
Durham Regional Hospital	16	23	19	1	0	0	0	0	0
Other Hospital	4	4	1	0	0	0	1	1	0
State Hospitals	21	41	26	1	0	0	1	2	0
<b>Petitions from Hospitals</b>	<b>264 (68%)</b>	<b>271 (78%)</b>	<b>231 (70%)</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>4 (2%)</b>	<b>8 (3%)</b>	<b>11 (5%)</b>
Family/Friend	72	52	68	49	52	68	41	34	45
Provider	21	18	17	10	11	17	11	9	6
Group Home	14	4	13	9	4	13	9	1	12
Other	15	4	3	5	4	3	9	2	3
<b>Petitions from Community</b>	<b>122 (32%)</b>	<b>78 (22%)</b>	<b>101 (30%)</b>	<b>73</b>	<b>71</b>	<b>63</b>	<b>70 (57%)</b>	<b>46 (59%)</b>	<b>66 (65%)</b>
<b>Totals</b>	<b>386</b>	<b>349</b>	<b>332</b>	<b>78</b>	<b>71</b>	<b>63</b>	<b>74 (19%)</b>	<b>54 (15%)</b>	<b>77 (23%)</b>

## SCREENING, TRIAGE AND REFERRAL

Consumers can call the Screening/Triage/Referral line at The Durham Center during business hours and Durham Center Access after hours to be screened for services. If it is determined that the care needed is routine, an appointment is to be made with a provider agency within fourteen calendar days (increased by seven days between second and third quarter). If care needs are urgent, the consumer is to be seen within 48 hours. If care needs are emergent, the consumer is to be assessed within two hours at Durham Center Access.

Thus far in FY08, all emergent requests were handled through Durham Center Access with 100% timeliness in service availability. The timeliness of Urgent appointments continues to move toward 95%, and the timeliness of Routine appointments has also increased. For Routine appointments, the increase in the timeliness standard from seven to fourteen calendar days is a major contributor to the higher percentage of timely appointments offered. These figures are shown below.

	Emergent			Urgent			Routine		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
# Consumers Offered Timely Appointments (% of Total)	546 (100%)	487 (100%)	372 (100%)	139 (91%)	231 (94%)	191 (94%)	961 (89%)	971 (81%)	878 (98%)
<b>Total # of Requests</b>	<b>546</b>	<b>487</b>	<b>372</b>	<b>153</b>	<b>247</b>	<b>204</b>	<b>1,081</b>	<b>1,205</b>	<b>892</b>

The table below indicates the number of individuals with timely appointments who did not show because they either missed the appointment or rescheduled. The percentage of no shows for Urgent appointments has decreased over the past three quarters, impacted by increased efforts by providers of Urgent services to engage consumers as quickly as possible.

	Urgent			Routine		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
<b>Total No Shows</b>	<b>62</b>	<b>77</b>	<b>49</b>	<b>259</b>	<b>296</b>	<b>216</b>
<i>% No Shows</i>	<i>45%</i>	<i>33%</i>	<i>26%</i>	<i>27%</i>	<i>30%</i>	<i>25%</i>
Missed Appointment	57	74	47	188	242	161
Rescheduled Appointment	5	3	2	71	54	55

## SCREENING, TRIAGE AND REFERRAL

<b>Timeliness of Appointments to Meet Routine and Urgent Needs by Quarter, FY08</b>						
<b>Provider</b>	<b>Routine: % Timely Appointments</b>			<b>Urgent: % Timely Appointments</b>		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
Advantage Care In Home Services	92%	100%	100%	NA	NA	NA
Alpha Management Comm Services	100%	NA	*	NA	NA	NA
Alternative Care Treatment Services	92%	96%	97%	NA	NA	NA
The Arc of North Carolina	74%	82%	100%	NA	NA	NA
ASAP / Easter Seals UCP	81%	56%	96%	*	NA	NA
B & D Behavioral Health Services	81%	100%	100%	*	NA	NA
BAART Behavioral Health Services	NA	NA	NA	*	92%	82%
Boys to Gentlemen Residential Svcs	*	100%	100%	NA	NA	NA
Britton & Crump	*	*	*	NA	NA	NA
Caring Family Network	*	*	100%	NA	NA	NA
Carolina Outreach	100%	100%	100%	NA	NA	NA
Center for Child & Family Health	*	*	100%	NA	NA	NA
Community Partnerships	*	*	100%	NA	NA	NA
Comprehensive Community Care	50%	*	*	NA	NA	NA
Covenant Community Partners	92%	100%	*	NA	NA	NA
Dominion Healthcare Services	100%	88%	100%	NA	NA	NA
Dominion Ministries	100%	100%	91%	NA	*	*
Duke Family Care Program	*	*	NA	NA	*	*
El Futuro	NA	*	80%	NA	NA	NA
Family and Youth Services	90%	100%	*	NA	NA	NA
Family Connections	95%	100%	*	NA	NA	NA
Family Preservation Services	85%	90%	*	NA	NA	NA

\* = Percentages only shown when 10 or more appointments were made with a provider during the quarter.

## SCREENING, TRIAGE AND REFERRAL

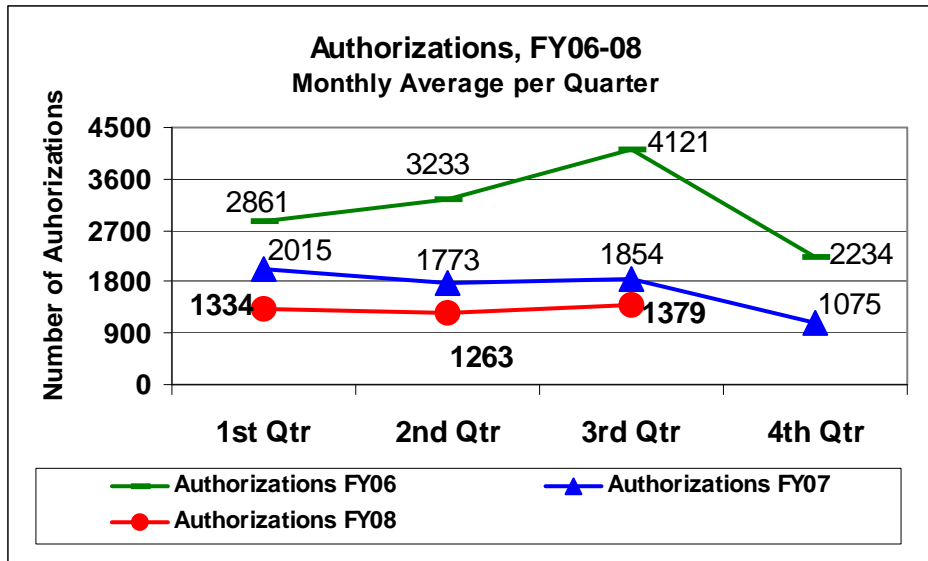
<b>Timeliness of Appointments to Meet Routine and Urgent Needs by Quarter, FY08</b>						
<b>Provider</b>	<b>Routine: % Timely Appointments</b>			<b>Urgent: % Timely Appointments</b>		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
Family Quality Care Services	*	*	*	NA	NA	NA
Fonseca's Family Services	90%	*	*	NA	NA	*
Healing with CAARE	100%	91%	*	47%	70%	64%
HealthCore Resources	*	80%	*	NA	NA	NA
House of Care	*	*	*	NA	NA	NA
Innovative Programming Associates	100%	100%	100%	NA	NA	NA
Joyland Homes	95%	*	100%	NA	NA	NA
Life Enhancement Services	92%	98%	100%	NA	NA	NA
Life Foundations	100%	100%	*	NA	NA	*
Life Skills Counseling	100%	100%	100%	NA	NA	NA
Living Well Centre	*	94%	*	NA	NA	*
Matchbox Health Services	86%	80%	100%	NA	NA	NA
Melange Health Solutions	*	*	*	NA	NA	NA
Nature's Reflections	87%	*	100%	NA	NA	NA
Omega Independent Services	*	*	*	NA	NA	NA
Professional Group Living	*	100%	100%	NA	NA	NA
Reaching Your Goals Foundation	100%	100%	*	NA	NA	NA
Right Direction	90%	84%	100%	NA	NA	*
SA Assessor	NA	NA	NA	100%	100%	100%
SRFC	80%	100%	95%	NA	NA	NA
Structured Family Interventions	*	100%	*	NA	NA	NA
The Aya Center	*	*	*	NA	NA	NA

