

**State of Alaska
Department of Health and Social Services
Division of Behavioral Health**

**Comprehensive Behavioral Health
Treatment & Recovery (CBHTR) Grant Program**

**FY2013 CBHTR
Performance Based Funding
Summary**

FINAL

August 16, 2012



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FY2013 CBHTR Performance Based Funding Process

FY2013 Performance Based Funding Process:

The FY2013 CBHTR grant awards reflect a performance based funding (PBF) process in which the Division reviewed FY2012 grantee performance, but made no PBF adjustments to the FY2013 grant awards. The decision to limit the FY2013 PBF process to a “performance review function” was made based on the following:

1. FY2012 is the first complete year of data from the modified Client Status Review (CSR) outcomes instrument (the CSR was modified during FY 2010 and implemented in the 2nd quarter of FY 2011). The Division is currently developing CSR measures of client change over time as part of the Results Based Accountability (RBA) process. The RBA “Change Over Time in Health Domains” measure is presented in the FY2013 PBF process in an advisory capacity.
2. There were no new funds to distribute to grantees with “high performance.”

The performance review includes comparing grantee performance during the first three quarters of FY2012 to the first three quarters of FY2011 and FY2010 for the following set of Standard and Advisory measures:

Standard Measures:

1. Grant Review and Progress Report: DBH Staff Score.
2. Participation in Administering the Behavioral Health Consumer Survey (BHCS).
3. Data Completeness and Compliance: Percent compliance for completing the Alaska Screening Tool (AST) and Client Status Review (CSR).
4. Substance Abuse Residential Bed Utilization Rate.

Advisory Measures:

Five measures are being presented in an “advisory” capacity. Although the reports for these measures may need additional refinement, the results are being presented to help grantees identify where there may be performance and/or data related issues that need to be addressed.

1. Follow-Up Client Status Review Completion Rate.
2. Substance Abuse Successful Program Completion Rate.
3. *Average Number of Days from Screening (AST) to First “Treatment” Service.
4. *Program Enrollments with No Service in More than 134 Days.
5. *Client Change Over Time in CSR Health Domains.

* These are new measures being developed through the RBA process. The measures and results presented in this summary reflect report development as of May 2012 (some reports may have changed since then). Also note that only the FY2012 performance is presented for the RBA measures.

Grantee performance for the Standard and Advisory measures is presented in the following attachments:

- Attachment A - CBHTR Grantee Performance Summary: Standard and Advisory Measures - FY2010, FY2011, & FY2012
- Attachment B - CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

In addition, the FY2012 DBH Treatment & Recovery Services – Grant Review and Progress Report for each individual grantee is provided in Attachment C. The FY2012 Grant Review and Progress Report template is provided in Attachment D.

Standard and Advisory Performance Measures: Descriptions

Standard Measures:

1. **Grant Review and Progress Report: DBH Staff Score.** DBH staff evaluated grantee performance based on information provided in the required quarterly reports. An overall score was determined for each grantee based on:
 - Community Planning & Interagency Coordination that Improves Services
 - Use of the Logic Model to Make Program Improvements
 - Expenditure of Grant Funds to Provide Planned Services
 - Accurate and Complete AKAIMS Reporting
 - Timeliness of Reporting

Note: In FY12 and FY11, the DBH Staff Score was determined based on a higher standard than in FY10.
2. **Participation in Administering the Behavioral Health Consumer Survey (BHCS).** DBH uses the BHCS to obtain information on client evaluation of services. This information is utilized by both DBH and grantees to help guide service delivery improvements. Grantees are required to participate in administering the BHCS, including distributing the BHCS to clients and communicating to DBH the number of surveys distributed.
3. **Data Completeness and Compliance.** Grantees are required to complete an Alaska Screening Tool (AST) and an intake Client Status Review (CSR)¹ for each client as part of the pre-admission/admission process. Thus, each client with an admission record should also have a completed AST and CSR¹. The “Data Completeness and Compliance” measure looks at the ratio of ASTs to admission records and the ratio of

¹ DBH policy does not require grantees to complete an intake, follow-up, or discharge CSR for clients receiving detoxification or psychiatric emergency services.

CSRs to admission records to calculate a percent compliance for completing ASTs and CSRs.

4. **Substance Abuse (SA) Residential Bed Utilization Rate.** This measure applies only to SA residential grantees and excludes detoxification beds. A SA residential bed utilization rate is calculated by dividing the grantee's bed utilization days (i.e., the count of days between program enrollment dates and disenrollment dates) by the grantee's bed capacity (i.e., the number of bed days available). **Note:** In July 2011, the Division implemented a new program alignment policy regarding reporting requirements for programs under the auspices of the State Behavioral Health Agency. Because of the changes in program alignment, caution is advised when comparing the FY12 bed utilization rate with the utilization rates reported for the FY10 and FY11 performance. **Currently, this measure is not available for EDI Agencies.**

Advisory Measures:

1. **Follow-Up Client Status Review (CSR) Completion Rate.** This measure looks at clients with an open case (case was open at any time during the selected time period) and calculates the proportion who were "due" at least one follow-up CSR within the selected time period and had at least one follow-up CSR completed. **Note:** The count of clients "due" a follow-up CSR includes clients who are no longer receiving services but continue to have an open case. Detoxification, Psychiatric Emergency, Waitlist Only, and Assessment Only clients are excluded from this measure. **This report has not been updated to reflect the new requirement of administering a follow-up CSR every 4 months.**
2. **Substance Abuse Successful Program Completion Rate.** This measure looks at the proportion of **disenrollments** from substance abuse treatment programs where the reason for disenrollment indicates the client successfully completed the program. A client is counted as having successfully completed the program if the reason for program disenrollment is "Successfully Completed Treatment" or "Referred to Another Program or Other Services with Satisfactory Progress." Disenrollments from detoxification programs are excluded from this measure. **Note: currently, this measure is not available for EDI Agencies.**
3. **Average Number of Days from Screening (AST) to First "Treatment" Service (RBA Measure).** This measure looks at the elapsed period of time (# of days) from the completion of the Alaska Screening Tool (AST) to the date of the first treatment service. This measure is a proxy for the performance of the treatment system relative to timely access and engagement into treatment services. **Note:** the AST, CSR, and Assessment are excluded from the count of "first treatment service." Assessment-only clients are excluded from this measure.
4. **Program Enrollments with No Service in More than 134 Days (RBA Measure).** This measure looks at the proportion of program **enrollments** where there is a gap of more

than 134 days since the client's last service. This measure targets timely program disenrollment and/or discharge in order to facilitate accurate reporting of several State and Federal outcome measures. The report for this measure currently displays the number of enrollments with a gap of more than 134 days between services, but does not provide the number of enrollments with a gap of more than 134 days since the **last** service. **Note: currently, this measure is not available for EDI Agencies.**