*\* = Percentages only shown when 10 or more appointments were made with a provider during the quarter.*

## SCREENING, TRIAGE AND REFERRAL

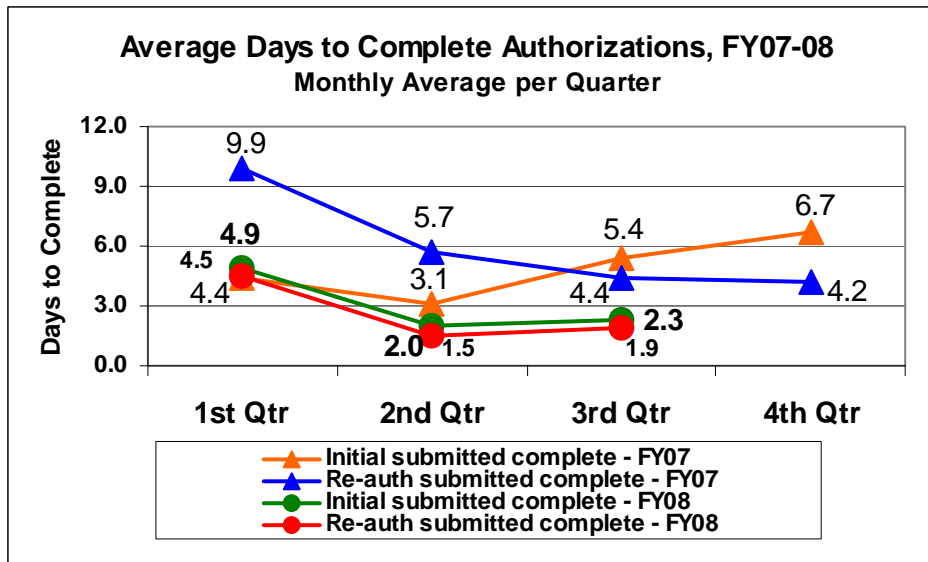
<b>Timeliness of Appointments to Meet Routine and Urgent Needs by Quarter, FY08</b>						
<b>Provider</b>	<b>Routine: % Timely Appointments</b>			<b>Urgent: % Timely Appointments</b>		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
Top Priority Care Services	*	100%	*	NA	NA	NA
Towergate Youth & Family Services	83%	100%	*	NA	NA	NA
Triangle Residential Services	*	*	*	NA	NA	NA
Triumph	69%	62%	99%	*	*	*
Turning Point Adolescent Center	97%	100%	100%	NA	NA	*
Wellness Solutions	NA	*	*	NA	NA	NA
Your Choice Health Services	*	*	*	NA	NA	NA
Youth Villages	*	*	*	NA	NA	NA
<i>* = Percentages only shown when 10 or more appointments were made with a provider during the quarter.</i>						

## SERVICE MANAGEMENT



### Authorizations

- Between the second and third quarter of FY08, there was a 9% increase in the monthly average for the number of authorizations completed.
- The overall drop in the average number of authorizations during FY08, when compared to FY07, can be linked to the policy change of allowing an increased authorization time from 12 weeks to 6 months per authorization.



### Days to Complete Authorizations

- The service authorization process can not be completed without the submission of appropriate documentation by providers.
- Between the second and third quarter of FY08, there was a 15% increase in the amount of time taken to complete the initial authorization process and 27% increase for re-authorizations.
- Compared to FY07, these completion rates have improved by over 50%.

## PROVIDER CAPACITY

### Needs Assessment Follow-Up: Provider Capacity Survey

Conducted in March 2008, this survey's purpose was to gather more detailed information from providers about their resources and capacity to be incorporated in strategic planning. All state or locally-funded providers affiliated with The Durham Center and all Medicaid providers with endorsed sites in Durham County were requested to complete the web-based survey. Of the 112 contracted providers with sites in Durham, 74 (66%) responded to at least one section of this survey. Below is a summary of the survey's results, along with a synopsis of providers' comments.

- ◆ The table below shows the variety of languages spoken across staff at provider agencies, and the number and type of staff with that ability.

Language	M.D.	Li-censed Staff	Q.P.	A.P.	Other Staff
Spanish	1	12	25	21	32
American Sign Language	1	1	4	6	10
Other Language	1	3	8	4	9

*Other languages include: Chichewa, Dutch, French (2 providers), Indian Dialect, Kikuyu, Korean (2 providers), Portuguese (2 providers), Serbian, Swahili, and Tshibula.*

- ◆ 10 agencies reported that they offer culturally specific programming. In addition to specialized programs focused on the Hispanic and African-American populations, agencies indicated plans to provide more general training in cultural competence.
- ◆ During the past year:
  - 31 agencies indicated that they had developed new programs or services
  - 26 have increased current capacity
  - 9 have reduced program or service capacity
 (Further details on program/service additions and reductions are available on the next page.)
- ◆ In the past two years, 37 agencies had responded to a Request for Information and/or Request for Proposal.

## PROVIDER CAPACITY

*Programs or services developed or expanded in past year:*

### **Mental Health**

- 6 - Community Support Team/Adult
- 4 - Outpatient Therapy
- 3 - Medication Management
- 2 - Wellness Management and Recovery
- 1 - Anger Management and C.A.L.M. Groups
- 1 - Supported Living Apartments
- 1 - PATH peer outreach

### **Developmental Disabilities**

- 2 - Developmental Therapy
- 2 - CAP/MR-DD
- 1 - Personal Care
- 1 - Case Management

### **Child-Focused**

- 3 - Level II Foster Care
- 2 - Intensive In-Home
- 1 - Transitional Independent Living Ages 16-21
- 1 - Therapeutic Foster Care
- 1 - Multi-Systemic Therapy
- 1 - Child and Adolescent Day Treatment
- 1 - Community Support - Child

### **Substance Abuse**

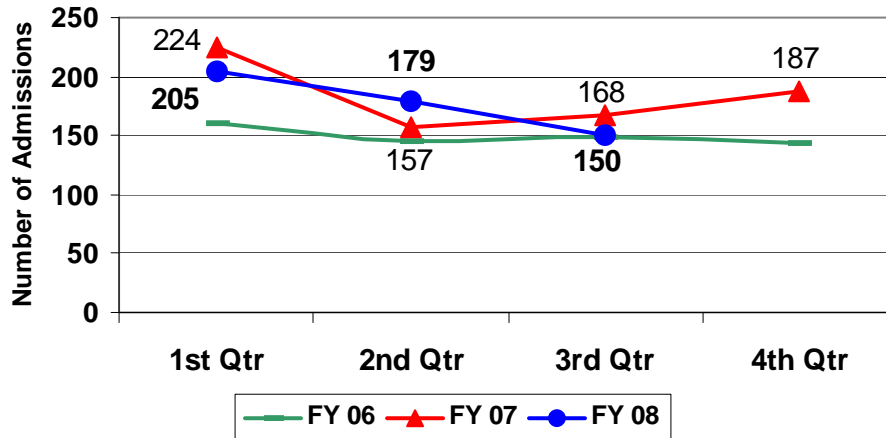
- 1 - Intensive Outpatient Program - Youth
- 1 - Brief Intervention
- 1 - Recovery Clubhouse and Health & Wellness Center
- 1 - Dual Diagnosis Intensive Outpatient Program

*Programs or services reduced or eliminated in past year:*

- 5 - Community Support
- 1 - Group home
- 1 - Level III Residential
- 1 - CAP/MR-DD
- 1 - Intensive-In-Home

# JOHN UMSTEAD HOSPITAL

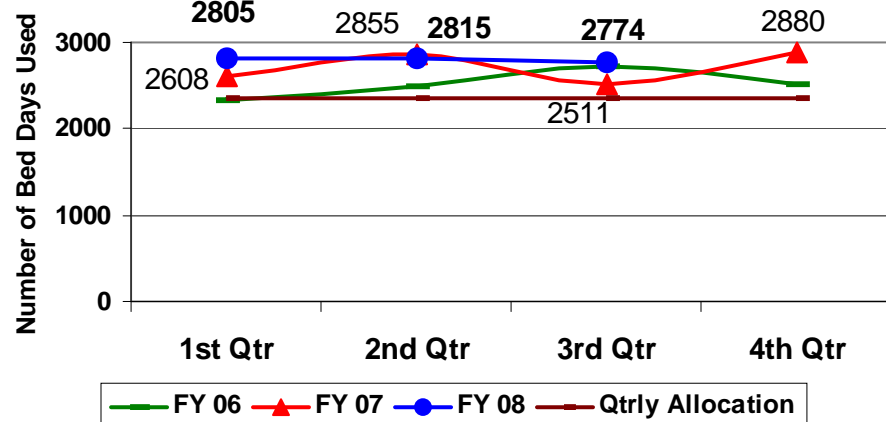
**Adult Psychiatric Admissions by Quarter, FY06-FY08**



## JUH Adult Admissions

- ◆ The number of admissions during third quarter of FY08 was 16% lower than the second quarter. During the same period in FY07, there was a 7% increase.
- ◆ Third quarter admissions in FY08 were lower (~11%) than the number of admissions during the same period in FY07.

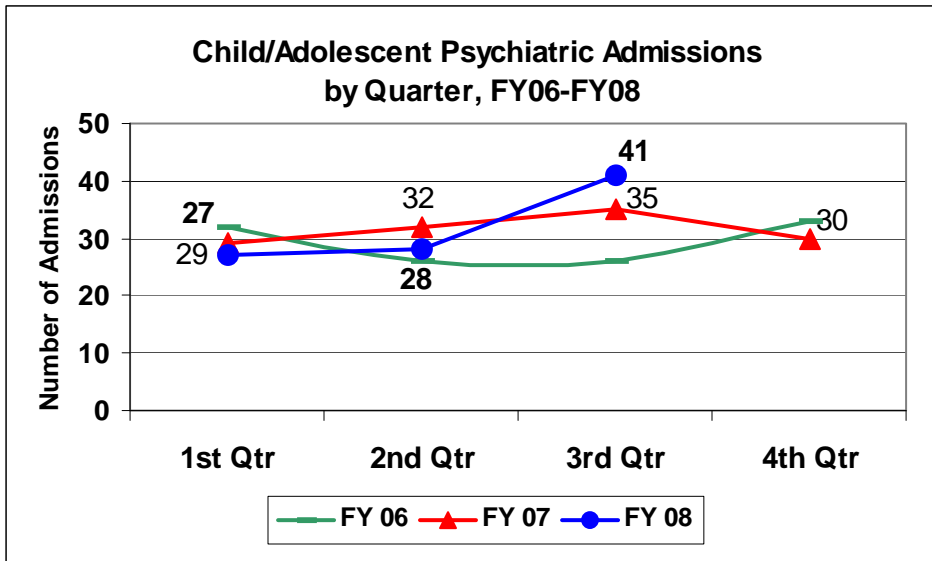
**Adult Psychiatric Bed Days Used by Quarter, FY06-FY08**



## JUH Adult Bed Utilization

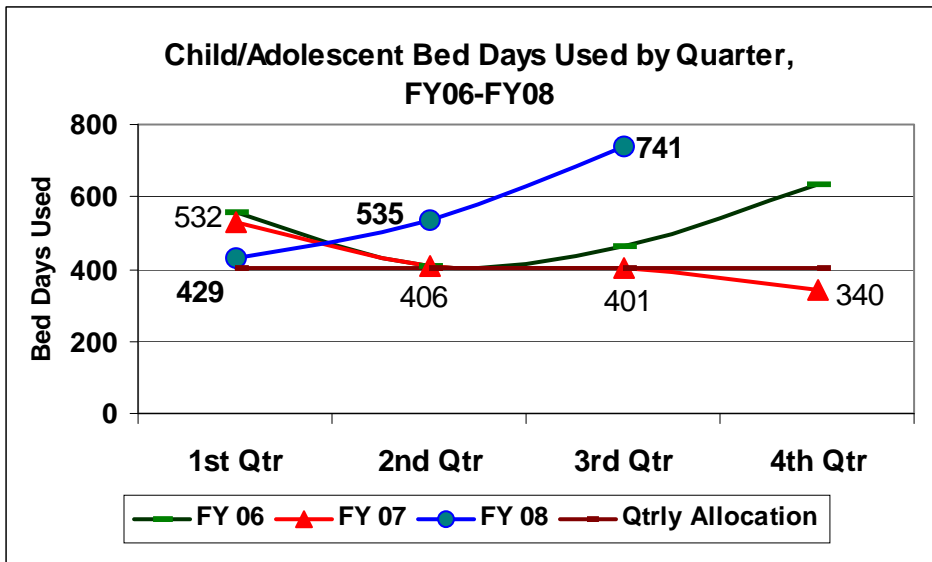
- ◆ Bed utilization for the third quarter of FY08 was 1% lower than the second quarter. Third quarter bed utilization in FY08 was 10% higher than bed utilization during the same period in FY07.
- ◆ Quarterly bed day allocation has been decreased by 31% from 3,406 bed days in FY07 to 2,351 bed days in FY08.