5. **Client Change Over Time in CSR Health Domains (RBA Measure).** This measure looks at the CSR health-related quality of life questions (i.e., the first seven questions of the CSR). For clients who had a follow-up CSR during the reporting period, this measure compares the total number of "bad days" (for all seven questions combined) reported in the initial CSR to the total number of "bad days" reported in the most recent follow-up CSR. If the total number of "bad days" decreased, then the client is counted as showing improvement in the CSR Health Domains. This measure reports the proportion of clients showing improvement in the CSR Health Domains for each of the following target populations: SMI, SED, COD, General MH, and SUD. **Note: currently, this measure is not available for EDI Agencies.**

Attachment A

CBHTR Grantee Performance Summary: Standard and Advisory Measures- FY2010, FY2011, & FY2012

Attachment A.1 - CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012

Grant Review and Progress Report - DBH Staff Score: Grantee Performance - Standard Measure

Grant Review and Progress Report: DBH Staff Score. DBH staff evaluated grantee performance based on information provided in the required quarterly reports. An overall score was determined for each grantee based on:

- Community Planning & Interagency Coordination that Improves Services
- Use of the Logic Model to Make Program Improvements
- Expenditure of Grant Funds to Provide Planned Services
- Accurate and Complete AKAIMS Reporting
- Timeliness of Reporting

Note: In FY12 and FY11, the DBH Staff Score was determined based on a higher standard than in FY10.

Staff Score -- Comparison Across Years: FY10, FY11, and FY12						
A	B	C	D	E	F	G
Grantee	AKAIMS ID	FY10 Staff Score	FY11 Staff Score	FY12 Staff Score	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
Access Alaska	68	97%	100%	100%	3	0
Akeela, Inc (Co-ed)	1045	100%	97%	100%	(3)	3
Akeela, Inc (Women and Children)	1145	100%	97%	100%	(3)	3
Akeela, Inc - Gateway	56	n/a	79%	88%	n/a	9
Alaska Addiction Rehabilitation Services	16	93%	86%	71%	(7)	(15)
Alaska Children's Services	59	100%	100%	100%	0	0
Alaska Family Services	23	90%	79%	79%	(11)	0
Alaska Island Community Services	39	95%	83%	92%	(12)	9
Aleutian/Pribilof Islands Association Inc.	15	95%	92%	96%	(3)	4
Anchorage Community Mental Health Services	77	100%	100%	100%	0	0
The Arc of Anchorage	46	100%	100%	100%	0	0
Assets Inc.	21	95%	100%	100%	5	0
Bristol Bay Area Health Corporation	74	95%	79%	96%	(16)	17
Central Peninsula General Hospital	66	100%	100%	92%	0	(8)
Community Connections	50	90%	75%	92%	(15)	17
Cook Inlet Council on Alcohol and Drug Abuse	31	100%	100%	78%	0	(22)
Cook Inlet Tribal Council	67	95%	100%	92%	5	(8)

	Staff Score -- Comparison Across Years: FY10, FY11, and FY12					
A	B	C	D	E	F	G
Grantee	AKAIMS ID	FY10 Staff Score	FY11 Staff Score	FY12 Staff Score	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
Sound Alternatives	38	95%	100%	100%	5	0
Daybreak CMI	24	100%	92%	83%	(8)	(9)
Denali Family Services	75	95%	100%	100%	5	0
Eastern Aleutian Tribes Inc	69	100%	85%	100%	(15)	15
Fairbanks Resource Agency	10	100%	n/a	n/a		
Fairbanks Community Behavioral Health Center	88	100%	100%	100%	0	0
Fairbanks Native Association	14	85%	92%	100%	7	8
Family Centered Services of Alaska	51	100%	100%	100%	0	0
Gastineau Human Services	7	100%	100%	100%	0	0
Hope Community Resources Inc.	52	100%	100%	100%	0	0
Interior AIDS Association	13	100%	100%	100%	0	0
Juneau Alliance for Mental Health Inc	32	100%	100%	100%	0	0
Juneau Youth Services	72	100%	79%	100%	(21)	21
Kenai Peninsula Care Center	30	100%	76%	92%	(24)	16
Kenaitze Indian Tribe	54	95%	83%	88%	(12)	5
Ketchikan Indian Community	44	38%	63%	74%	25	11
Lynn Canal Human Resources	35	90%	100%	96%	10	(4)
Maniilaq Behavioral Health	55	90%	67%	100%	(23)	33
Mat-Su Health Services Inc.	73	100%	83%	83%	(17)	0
Narcotic Drug Treatment Center Inc.	25	100%	100%	100%	0	0
North Slope Borough Department of Health & Social Services	43	100%	92%	100%	(8)	8
Norton Sound Health Corporation	53	90%	89%	100%	(1)	11
Peninsula Community Health Centers	80	93%	100%	88%	7	(12)
Petersburg Mental Health Services	40	100%	100%	100%	0	0
Providence Kodiak Island Counseling Center	27	100%	96%	100%	(4)	4
Providence Valdez Counseling Center	5	100%	100%	92%	0	(8)
Railbelt Mental Health & Addictions	3	100%	100%	88%	0	(12)
Rainforest Recovery Center	78	100%	100%	100%	0	0
Salvation Army Booth Memorial	42	100%	74%	100%	(26)	26
Salvation Army Clitheroe Center	19	93%	93%	88%	0	(5)
Seaview Community Services	2	93%	92%	96%	(1)	4
Sitka Counseling and Prevention Services	9	100%	92%	100%	(8)	8

	Staff Score -- Comparison Across Years: FY10, FY11, and FY12					
A	B	C	D	E	F	G
Grantee	AKAIMS ID	FY10 Staff Score	FY11 Staff Score	FY12 Staff Score	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
South Peninsula Behavioral Health Services Inc	71	100%	100%	100%	0	0
Southcentral Foundation - Anc	1047	100%	100%	88%	0	(12)
Southcentral Foundation - McG	1147	100%	100%	100%	0	0
S.E.A.R.H.C.	36	95%	100%	96%	5	(4)
Tanana Chiefs Conference	12	100%	92%	82%	(8)	(10)
TCC-FNA	90	100%	n/a	n/a		
Tok Area Counseling Center	11	100%	100%	86%	0	(14)
Volunteers of America	20	100%	100%	100%	0	0
Yukon-Kuskokwim Health Corporation	65	100%	100%	95%	0	(5)
Youth Advocates of Sitka	8	100%	85%	92%	(15)	7

**Staff Score
Summary Tables**

Minimum, Maximum, and Average					
	FY10 Staff Score	FY11 Staff Score	FY12 Staff Score	Percentage Pt Change* FY10 to FY11	Percentage Pt Change* FY11 to FY12
Minimum	38%	63%	71%	-26	-22
Maximum	100%	100%	100%	25	33
Average	96%	93%	95%	-3	2
*Minimum Percentage Point Change is the greatest negative point change; Maximum Percentage Point Change is the greatest positive point change; Average Percentage Point Change is the average point change.					