# JOHN UMSTEAD HOSPITAL



## JUH Child/Adolescent Admissions

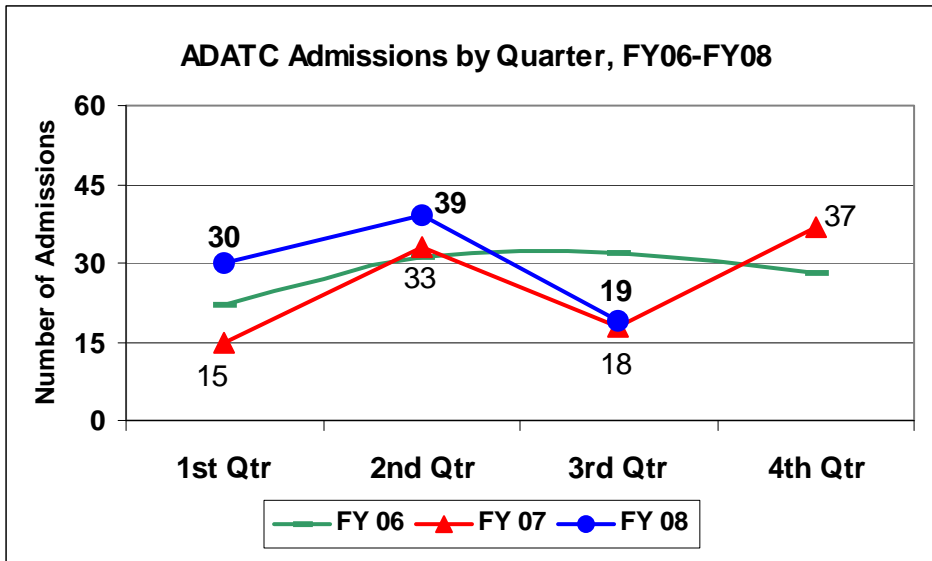
- ◆ The number of admissions third quarter of FY08 was 46% higher than second quarter. During the same period in FY07, there was a slight increase (10%) in number of admissions.
- ◆ Third quarter admissions in FY08 were higher (17%) than the number of admissions during the same period in FY07.



## JUH Child/Adolescent Bed Utilization

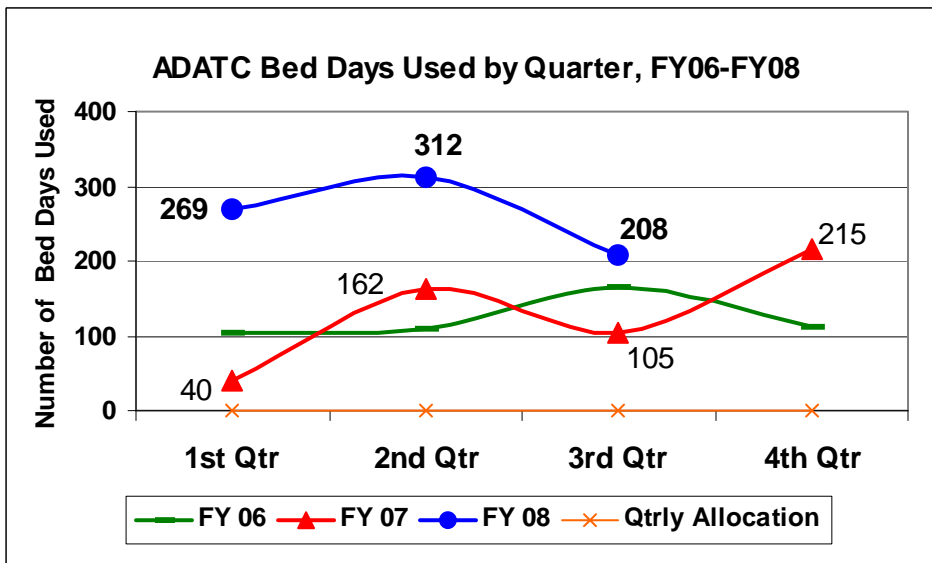
- ◆ Bed utilization for the third quarter of FY08 was 39% higher than the second quarter.
- ◆ Third quarter bed utilization in FY08 was 85% higher than bed utilization during the same period in FY07.
- ◆ Due to the change in the number of children who can be in a Therapeutic Foster Home, Rapid Response bed capacity has been cut in half since January; this factor impacts utilization and admissions.

# JOHN UMSTEAD HOSPITAL



## Alcohol & Drug Abuse Treatment Center Admissions

- ◆ The number of admissions for the third quarter of FY08 was 51% lower than the second quarter. This increase is a comparable trend to what happened during the same period in FY07.
- ◆ Third quarter admissions in FY08 were comparable to the same period in FY07.



## Alcohol & Drug Abuse Treatment Center Utilization

- ◆ Bed utilization for the third quarter of FY08 was 33% lower than the second quarter.
- ◆ Third quarter bed utilization in FY08 was 98% higher than bed utilization during the same period in FY07.
- ◆ The overall increase in utilization means that more individuals are receiving the help they need, and there is no longer a mandated quarterly allocation to impact funding of the facility beds.

## ADULT MENTAL HEALTH

### Evidence-Based Practices

Through qualified providers, The Durham Center is proud to offer several evidence-based practices to consumers with mental health and/or substance abuse needs. Below is a table showing the number of consumers served through each program thus far in FY08.

	1st Qtr	2nd Qtr	3rd Qtr
ASAP—ACT	60	59	54
Telecare—ACT	116	115	116
ASAP—IDDT	55	67	78
WMR	N/A	175	382

(ACT=Assertive Community Treatment; IDDT=Integrated Dual-Disorder Treatment; WMR=Wellness Management & Recovery)

### Durham Center Indigent Pharmacy Program (DCIPP)

The needs of indigent consumers have been addressed through three programs initiated in July, 2006: Gurley's Pharmacy, Sample Assistance and Prescription Assistance.

#### Gurley's Pharmacy

Consumers eligible for the program must be enrolled with The Durham Center, a member of a qualifying target population and ineligible for Medicaid, Medicare or any other third party payment. Below are the number of individuals served at Gurley's thus far in FY08, and the pharmacy costs billed to The Durham Center.

	1st Qtr	2nd Qtr	3rd Qtr
Consumers Served	1029	1047	819
Cost to The Durham Center	\$7,322.70	\$8,077.81	\$13,181.27

## ADULT MENTAL HEALTH

### Sample Assistance Program

The Sample Prescription Assistance Program (PAP) Coordinator assists provider agencies in the management of samples provided by Pharmaceutical Companies. Below is the market value of those samples:

	1st Qtr	2nd Qtr	3rd Qtr
Market Value of Samples	\$192,513.73	\$191,955.46	\$99,556.06

### Prescription Assistance Program

The Sample/PAP Coordinator also collaborates with pharmaceutical representatives and providers to help consumers obtain medications at little or no cost. The table below indicates Prescription Assistance activities thus far in FY08.

	1st Qtr	2nd Qtr	3rd Qtr
New* Consumers Assisted	101	21	19
Medication Requests: New & Re-Orders	206	63	63
<i>Approved Requests</i>	110	17	36
<i>Pending Requests</i>	96	44	27
<i>Denied Requests</i>	0	2	0
Savings to Consumers	\$99,076.94	\$17,029.40	\$33,545.59

\*Medication Access and Review Program (MARP), a new electronic tracking system, was implemented during the first quarter. If there is a prescription assistance program for a medication, it can be found via this weekly updated system and is not just limited to psychiatric medications. The Sample/PAP Coordinator transferred all cases from the old system to the new system at that time, thus showing a larger number of "new" consumers assisted during the first quarter compared to following quarters and also inflating the number of "new" medication

## CHILD MENTAL HEALTH

### Care Review

102 child/adolescent consumers have received Care Review thus far in FY08. See the table for a summary of outcomes.

Quarter	Total	Type of Care Review			Type of Outcome *			
		Residential	Follow up**	Technical Assistance	Diverted	Level 2	Level 3	Level 4
1st Qtr	<b>35</b>	31	2	2	3	14	14	2
2nd Qtr	<b>28</b>	20	4	4	4	10	9	3
3rd Qtr	<b>39</b>	26	5	8	4	18	13	0
<b>Total</b>	<b>102</b>	<b>67</b>	<b>11</b>	<b>14</b>	<b>11</b>	<b>42</b>	<b>36</b>	<b>5</b>

*\*Care Review Teams occasionally recommend multiple levels of care*

*\*\*Follow-Ups recommend continued placement.*

### Child and Family Team

The Child Mental Health Specialist and various Liaisons (i.e., DSS, court and school) attended and observed a total of 142 Child and Family Team (CFT) meetings thus far in FY08. The table below reflects the number of CFTs that were provided technical assistance by the Specialist or Liaisons, which can include helping a provider in the arrangement and planning of the CFT, and attending the meeting to provide information on either the mental health system or whichever system they are linked with (i.e., school, court, DSS).

	CFTs Observed	Technical Assistance
1st Qtr	45	17
2nd Qtr	48	30
3rd Qtr	49	17
<b>Total</b>	<b>142</b>	<b>64 (45%)</b>

## SUBSTANCE ABUSE (Outpatient)

Non-Medicaid Funded Outpatient Substance Abuse Services Summary, by Quarter, FY08															
	Outpatient Programs														
	FHIOP			FHBIP			BAART			DOM			DUKE		
	Q1	Q2	Q3	Q1	Q2	Q3	Q1	Q2	Q3	Q1	Q2	Q3	Q1	Q2	Q3
Being served at beginning of quarter	28	17	20	2	16	24	0	156	190	10	10	14	37	40	38
New referrals this quarter	39	0	0	33	37	29	175	41	13	10	27	6	5	8	8
Began receiving services this quarter	27	22	27	22	24	19	175	74	8	10	2	6	3	5	13
Did not engage in services after referral	10	2	9	8	14	8	0	5	5	0	7	0	4	3	3
<b>Total consumers served</b>	<b>55</b>	<b>39</b>	<b>47</b>	<b>24</b>	<b>40</b>	<b>43</b>	<b>175</b>	<b>230</b>	<b>198</b>	<b>20</b>	<b>12</b>	<b>20</b>	<b>40</b>	<b>45</b>	<b>51</b>
Referred to provider based on assessment	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Transferred other reasons	1	3	1	1	4	0	0	14	4	0	0	0	0	0	1
Completed Service Plan	2	1	8	5	7	15	0	1	5	0	0	0	0	0	1
Left against staff advice	17	15	0	3	2	4	12	16	20	0	0	0	0	0	0
Administrative Discharge	0	0	13	0	0	0	7	6	3	1	0	0	0	0	0
Other	5	0	0	0	3	4	0	9	6	0	0	0	0	0	0
<b>Total consumers discharged</b>	<b>25</b>	<b>19</b>	<b>22</b>	<b>9</b>	<b>16</b>	<b>23</b>	<b>19</b>	<b>46</b>	<b>38</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>
<b>Length of Care- Discharged Consumers</b>															
1 month or less	5	6	3	3	1	3	13	21	9	0	0	0	0	0	0
>1 month and up to 3 months	15	9	10	6	14	10	6	25	12	1	0	0	0	0	0
>3 months and up to 6 months	3	4	8	0	1	10	0	0	15	0	0	0	0	0	0
>6 months and up to 12 months	2	0	1	0	0	0	0	0	2	0	0	0	0	0	0
>12 months and up to 18 months	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
>18 months	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2

FHIOP=Freedom House Intensive Outpatient Program    FHBIP=Freedom House Brief Intervention Program  
 BAART=BAART Community Healthcare    DOM=Dominion Ministries    DUKE=Duke Family Care Program    DUKE=Duke Family Care Program

## SUBSTANCE ABUSE (Residential)

Non-Medicaid Funded Residential Substance Abuse Services Summary, by Quarter, FY08															
	Residential Programs														
	CC			FDMHM			FHWH			FHTLF			RCD		
	Q1	Q2	Q3	Q1	Q2	Q3	Q1	Q2	Q3	Q1	Q2	Q3	Q1	Q2	Q3
Being served at beginning of quarter	6	6	12	6	6	6	8	9	9	3	6	5	6	6	6
Began receiving services this quarter	1	3	2	2	5	2	10	8	6	27	23	23	6	12	3
<b>Total consumers served</b>	<b>7</b>	<b>9</b>	<b>14</b>	<b>8</b>	<b>11</b>	<b>8</b>	<b>18</b>	<b>17</b>	<b>15</b>	<b>30</b>	<b>29</b>	<b>28</b>	<b>12</b>	<b>18</b>	<b>9</b>
Completed Service Plan	0	3	2	2	3	2	4	2	5	14	19	17	5	1	4
Left against staff advice	1	0	0	0	0	0	1	2	0	4	3	6	1	1	0
Administrative Discharge	0	0	0	0	1	0	3	1	0	3	1	0	0	0	1
Other	0	0	0	0	1	0	0	3	0	3	0	0	2	7	0
<b>Total consumers discharged</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>5</b>	<b>2</b>	<b>8</b>	<b>8</b>	<b>5</b>	<b>24</b>	<b>23</b>	<b>23</b>	<b>8</b>	<b>9</b>	<b>5</b>
<b>Length of Care for Discharged Consumers</b>															
1-7 days	0	0	0	0	1	0	1	1	0	7	2	2	1	2	0
8-14 days	0	0	0	0	0	0	0	1	0	5	6	4	0	1	0
15-30 days	0	0	0	0	0	0	0	2	0	12	10	17	0	3	0
31-60 days	0	0	0	0	0	0	0	1	0	0	4	0	0	1	0
61-90 days	0	1	0	0	0	0	2	1	0	0	1	0	2	1	0
91-120 days	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
121-150 days	0	0	0	0	1	0	1	0	0	0	0	0	5	0	1
Beyond 5 months	1	2	2	2	3	2	4	2	4	0	0	0	0	1	4

CC=Community Choices Inc Cascade at Durham FHTLF=Freedom House Transitional Living Facility  
 FHDMHM=Freedom House Durham Men's House RCD=Recovery Center of Durham FHWH=Freedom House Francis St. Women's Halfway House

## SUBSTANCE ABUSE

The Durham Center employs two full time substance abuse assessors who are located at Durham Center Access to provide prompt access to substance abuse assessments. A summary of the Assessments completed thus far in FY08. Those completing assessments are then referred to the appropriate treatment agency through Screening, Triage and Referral at The Durham Center.

	Appointments	Individuals	Assessments	No-shows	Show rate	No-show rate
First Quarter	216	190	118	98	62%	38%
Second Quarter	182	172	112	60	62%	38%
Third Quarter	142	123	94	48	66%	34%

Referral Source			
Q1	Q2	Q3	Type
73	38	37	Self or no referral
10	19	8	Family or friends
49	46	15	Other outpatient & residential non-state facility
40	24	22	State Facility
13	6	3	Psychiatric service, General hospital
0	1	4	Non-residential treatment/habilitation program
0	1	1	Private physician
2	2	5	Other health care
15	25	12	Community agency
12	18	8	Court, corrections, prisons
1	1	0	Schools
1	1	27	Other
<b>216</b>	<b>182</b>	<b>142</b>	<b>Total</b>

Referrals Out			
Q1	Q2	Q3	Type
4	1	2	ASAP's IDDT
0	0	0	ASAP's TRANSA-CTT
38	7	17	DCA's Brief Intervention
37	20	29	DCA's SA IOP
1	3	5	Duke Family Care Program
4	0	2	Durham Center Access
4	1	1	Durham Vet Admin
4	17	21	Free Community Resources
0	0	0	Hospital ER
3	20	10	MH Provider
2	0	0	Private insurance provider
1	5	10	STR for Medicaid Referral
3	1	4	TROSA
7	0	0	Wait-list DCA's Brief Intervention
5	13	0	Wait-list DCA's SA IOP
5	90	106	Other*
<b>118</b>	<b>178</b>	<b>207</b>	<b>Total</b>

\*Other Referral Out options with 10 or more referrals during the second quarter include Alcoholics' Anonymous, Narcotics' Anonymous, Department of Social Services, Network of Care, Job Link and Vocational Rehabilitation.