Attainment Range and Number / Percent of Grantees within each Range						
Staff Score: Attainment Range	FY10		FY11		FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
100%	37	63%	30	52%	31	53%
95 - 99%	10	17%	3	5%	6	10%
90 - 94%	9	15%	9	16%	7	12%
80 - 89%	1	2%	7	12%	10	17%
70 - 79%	1	2%	7	12%	4	7%
60 - 69%	0	0%	2	3%	0	0%
< 60%	1	2%	0	0%	0	0%
TOTALS	59	100%	58	100%	58	100%

**Staff Score
 Summary Tables- Continued**

Percentage Point Change and Number / Percent of Grantees with Improved or Worse Score				
Staff Score: Percentage Point Change	FY10 to FY11		FY11 to FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees
Improved 41 or more points	0	0%	0	0%
Improved 21 to 40 points	1	2%	3	5%
Improved 6 to 20 points	4	7%	13	22%
Improved 1 to 5 points	6	11%	6	10%
No Change	23	40%	21	36%
Down -1 to -5 points	6	11%	4	7%
Down -6 to -20 points	13	23%	10	17%
Down -21 to -40 points	4	7%	1	2%
Down -41 or more points	0	0%	0	0%
<i>TOTALS</i>	57	100%	58	100%

Attachment A.2 - CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Participation in Administering the Behavioral Health Consumer Survey: Grantee Performance - Standard Measure

Participation in Administering the Behavioral Health Consumer Survey (BHCS). DBH uses the BHCS to obtain information on client evaluation of services. This information is utilized by both DBH and grantees to help guide service delivery improvements. Grantees are required to participate in administering the BHCS, including distributing the BHCS to clients and communicating to DBH the number of surveys distributed.

A	B	C	D	
Grantee	AKAIMS ID	FY12 Annual BHCS Administered (Yes/No)	FY12 Discharge BHCS Administered (Yes/No)	
Access Alaska	68	YES		
Akeela, Inc (Co-ed)	1045	YES		
Akeela, Inc (Women and Children)	1145	YES		
Akeela, Inc - Gateway	56	YES		
Alaska Addiction Rehabilitation Services	16		YES	
Alaska Children's Services	59	YES		
Alaska Family Services	23	YES		
Alaska Island Community Services	39	YES		
Aleutian/Pribilof Islands Association Inc.	15	YES		
Anchorage Community Mental Health Services	77	YES		
The Arc of Anchorage	46	YES		
Assets Inc.	21	YES		
Bristol Bay Area Health Corporation	74	YES	YES	
Central Peninsula General Hospital	66	YES	YES	
Community Connections	50	YES		
Cook Inlet Council on Alcohol and Drug Abuse	31	YES		
Cook Inlet Tribal Council	67		YES	
Copper River Native Association	48	YES		

For FY10, FY11 and FY12, all Grantees participated in Administering the BHCS

A	B	C	D	
Grantee	AKAIMS ID	FY12 Annual BHCS Administered (Yes/No)	FY12 Discharge BHCS Administered (Yes/No)	
Sound Alternatives	38	YES		
Daybreak CMI	24	YES		
Denali Family Services	75	YES		
Eastern Aleutian Tribes Inc	69	YES		
Fairbanks Resource Agency	10	N/A		
Fairbanks Community Behavioral Health Center	88			
Fairbanks Native Association	14	YES	YES	
Family Centered Services of Alaska	51	YES		
Gastineau Human Services	7	YES		
Hope Community Resources Inc.	52	YES		
Interior AIDS Association	13	YES		
Juneau Alliance for Mental Health Inc	32	YES		
Juneau Youth Services	72	YES	YES	
Kenai Peninsula Care Center	30	YES		
Kenaitze Indian Tribe	54	YES	YES	
Ketchikan Indian Community	44	YES		
Lynn Canal Human Resources	35	YES		
Maniilaq Behavioral Health	55	YES		
Mat-Su Health Services Inc.	73	YES		
Narcotic Drug Treatment Center Inc.	25	YES		
North Slope Borough Department of Health & Social Services	43	YES		
Norton Sound Health Corporation	53	YES		
Peninsula Community Health Centers	80	YES		
Petersburg Mental Health Services	40	YES		
Providence Kodiak Island Counseling Center	27	YES		
Providence Valdez Counseling Center	5	YES		
Railbelt Mental Health & Addictions	3	YES		
Rainforest Recovery Center	78		YES	
Salvation Army Booth Memorial	42	YES		
Salvation Army Clitheroe Center	19	YES	YES	
Seaview Community Services	2	YES		
Sitka Counseling and Prevention Services	9	YES	YES	
South Peninsula Behavioral Health Services Inc	71	YES		

For FY10, FY11 and FY12, all Grantees participated in Administering the BHCS

A	B	C	D	
Grantee	AKAIMS ID	FY12 Annual BHCS Administered (Yes/No)	FY12 Discharge BHCS Administered (Yes/No)	
Southcentral Foundation - Anc	1047	YES		
Southcentral Foundation - McG	1147	YES		
S.E.A.R.H.C.	36	YES	YES	
Tanana Chiefs Conference	12	YES	YES	
TCC-FNA	90	N/A		
Tok Area Counseling Center	11	YES		
Volunteers of America	20	YES	YES	
Yukon-Kuskokwim Health Corporation	65	YES	YES	
Youth Advocates of Sitka	8	YES		

For FY10, FY11 and FY12, all Grantees participated in Administering the BHCS

Attachment A.3a - CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Data Completeness and Compliance - AST: Grantee Performance - Standard Measure

Data Completeness and Compliance. Grantees are required to complete an Alaska Screening Tool (AST) and an intake Client Status Review (CSR) for each client as part of the pre-admission/admission process. Thus, each client with an admission record should also have a completed AST and CSR1. The “Data Completeness and Compliance” measure looks at the ratio of ASTs to admission records and the ratio of CSRs to admission records to calculate a percent compliance for completing ASTs and CSRs.

A	Data Completeness and Compliance -- AST Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 AST Compliance Rate	FY11 AST Compliance Rate	FY12 AST Compliance Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	TOTAL Admissions	AST Count
Access Alaska	68	100%	100%	100%	0	0		
Akeela, Inc (Co-ed)	1045	95%	83%	90%	(12)	7		
Akeela, Inc (Women and Children)	1145	95%	83%	90%	(12)	7		
Akeela, Inc - Gateway	56	n/a	94%	99%	n/a	5		
Alaska Addiction Rehabilitation Services	16	100%	100%	100%	0	0		
Alaska Children's Services	59	90%	98%	100%	8	2		
Alaska Family Services	23	97%	98%	99%	1	1		
Alaska Island Community Services	39	100%	100%	100%	0	0		
Aleutian/Pribilof Islands Association Inc.	15	85%	75%	98%	(10)	23		
Anchorage Community Mental Health Services	77	46%	94%	99%	48	5		
The Arc of Anchorage	46	100%	100%	100%	0	0		
Assets Inc.	21	80%	100%	100%	20	0		
Bristol Bay Area Health Corporation	74	98%	80%	91%	(18)	11		
Central Peninsula General Hospital	66	95%	97%	100%	2	3		
Community Connections	50	96%	68%	100%	(28)	32		
Cook Inlet Council on Alcohol and Drug Abuse	31	98%	99%	98%	1	(1)		

A	Data Completeness and Compliance -- AST Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 AST Compliance Rate	FY11 AST Compliance Rate	FY12 AST Compliance Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	TOTAL Admissions	AST Count
Cook Inlet Tribal Council	67	96%	94%	56%	(2)	(38)		
Copper River Native Association	48	88%	98%	89%	10	(9)		
Sound Alternatives	38	87%	65%	83%	(22)	18		
Daybreak CMI	24	100%	72%	100%	(28)	28		
Denali Family Services	75	96%	83%	94%	(13)	11		
Eastern Aleutian Tribes Inc	69	98%	90%	73%	(8)	(17)		
Fairbanks Resource Agency	10	n/a	n/a	n/a				
Fairbanks Community Behavioral Health Center	88	95%	99%	96%	4	(3)		
Fairbanks Native Association (FNA)*	14	100%	99%	88%	(1)	(11)		
Family Centered Services of Alaska	51	83%	76%	98%	(7)	22		
Gastineau Human Services	7	61%	97%	100%	36	3		
Hope Community Resources Inc.	52	100%	100%	100%	0	0		
Interior AIDS Association	13	100%	88%	100%	(12)	12		
Juneau Alliance for Mental Health Inc	32	61%	100%	100%	39	0		
Juneau Youth Services	72	97%	94%	100%	(3)	6		
Kenai Peninsula Care Center	30	93%	84%	94%	(9)	10		
Kenaitze Indian Tribe	54	93%	92%	99%	(1)	7		
Ketchikan Indian Community	44	70%	64%	20%	(6)	(44)		
Lynn Canal Human Resources	35	57%	99%	100%	42	1		
Maniilaq Behavioral Health	55	89%	66%	87%	(23)	21		
Mat-Su Health Services Inc.	73	100%	95%	95%	(5)	0		
Narcotic Drug Treatment Center Inc.	25	100%	100%	65%	0	(35)		
North Slope Borough Department of Health & Social Services	43	59%	70%	86%	11	16		
Norton Sound Health Corporation	53	84%	99%	99%	15	0		
Peninsula Community Health Centers	80	93%	93%	97%	0	4		
Petersburg Mental Health Services	40	100%	100%	100%	0	0		
Providence Kodiak Island Counseling Center	27	84%	100%	100%	16	0		
Providence Valdez Counseling Center	5	74%	96%	90%	22	(6)		
Railbelt Mental Health & Addictions	3	100%	100%	100%	0	0		

A	Data Completeness and Compliance -- AST Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 AST Compliance Rate	FY11 AST Compliance Rate	FY12 AST Compliance Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	TOTAL Admissions	AST Count
Rainforest Recovery Center	78	99%	91%	100%	(8)	9		
Salvation Army Booth Memorial	42	83%	80%	95%	(3)	15		
Salvation Army Clitheroe Center	19	91%	96%	100%	5	4		
Seaview Community Services	2	97%	96%	98%	(1)	2		
Sitka Counseling and Prevention Services	9	97%	97%	99%	0	2		
South Peninsula Behavioral Health Services Inc	71	99%	99%	99%	0	0		
Southcentral Foundation - Anc (Combined AKAIMS/EDI) **	1047	98%	80%	99%	(18)	19		
Southcentral Foundation - McG (Combined AKAIMS/EDI) **	1147	98%	80%	99%	(18)	19		
S.E.A.R.H.C.	36	93%	93%	84%	0	(9)		
Tanana Chiefs Conference	12	96%	94%	91%	(2)	(3)		
TCC-FNA	90	99%						
Tok Area Counseling Center	11	99%	93%	92%	(6)	(1)		
Volunteers of America	20	97%	100%	100%	3	0		
Yukon-Kuskokwim Health Corporation	65	90%	87%	91%	(3)	4		
Youth Advocates of Sitka	8	84%	95%	93%	11	(2)		
* FNA performance in FY11 & FY12 includes TCC-FNA data.								

**Data Completeness and Compliance - AST
Summary Tables**

	Minimum, Maximum, and Average					
		FY10 AST Compliance Rate	FY11 AST Compliance Rate	FY12 AST Compliance Rate	Percentage Pt Change* FY10 to FY11	Percentage Pt Change* FY11 to FY12
	Minimum	46%	64%	20%	-28	-44
	Maximum	100%	100%	100%	48	32
Average	91%	91%	93%	0	3	
*Minimum Percentage Point Change is the greatest negative point change; Maximum Percentage Point Change is the greatest positive point change; Average Percentage Point Change is the average point change.						

Attainment Range and Number / Percent of Grantees within each Range						
Data Completeness & Compliance - AST: Attainment Range	FY10		FY11		FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
100%	12	21%	12	21%	21	36%
95 - 99%	22	38%	17	29%	17	29%
90 - 94%	7	12%	11	19%	10	17%
80 - 89%	10	17%	10	17%	6	10%
70 - 79%	2	3%	4	7%	1	2%
60 - 69%	2	3%	4	7%	1	2%
< 60%	3	5%	0	0%	2	3%
<i>TOTALS</i>	58	100%	58	100%	58	100%

**Data Completeness and Compliance - AST
Summary Tables- Continued**

Percentage Point Change and Number / Percent of Grantees with Improved or Worse Score				
Data Completeness & Compliance - AST: Percentage Point Change	FY10 to FY11		FY11 to FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees
Improved 41 or more points	2	4%	0	0%
Improved 21 to 40 points	3	5%	5	9%
Improved 6 to 20 points	7	12%	14	24%
Improved 1 to 5 points	6	11%	12	21%
No Change	12	21%	14	24%
Down -1 to -5 points	9	16%	5	9%
Down -6 to -20 points	14	25%	5	9%
Down -21 to -40 points	4	7%	2	3%
Down -41 or more points	0	0%	1	2%
<i>TOTALS</i>	57	100%	58	100%

Attachment A.3b - CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Data Completeness and Compliance - CSR: Grantee Performance - Standard Measure

Data Completeness and Compliance. Grantees are required to complete an Alaska Screening Tool (AST) and an intake Client Status Review (CSR) for each client as part of the pre-admission/admission process. Thus, each client with an admission record should also have a completed AST and CSR1. The “Data Completeness and Compliance” measure looks at the ratio of ASTs to admission records and the ratio of CSRs to admission records to calculate a percent compliance for completing ASTs and CSRs.