## SUBSTANCE ABUSE

Through a Memorandum of Understanding with The Durham Center, the Criminal Justice Resource Center (CJRC) provides screening and evaluation services for Criminal District Court and psychological evaluations for the Department of Social Services and the Department of Juvenile Justice and Delinquency Prevention (DJJDP) as well as substance abuse and mental health screenings for District Court, Criminal Justice, and Social Service programs. CJRC staff is able to access criminal justice and mental health records when making treatment recommendations and also provides forensic screening evaluations for both adult and child populations upon request. In addition, CJRC has staff in the Youth Home and in the Durham County Detention Center to provide consulting, assessment, counseling, and coordination of care services.

	1st Qtr	2nd Qtr	3rd Qtr	TOTAL	%	Total Served
<b>Screening and Evaluation Services</b>						<b>442</b>
Forensic Evaluations	49	30	28	<b>107</b>		
Adult Psychological Evaluations	14	19	13	<b>46</b>		
Substance Abuse Screenings	78	70	51	<b>199</b>		
Multidisciplinary Evaluations	0	1	1	<b>2</b>		
Child Mental Health Assessments	0	0	0	<b>0</b>		
SA Evaluation	11	3	0	<b>14</b>		
<b>Screening Recommendations</b>						
Day Reporting Center (DRC)	9	13	2	<b>24</b>	<b>12%</b>	
Drug Treatment Center (DTC)	0	3	1	<b>4</b>	<b>2%</b>	
Further Assessment	6	0	0	<b>6</b>	<b>3%</b>	
Durham Center (MHC)	0	1	0	<b>1</b>	<b>1%</b>	
No Tx Recommendation	7	3	5	<b>15</b>	<b>8%</b>	
Second Chance (SCP)	28	22	15	<b>65</b>	<b>33%</b>	
TASC for Assessment	24	19	22	<b>65</b>	<b>33%</b>	
<i>Other</i>	4	8	6	<b>18</b>	<b>9%</b>	
<b>DJJDP Services</b>						
Psychological Evaluations	19	26	19	<b>64</b>		
Mental Health Assessments	0	0	0	<b>0</b>		
Forensic Evaluations	8	1	1	<b>10</b>		

## DEVELOPMENTAL DISABILITIES

Below is a table of the number of consumers with developmental disabilities who were served each quarter thus far in FY08 with IPRS funds according to the provider name and type of service delivered.

<b>Developmental Disabilities Services Funded by IPRS, FY08</b>															
<b>Provider Agency</b>	<b>Developmental Therapy</b>			<b>Personal Assistance</b>			<b>Day Activity</b>			<b>Adult Developmental Vocational Program</b>			<b>Supported Employment</b>		
	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd
Alpha Management Services	3	3	10	1	2	5									
CareFocus	1	1	1	1	1	1									
CNC/Access	9	15	18												
Comprehensive Community Care	6	10	9	1	1	1									
Coordinated Health Services	10	10	12	6	8	10									
Durham Areacorp													6	4	4
Durham Co. Comm. Living Programs				21	21	27									
Durham Exchange Club Industries										88	86	86	22	22	21
Easter Seals UCP North Carolina													6	8	10
House of Care	7	6	4												
Living Well Centre	4	1	2												
Rainbow 66 Storehouse							29	26	26						
Securing Resources For Consumers	16	22	24	4	4	6									
Standards-Based Solutions-East	6	1													
Threshold													2	2	1
Touchstone Residential Services			2												
<b>Totals</b>	<b>62</b>	<b>69</b>	<b>82</b>	<b>34</b>	<b>37</b>	<b>50</b>	<b>29</b>	<b>26</b>	<b>26</b>	<b>88</b>	<b>86</b>	<b>86</b>	<b>36</b>	<b>36</b>	<b>36</b>

## HOUSING

### The Client Housing Assistance - Independent Living Initiative

A referral-based program that provides short-term rental assistance for consumers of The Durham Center with mental health, substance abuse or developmental disabilities. Housing assistance is coordinated between our Housing Specialist and service providers with the goal of increasing client self-sufficiency. The number of individuals assisted thus far in FY08 has grown by 42% from the first quarter to the third quarter.

Type of Assistance	1st Qtr	2nd Qtr	3rd Qtr
Ongoing Rental Assistance	32	44	25
Emergency Rental Assistance	22	39	49
Start up Expense Assistance	21	33	42
Other Emergency Assistance (plumbing, application fees, court costs)	24	22	25

### PATH

The table below provides a snapshot of the recent activities conducted by Durham's Project for Assistance in Transition from Homelessness for both youth/young adults and adults. For the adults, the high numbers in the first quarter reflect a transition of consumers from programs held during FY07 to PATH.

	Youth/Young Adults			Adults		
	1st Qtr	2nd Qtr	3rd Qtr	1st Qtr	2nd Qtr	3rd Qtr
Outreach Services	53	57	34	207	152	189
Enrolled	13	8	4	69	24	11
Case Mgmt Services	16	11	4	100	24	7
Planning of Housing	15	7	4	87	24	12
From FY07	3	_____	_____	31	_____	_____