A	Data Completeness and Compliance -- CSR Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 CSR Compliance Rate	FY11 CSR Compliance Rate	FY12 CSR Compliance Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	TOTAL Admissions	CSR Done/Not Required
Access Alaska	68	100%	100%	100%	0	0		
Akeela, Inc (Co-ed)	1045	88%	79%	89%	(9)	10		
Akeela, Inc (Women and Children)	1145	88%	79%	89%	(9)	10		
Akeela, Inc - Gateway	56	n/a	91%	98%	n/a	7		
Alaska Addiction Rehabilitation Services	16	100%	100%	100%	0	0		
Alaska Children's Services	59	88%	95%	100%	7	5		
Alaska Family Services	23	90%	98%	95%	8	(3)		
Alaska Island Community Services	39	99%	100%	100%	1	0		
Aleutian/Pribilof Islands Association Inc.	15	93%	86%	92%	(7)	6		
Anchorage Community Mental Health Services	77	48%	91%	98%	43	7		
The Arc of Anchorage	46	64%	86%	100%	22	14		
Assets Inc.	21	80%	89%	73%	9	(16)		
Bristol Bay Area Health Corporation	74	87%	73%	82%	(14)	9		
Central Peninsula General Hospital	66	91%	93%	100%	2	7		
Community Connections	50	92%	45%	95%	(47)	50		
Cook Inlet Council on Alcohol and Drug Abuse	31	89%	84%	89%	(5)	5		

A	Data Completeness and Compliance -- CSR Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 CSR Compliance Rate	FY11 CSR Compliance Rate	FY12 CSR Compliance Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	TOTAL Admissions	CSR Done/Not Required
Cook Inlet Tribal Council	67	98%	99%	99%	1	0		
Copper River Native Association	48	88%	94%	87%	6	(7)		
Sound Alternatives	38	86%	51%	83%	(35)	32		
Daybreak CMI	24	90%	72%	93%	(18)	21		
Denali Family Services	75	84%	84%	95%	0	11		
Eastern Aleutian Tribes Inc	69	90%	62%	61%	(28)	(1)		
Fairbanks Resource Agency	10	n/a	n/a	n/a				
Fairbanks Community Behavioral Health Center	88	90%	97%	91%	7	(6)		
Fairbanks Native Association (FNA)*	14	100%	100%	97%	0	(3)		
Family Centered Services of Alaska	51	95%	83%	99%	(12)	16		
Gastineau Human Services	7	60%	95%	99%	35	4		
Hope Community Resources Inc.	52	100%	100%	100%	0	0		
Interior AIDS Association	13	93%	100%	100%	7	0		
Juneau Alliance for Mental Health Inc	32	61%	99%	100%	38	1		
Juneau Youth Services	72	98%	79%	100%	(19)	21		
Kenai Peninsula Care Center	30	93%	72%	94%	(21)	22		
Kenaitze Indian Tribe	54	81%	75%	99%	(6)	24		
Ketchikan Indian Community	44	67%	57%	32%	(10)	(25)		
Lynn Canal Human Resources	35	57%	100%	100%	43	0		
Maniilaq Behavioral Health	55	59%	37%	64%	(22)	27		
Mat-Su Health Services Inc.	73	100%	100%	94%	0	(6)		
Narcotic Drug Treatment Center Inc.	25	100%	100%	63%	0	(37)		
North Slope Borough Department of Health & Social Services	43	58%	69%	85%	11	16		
Norton Sound Health Corporation	53	82%	98%	95%	16	(3)		
Peninsula Community Health Centers	80	91%	94%	97%	3	3		
Petersburg Mental Health Services	40	100%	100%	100%	0	0		
Providence Kodiak Island Counseling Center	27	92%	100%	100%	8	0		
Providence Valdez Counseling Center	5	70%	96%	92%	26	(4)		
Railbelt Mental Health & Addictions	3	100%	100%	100%	0	0		

A	Data Completeness and Compliance -- CSR Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 CSR Compliance Rate	FY11 CSR Compliance Rate	FY12 CSR Compliance Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	TOTAL Admissions	CSR Done/Not Required
Rainforest Recovery Center	78	76%	91%	100%	15	9		
Salvation Army Booth Memorial	42	67%	77%	95%	10	18		
Salvation Army Clitheroe Center	19	92%	99%	99%	7	0		
Seaview Community Services	2	97%	96%	97%	(1)	1		
Sitka Counseling and Prevention Services	9	96%	95%	99%	(1)	4		
South Peninsula Behavioral Health Services Inc	71	96%	99%	99%	3	0		
Southcentral Foundation - Anc (Combined AKAIMS/EDI) **	1047	97%	80%	98%	(17)	18		
Southcentral Foundation - McG (Combined AKAIMS/EDI) **	1147	97%	80%	98%	(17)	18		
S.E.A.R.H.C.	36	77%	90%	79%	13	(11)		
Tanana Chiefs Conference	12	97%	93%	93%	(4)	0		
TCC-FNA	90	98%	n/a					
Tok Area Counseling Center	11	94%	93%	87%	(1)	(6)		
Volunteers of America	20	98%	95%	100%	(3)	5		
Yukon-Kuskokwim Health Corporation	65	88%	88%	92%	0	4		
Youth Advocates of Sitka	8	68%	89%	97%	21	8		
* FNA performance in FY11 & FY12 includes TCC-FNA data.								

**Data Completeness and Compliance - CSR
Summary Tables**

Minimum, Maximum, and Average						
	FY10 CSR Compliance Rate	FY11 CSR Compliance Rate	FY12 CSR Compliance Rate	Percentage Pt Change* FY10 to FY11	Percentage Pt Change* FY11 to FY12	
Minimum	48%	37%	32%	-47	-37	
Maximum	100%	100%	100%	43	50	
Average	87%	87%	92%	1	5	
*Minimum Percentage Point Change is the greatest negative point change; Maximum Percentage Point Change is the greatest positive point change; Average Percentage Point Change is the average point change.						

Attainment Range and Number / Percent of Grantees within each Range						
Data Completeness & Compliance - CSR: Attainment Range	FY10		FY11		FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
100%	8	14%	12	21%	16	28%
95 - 99%	12	21%	13	22%	20	34%
90 - 94%	13	22%	9	16%	8	14%
80 - 89%	12	21%	10	17%	8	14%
70 - 79%	3	5%	8	14%	2	3%
60 - 69%	6	10%	2	3%	3	5%
< 60%	4	7%	4	7%	1	2%
<i>TOTALS</i>	58	100%	58	100%	58	100%

**Data Completeness and Compliance - CSR
Summary Tables- Continued**

Percentage Point Change and Number / Percent of Grantees with Improved or Worse Score				
Data Completeness and Compliance - CSR: Percentage Point Change	FY10 to FY11		FY11 to FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees
Improved 41 or more points	2	4%	1	2%
Improved 21 to 40 points	5	9%	6	10%
Improved 6 to 20 points	13	23%	16	28%
Improved 1 to 5 points	5	9%	9	16%
No Change	10	18%	13	22%
Down -1 to -5 points	6	11%	5	9%
Down -6 to -20 points	11	19%	6	10%
Down -21 to -40 points	4	7%	2	3%
Down -41 or more points	1	2%	0	0%
<i>TOTALS</i>	57	100%	58	100%

Attachment A.4 - CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Substance Abuse Residential Bed Utilization Rate: Grantee Performance - Standard Measure

Substance Abuse (SA) Residential Bed Utilization Rate. This measure applies only to SA residential grantees and excludes detoxification beds. A SA residential bed utilization rate is calculated by dividing the grantee's bed utilization days (i.e., the count of days between program enrollment dates and disenrollment dates) by the grantee's bed capacity (i.e., the number of bed days available). **Note:** In July 2011, the Division implemented a new program alignment policy regarding reporting requirements for programs under the auspices of the State Behavioral Health Agency. Because of the changes in program alignment, caution is advised when comparing the FY12 bed utilization rate with the utilization rates reported for the FY10 and FY11 performance. **Currently, this measure is not available for EDI Agencies.**

A	SA Residential Bed Utilization Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail		
	B	C	D	E	F	G	H	I	J
Grantee	AKAIMS ID	FY10 Bed Utilization Rate	FY11 Bed Utilization Rate	FY12 Bed Utilization Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Bed Count	Bed Days Available thru 3rd Qtr	Bed Days Utilized thru 3rd Qtr
Access Alaska	68								
Akeela, Inc (Co-ed)	1045	166%	162%	91%	(4)	(71)	23	6,325	5,750
Akeela, Inc (Women and Children)	1145	76%	99%	93%	23	(6)	14	3,850	3,587
Akeela, Inc - Gateway	56	n/a	39%	75%	n/a	36	12	3,300	2,462
Alaska Addiction Rehabilitation Services	16	89%	92%	94%	3	2	20	5,500	5,197
Alaska Children's Services	59								
Alaska Family Services	23								
Alaska Island Community Services	39								
Aleutian/Pribilof Islands Association Inc.	15								
Anchorage Community Mental Health Services	77								
The Arc of Anchorage	46								
Assets Inc.	21								
Bristol Bay Area Health Corporation	74	107%	113%	56%	6	(57)	14	3,850	2,140
Central Peninsula General Hospital	66	88%	97%	91%	9	(6)	10	2,750	2,500
Community Connections	50								

A	SA Residential Bed Utilization Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail		
	B	C	D	E	F	G	H	I	J
Grantee	AKAIMS ID	FY10 Bed Utilization Rate	FY11 Bed Utilization Rate	FY12 Bed Utilization Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Bed Count	Bed Days Available thru 3rd Qtr	Bed Days Utilized thru 3rd Qtr
Cook Inlet Council on Alcohol and Drug Abuse	31								
Cook Inlet Tribal Council	67	162%	142%	97%	(20)	(45)	12	3,300	3,210
Copper River Native Association	48								
Sound Alternatives	38								
Daybreak CMI	24								
Denali Family Services	75								
Eastern Aleutian Tribes Inc	69								
Fairbanks Resource Agency	10								
Fairbanks Community Behavioral Health Center	88								
Fairbanks Native Association (FNA)*	14	69%	103%	59%	34	(44)	32	8,800	5,221
Family Centered Services of Alaska	51								
Gastineau Human Services	7								
Hope Community Resources Inc.	52								
Interior AIDS Association	13								
Juneau Alliance for Mental Health Inc	32								
Juneau Youth Services	72								
Kenai Peninsula Care Center	30								
Kenaitze Indian Tribe	54								
Ketchikan Indian Community	44								
Lynn Canal Human Resources	35								
Maniilaq Behavioral Health	55								
Mat-Su Health Services Inc.	73								
Narcotic Drug Treatment Center Inc.	25								
North Slope Borough Department of Health & Social Services	43								
Norton Sound Health Corporation	53								
Peninsula Community Health Centers	80								
Petersburg Mental Health Services	40								
Providence Kodiak Island Counseling Center	27								
Providence Valdez Counseling Center	5								

A	SA Residential Bed Utilization Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail		
	B	C	D	E	F	G	H	I	J
Grantee	AKAIMS ID	FY10 Bed Utilization Rate	FY11 Bed Utilization Rate	FY12 Bed Utilization Rate	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Bed Count	Bed Days Available thru 3rd Qtr	Bed Days Utilized thru 3rd Qtr
Railbelt Mental Health & Addictions	3								
Rainforest Recovery Center	78	76%	85%	83%	9	(2)	16	4,400	3,655
Salvation Army Booth Memorial	42								
Salvation Army Clitheroe Center	19	98%	70%	68%	(28)	(2)	46	12,650	8,587
Seaview Community Services	2								
Sitka Counseling and Prevention Services	9	81%	85%	76%	4	(9)	7	1,925	1,470
South Peninsula Behavioral Health Services Inc	71								
Southcentral Foundation - ANC (AKAIMS only; No EDI)	1047	72%	65%	59%	(7)	(6)	14	3,850	2,283
Southcentral Foundation - McG	1147								
S.E.A.R.H.C.	36	80%	68%	94%	(12)	26	22	3,234	3,055
Tanana Chiefs Conference	12	140%	121%	90%	(19)	(31)	10	2,750	2,469
TCC-FNA	90	85%	n/a	n/a					
Tok Area Counseling Center	11								
Volunteers of America	20	92%	74%	80%	(18)	6	24	6,600	5,283
Yukon-Kuskokwim Health Corporation	65	100%	116%	101%	16	(15)	16	4,400	4,436
Youth Advocates of Sitka	8								
* FNA performance in FY11 & FY12 includes TCC-FNA data.									