# HOUSING

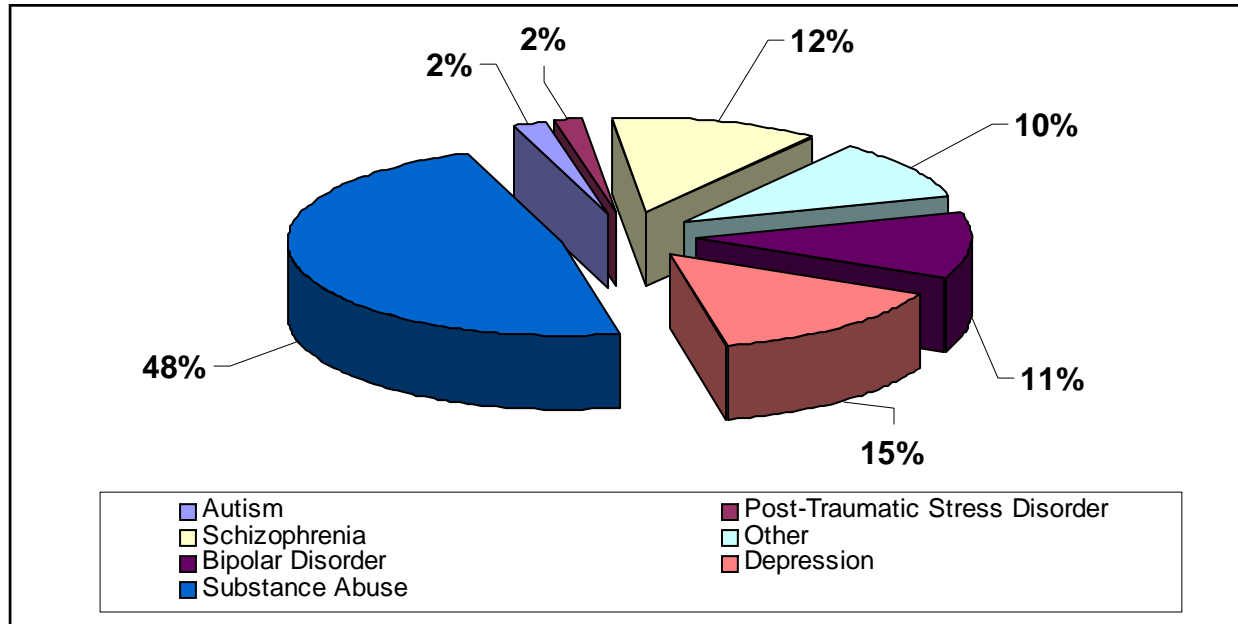
## Housing Support Team

This team plays an integral role in the 10-Year Plan to End Homelessness in Durham. Designed to assist consumers with finding and maintaining permanent housing, this team works toward that goal by helping clients increase their income by obtaining employment and/or Social Security Administration, and get connected to appropriate mental health and substance abuse services and support. The clients must meet the following criteria: 1) Chronically homeless, 2) Diagnosed with mental illness and/or substance abuse, and 3) Used publicly funded systems at least four times within the last three years.

Thus far in FY08, the Housing Support Team accomplished the following:

- ◆ 149 Referrals were made to the Team
- ◆ 58 Intakes were conducted
- ◆ 38 Consumers found Permanent Housing

The chart below shows the breakdown of diagnoses across consumers served through the Team:

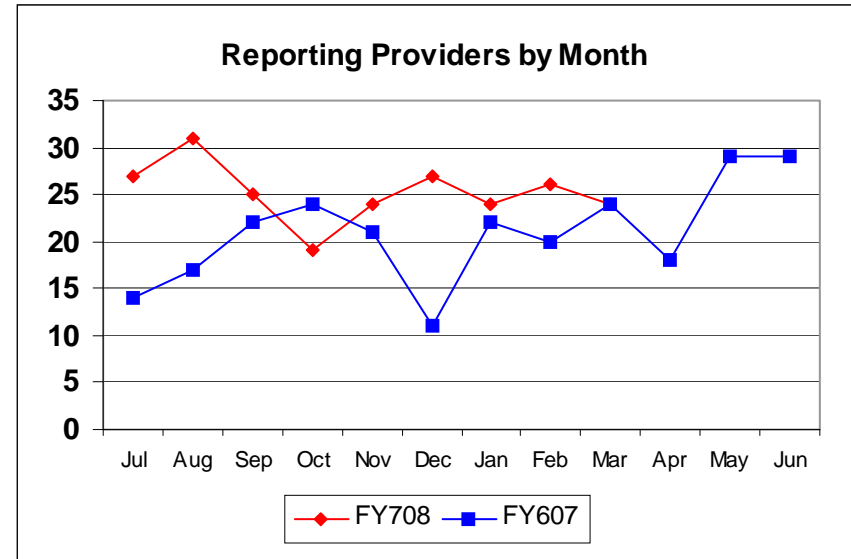
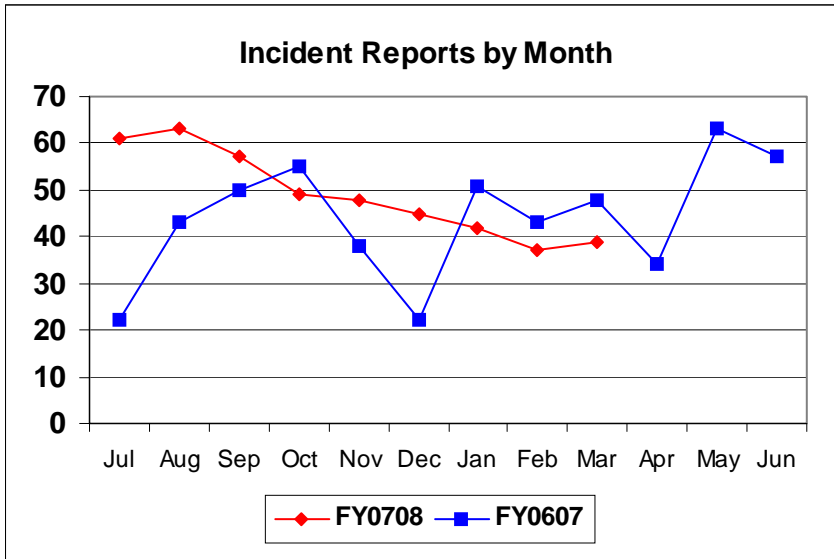


# QUALITY MANAGEMENT

## Incident Reporting

### *Reported Incidents*

The total number of level II and III incidents reported continued to decline during the third quarter with a 17% reduction compared to previous quarter. However, compared to the total number of incidents in the first three quarters of last year there has been an 18% increase overall this year as well as an increase in reporting providers from an average of 19 per month last year to 25 per month this year.



## QUALITY MANAGEMENT

### *Types of Incidents*

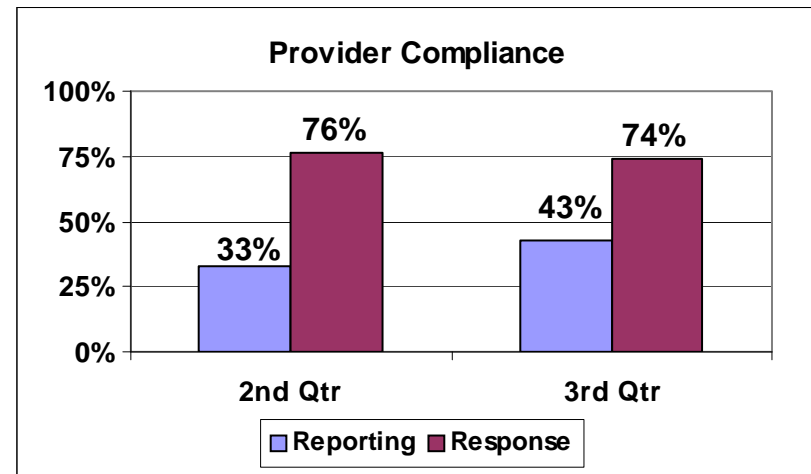
Generally, the number and type of incidents reported for the third quarter were consistent with previous quarters. The most significant changes were noted in Illegal acts by consumer, expulsion and suspension from services, and unplanned consumer absences, which all decreased. Unplanned consumer absence typically generates a high number of reports across only a few adolescent consumers in residential settings; fluctuations in number of reports for this type are therefore common. There was also an increase in consumer death by accident; none of the three incidents happened while the providers were actively serving the client.