**Substance Abuse Residential Bed Utilization Rate
Summary Tables**

	Minimum, Maximum, and Average					
		FY10 Utiliz Rate	FY11 Utiliz Rate	FY12 Utiliz Rate	Percentage Pt Change* FY10 to FY11	Percentage Pt Change* FY11 to FY12
	Minimum	69%	39%	56%	-28	-71
	Maximum	166%	162%	101%	34	36
	Average	99%	96%	82%	0	-14
*Minimum Percentage Point Change is the greatest negative point change; Maximum Percentage Point Change is the greatest positive point change; Average Percentage Point Change is the average point change.						

Attainment Range and Number / Percentage of Grantees within each Range						
SA Residential Bed Utilization Rate: Attainment Range	FY10		FY11		FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
>=100%	5	31%	6	38%	1	6%
95 - 99%	1	6%	2	13%	1	6%
90 - 94%	1	6%	1	6%	6	38%
80 - 89%	5	31%	2	13%	2	13%
70 - 79%	3	19%	2	13%	2	13%
60 - 69%	1	6%	2	13%	1	6%
< 60%	0	0%	1	6%	3	19%
<i>TOTALS</i>	16	100%	16	100%	16	100%

**Substance Abuse Residential Bed Utilization Rate
Summary Tables- Continued**

Percentage Point Change and Number / Percent of Grantees with Improved or Worse Score				
SA Residential Bed Utilization Rate: Percentage Point Change	FY10 to FY11		FY11 to FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees
Improved 41 or more points	0	0%	0	0%
Improved 21 to 40 points	2	13%	2	13%
Improved 6 to 20 points	4	27%	1	6%
Improved 1 to 5 points	2	13%	1	6%
No Change	0	0%	0	0%
Down -1 to -5 points	1	7%	2	13%
Down -6 to -20 points	5	33%	5	31%
Down -21 to -40 points	1	7%	1	6%
Down -41 or more points	0	0%	4	25%
<i>TOTALS</i>	15	100%	16	100%

Attachment A.5 CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Follow-Up Client Status Review Completion Rate: Grantee Performance - Advisory Measure

Follow-Up Client Status Review (CSR) Completion Rate. This measure looks at clients with an open case (case was open at any time during the selected time period) and calculates the proportion who were "due" at least one follow-up CSR within the selected time period and had at least one follow-up CSR completed. Note: The count of clients "due" a follow-up CSR includes clients who are no longer receiving services but continue to have an open case. Detoxification, Psychiatric Emergency, Waitlist Only, and Assessment Only clients are excluded from this measure. **This report has not been updated to reflect the new requirement of administering a follow-up CSR every 4 months.**

A	Follow-up CSR Completion Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)		
	B	C	D	E	F	G	H	I	J
Grantee	AKAIMS ID	FY10 Episode % Complete (CSR Completion Rate)	FY11 Episode % Complete (CSR Completion Rate)	FY12 Episode % Complete (CSR Completion Rate)	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Clients Expected to have Episode Count and Did have One	Clients Expected to have Episode Count but Did Not have One	Total Clients Expected to have Episode Count
Access Alaska	68	89%	94%	95%	5	1			
Akeela, Inc (Co-ed)	1045	61%	42%	69%	(19)	27			
Akeela, Inc (Women and Children)	1145	61%	42%	69%	(19)	27			
Akeela, Inc - Gateway	56	n/a	60%	84%	n/a	24			
Alaska Addiction Rehabilitation Services	16	53%	65%	65%	12	0			
Alaska Children's Services	59	88%	98%	92%	10	(6)			
Alaska Family Services	23	57%	64%	80%	7	16			
Alaska Island Community Services	39	95%	91%	23%	(4)	(68)			
Aleutian/Pribilof Islands Association Inc.	15	18%	26%	22%	8	(4)			
Anchorage Community Mental Health Services	77	54%	57%	82%	3	25			
The Arc of Anchorage	46	69%	83%	73%	14	(10)			
Assets Inc.	21	57%	71%	90%	14	19			
Bristol Bay Area Health Corporation	74	20%	13%	34%	(7)	21			
Central Peninsula General Hospital	66	32%	64%	78%	32	14			
Community Connections	50	76%	68%	73%	(8)	5			
Cook Inlet Council on Alcohol and Drug Abuse	31	77%	90%	85%	13	(5)			
Cook Inlet Tribal Council	67	100%	92%	86%	(8)	(6)			
Copper River Native Association	48	44%	39%	61%	(5)	22			

A	Follow-up CSR Completion Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)		
	B	C	D	E	F	G	H	I	J
Grantee	AKAIMS ID	FY10 Episode % Complete (CSR Completion Rate)	FY11 Episode % Complete (CSR Completion Rate)	FY12 Episode % Complete (CSR Completion Rate)	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Clients Expected to have Episode Count and Did have One	Clients Expected to have Episode Count but Did Not have One	Total Clients Expected to have Episode Count
Sound Alternatives	38	45%	50%	72%	5	22			
Daybreak CMI	24	78%	92%	92%	14	0			
Denali Family Services	75	61%	74%	37%	13	(37)			
Eastern Aleutian Tribes Inc	69	38%	0%	21%	(38)	21			
Fairbanks Resource Agency	10	n/a	n/a	n/a					
Fairbanks Community Behavioral Health Center	88	35%	48%	50%	13	2			
Fairbanks Native Association (FNA)*	14	8%	64%	53%	56	(11)			
Family Centered Services of Alaska	51	84%	77%	95%	(7)	18			
Gastineau Human Services	7	13%	61%	74%	48	13			
Hope Community Resources Inc.	52	79%	100%	100%	21	0			
Interior AIDS Association	13	89%	93%	90%	4	(3)			
Juneau Alliance for Mental Health Inc	32	76%	82%	80%	6	(2)			
Juneau Youth Services	72	71%	39%	27%	(32)	(12)			
Kenai Peninsula Care Center	30	0%	29%	73%	29	44			
Kenaitze Indian Tribe	54	5%	5%	10%	0	5			
Ketchikan Indian Community	44	5%	16%	1%	11	(15)			
Lynn Canal Human Resources	35	76%	86%	100%	10	14			
Manilaq Behavioral Health	55	4%	15%	52%	11	37			
Mat-Su Health Services Inc.	73	85%	68%	45%	(17)	(23)			
Narcotic Drug Treatment Center Inc.	25	91%	93%	87%	2	(6)			
North Slope Borough Department of Health & Social Services	43	33%	13%	42%	(20)	29			
Norton Sound Health Corporation	53	5%	38%	20%	33	(18)			
Peninsula Community Health Centers	80	14%	15%	6%	1	(9)			
Petersburg Mental Health Services	40	49%	95%	95%	46	0			
Providence Kodiak Island Counseling Center	27	25%	49%	78%	24	29			
Providence Valdez Counseling Center	5	7%	17%	13%	10	(4)			
Railbelt Mental Health & Addictions	3	6%	13%	22%	7	9			
Rainforest Recovery Center	78	27%	0%	76%	(27)	76			
Salvation Army Booth Memorial	42	100%	25%	88%	(75)	63			
Salvation Army Clitheroe Center	19	31%	58%	67%	27	9			
Seaview Community Services	2	22%	13%	11%	(9)	(2)			
Sitka Counseling and Prevention Services	9	21%	25%	60%	4	35			
South Peninsula Behavioral Health Services Inc	71	32%	71%	83%	39	12			