Type of Incident	Level II Q3 Only	Level III Q3 Only	Level II Total FY08	Level III Total FY08	Total FY08
Alleged abuse of a consumer	8		31	1	<b>32</b>
Alleged exploitation of a consumer	1		3		<b>3</b>
Alleged neglect of a consumer	1		5		<b>5</b>
Illegal acts by a consumer	5	1	30	1	<b>31</b>
Innapropriate sexual behavior by consumer	3		9		<b>9</b>
Other consumer behavior	39		125		<b>125</b>
Suicide attempt by consumer	5		16		<b>16</b>
Consumer death due to accident		3		3	<b>3</b>
Consumer death due to terminal illness or natural causes	1		6		<b>6</b>
Consumer death due to unknown cause			4	2	<b>6</b>
Injury due to aggressive behavior	5		13		<b>13</b>
Injury due to auto accident	1		4		<b>4</b>
Injury due to other activity	10		37	1	<b>38</b>
Injury due to self-mutilation	5		14		<b>14</b>
Injury due to trip or fall	2		9		<b>9</b>
Medication Error	4		22		<b>22</b>
Expulsion of a consumer from services			8		<b>8</b>
Suspension of a consumer from services			4		<b>4</b>
Unplanned consumer absence >3 hours over time	24		93		<b>93</b>
<b>Total by Type of Incident</b>	<b>114</b>	<b>4</b>	<b>433</b>	<b>8</b>	<b>441</b>

## QUALITY MANAGEMENT

### *Provider Compliance with Incident Reporting*

According to 10A NCAC27G.0600 provider is to submit an accurate and complete report within 72 hours of an incident. Providers met this requirement in 51 out of 119 total reports submitted in the third quarter, which is a 10% improvement from the previous quarter. The provider must also meet response requirements, i.e. to attend to health and safety needs, determine the cause of the incident, develop both corrective measures and measures to prevent similar incidents, assign persons responsible for implementation of corrective measures, and notify correct authorities and persons required by law. Over the past two quarters, response requirements have consistently been met in 75% of incidents but is higher for residential providers than for non-residential.



### *Strategies and Actions Taken*

Quality Management staff continued to utilize the incident review tool developed earlier this fiscal year to track providers' compliance. Incoming incidents are reviewed and staff follows up with providers regarding out of compliance issues and provides technical assistance by phone and/or in person.

During the third quarter, incidents were reviewed within an average of 1.6 days of submission and at least one-third of incoming incidents required some form of contact with the provider requesting additional or missing information, investigations, follow-up, or technical assistance, excluding notifications of out-of-compliance with reporting timeframes.

In March, 27 participants from 18 providers attended an Incident and Death Report training, offered on a quarterly basis.

## CONTRACTS MANAGEMENT

### **Contracts and Provider Specifications**

The Durham Center currently has approximately 172 contracted providers in our provider community. We have 60 IPRS contracts, 62 County contracts, and 161 Medicaid Memoranda of Agreements (MOAs). We are looking to add 18 MOAs upon finalization of the endorsement process. Our provider community consists of 118 for profit agencies, 54 non-profit agencies, and 106 have sites in Durham County.

We have three Contracts Management Specialists in the unit whose responsibilities include, but are not limited to, processing contracts and provider endorsement. The Contracts Management Specialists have been assigned a minimum of 64 providers each.

### **Provider Monitoring**

The following lists the results of monitoring visits made during the third quarter of FY07-08:

- ◆ 22 Agencies received monitoring visits; none resulted in findings that required Plans of Correction
- ◆ 0 Complaints
- ◆ 14 Endorsements

### **Endorsement/Accreditation**

On November 8, 2007, Secretary Dempsey Benton released an updated comprehensive Community Support Plan which addressed requirements of Session Law 2007-323 Section 10.49(ee) and included suspension of all endorsement applications and Memoranda of Agreements (MOAs) by LMEs for providers of Community Support Child and Adult services. This suspension is to remain in effect until July 1, 2008, or until other steps outlined in the plan are operational. As a result, the Contract Management Team continues to focus on completing follow-up reviews and assisting providers with implementation of existing Plans of Correction. We continue to receive approximately two to three new and addendum endorsement applications per week for Community Support Team, Day Treatment, and various CAP services. There are currently about 18 endorsement applications being processed by the unit. We now have 23 nationally accredited providers and 38 providers seeking national accreditation.

## CONTRACTS MANAGEMENT

### Letters of Support

Below is an overview of the number of letters that have been issued from January 1-March 31, 2008:

- ◆ 5 issued to Residential Level II (.1300)
- ◆ 3 issued to Supervised Living Developmentally Disabled Minor (.5600 B)
- ◆ 1 issued to Supervised Living Substance Abuse Minor (.5600 D)
- ◆ 4 issued to Supervised Living Substance Abuse Adult (.5600 E)
- ◆ 5 issued to Supervised Living Assisted (.5600 F)

### Requests for Proposals (RFPs)

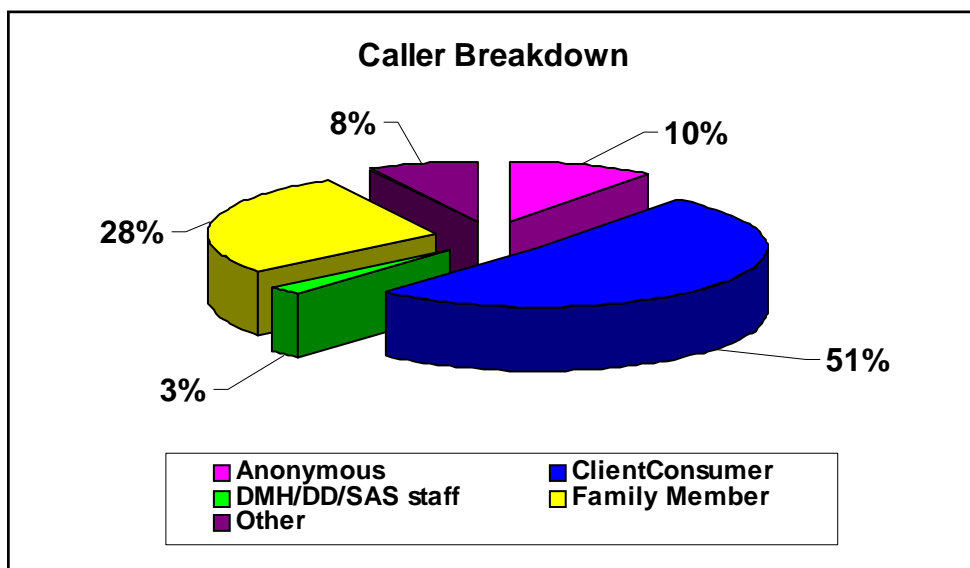
The following RFPs were issued for the third quarter:

- ◆ Comprehensive Wraparound Initiative (CWI) RFP was issued on January 3, 2008. Six proposals were received. This proposal was awarded to four agencies: Carolina Outreach, Triumph, Turning Point Adolescent Center and Youth Villages, Inc.
- ◆ Community Support for Adults with a Substance Use Disorder was issued on February 27, 2008. One proposal was received. The proposal has not yet been awarded.

## CUSTOMER SERVICES

### Calls to the Durham Center

- ◆ The Durham Center tracked 10,773 calls during the third quarter of FY08. The majority (81%) were for information, 16% were referred to STR, 1% to customer service and 2% back to the provider. The number of total calls and number by type of call are similar to those from the first and second quarters.



### Complaints

- ◆ Calls categorized as Customer Service complaints are detailed in the table to the right for the third quarter. The total number of complaints is slightly lower than the number reported in the first quarter.

Complaint/Issue	#/ of Calls	% of Calls
Abuse, Neglect, Exploitation	3	8%
Administrative Issues	1	3%
Authorization/Payment/Billing Issue	2	5%
Case Management	2	5%
Client Rights Issue	1	3%
Failure to Respond to Complaint	3	8%
Medication Issue	1	3%
Other	3	8%
Paperwork	1	3%
Provider Choice	1	3%
Quality of Care	3	8%
Referral Process	1	3%
Service Authorization	1	3%
Service Denial	1	3%
Service not meeting needs	6	15%
Service Provider	3	8%
Service Related	6	15%
<b>Total</b>	<b>39</b>	<b>100%</b>