A	Follow-up CSR Completion Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)		
	B	C	D	E	F	G	H	I	J
Grantee	AKAIMS ID	FY10 Episode % Complete (CSR Completion Rate)	FY11 Episode % Complete (CSR Completion Rate)	FY12 Episode % Complete (CSR Completion Rate)	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Clients Expected to have Episode Count and Did have One	Clients Expected to have Episode Count but Did Not have One	Total Clients Expected to have Episode Count
Southcentral Foundation - Anc (Combined AKAIMS/EDI) **	1047	16%	5%	42%	(11)	37			
Southcentral Foundation - McG (Combined AKAIMS/EDI) **	1147	16%	5%	42%	(11)	37			
S.E.A.R.H.C.	36	26%	78%	81%	52	3			
Tanana Chiefs Conference	12	31%	71%	91%	40	20			
TCC-FNA	90	100%	n/a	n/a					
Tok Area Counseling Center	11	99%	97%	72%	(2)	(25)			
Volunteers of America	20	48%	49%	66%	1	17			
Yukon-Kuskokwim Health Corporation	65	24%	9%	7%	(15)	(2)			
Youth Advocates of Sitka	8	57%	79%	87%	22	8			
FNA data.									

**Follow-up CSR Completion Rate
Summary Tables**

	Minimum, Maximum, and Average					
		FY10 Follow-up CSR Compl Rate	FY11 Follow-up CSR Compl Rate	FY12 Follow-up CSR Compl Rate	Percentage Pt Change* FY10 to FY11	Percentage Pt Change* FY11 to FY12
	Minimum	0%	0%	1%	-75	-68
	Maximum	100%	100%	100%	56	76
	Average	48%	53%	62%	6	9
*Minimum Percentage Point Change is the greatest negative point change; Maximum Percentage Point Change is the greatest positive point change; Average Percentage Point Change is the average point change.						

Attainment Range and Number / Percent of Grantees within each Range						
Follow-up CSR Completion Rate: Attainment Range	FY10		FY11		FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
100%	3	5%	1	2%	2	3%
95% - 99%	2	3%	3	5%	3	5%
90% - 94%	1	2%	7	12%	5	9%
80% - 89%	5	9%	3	5%	11	19%
70% - 79%	7	12%	7	12%	9	16%
60% - 69%	4	7%	8	14%	7	12%
40% - 59%	9	16%	8	14%	7	12%
20% - 39%	14	24%	7	12%	8	14%
< 20%	13	22%	14	24%	6	10%
TOTALS	58	100%	58	100%	58	100%

**Follow-up CSR Completion Rate
Summary Tables- Continued**

**Percentage Point Change and
Number / Percent of Grantees with
Improved or Worse Score**

Follow-up CSR Completion Rate: Percentage Point Change	FY10 to FY11		FY11 to FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees
Improved 41 or more points	4	7%	3	5%
Improved 21 to 40 points	9	16%	14	24%
Improved 6 to 20 points	16	28%	12	21%
Improved 1 to 5 points	8	14%	5	9%
No Change	1	2%	4	7%
Down -1 to -5 points	3	5%	7	12%
Down -6 to -20 points	12	21%	9	16%
Down -21 to -40 points	3	5%	3	5%
Down -41 or more points	1	2%	1	2%
<i>TOTALS</i>	57	100%	58	100%

Attachment A.6 CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Substance Abuse Successful Program Completion Rate: Grantee Performance - Advisory Measure

Substance Abuse (SA) Successful Program Completion Rate. This measure looks at the proportion of **disenrollments** from substance abuse treatment programs where the reason for disenrollment indicates the client successfully completed the program. A client is counted as having successfully completed the program if the reason for program disenrollment is "Successfully Completed Treatment" or "Referred to Another Program or Other Services with Satisfactory Progress." Disenrollments from detoxification programs are excluded from this measure. **Note: currently, this measure is not available for EDI Agencies.**

A	SA Successful Program Completion Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 % with Successful Completion	FY11 % with Successful Completion	FY12 % with Successful Completion	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Total Disenrolled	# with Successful Completion
Access Alaska	68							
AKEELA, Inc (Co-ed)	1045	55%	44%	59%	(11)	15		
AKEELA, Inc (Women and Children)	1145	38%	40%	35%	2	(5)		
Akeela, Inc - Gateway	56	n/a	40%	43%	n/a	3		
Alaska Addiction Rehabilitation Services	16	32%	20%	31%	(12)	11		
Alaska Children's Services	59							
Alaska Family Services	23	37%	37%	56%	0	19		
Alaska Island Community Services	39	n/a (EDI)	n/a (EDI)	n/a (EDI)				
Aleutian/Pribilof Islands Association Inc.	15	56%	55%	68%	(1)	13		
Anchorage Community Mental Health Services	77							
The Arc of Anchorage	46			0%				
Assets Inc.	21							
Bristol Bay Area Health Corporation	74	75%	58%	75%	(17)	17		
Central Peninsula General Hospital	66	63%	48%	48%	(15)	0		
Community Connections	50							
Cook Inlet Council on Alcohol and Drug Abuse	31	67%	76%	69%	9	(7)		
Cook Inlet Tribal Council	67	50%	33%	73%	(17)	40		

A	SA Successful Program Completion Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 % with Successful Completion	FY11 % with Successful Completion	FY12 % with Successful Completion	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Total Disenrolled	# with Successful Completion
Copper River Native Association	48	46%	61%	37%	15	(24)		
Sound Alternatives	38	48%	50%	72%	2	22		
Daybreak CMI	24							
Denali Family Services	75							
Eastern Aleutian Tribes Inc	69	68%	59%	47%	(9)	(12)		
Fairbanks Resource Agency	10							
Fairbanks Community Behavioral Health Center	88							
Fairbanks Native Association *	14	30%	72%	63%	42	(9)		
Family Centered Services of Alaska	51			67%				
Gastineau Human Services	7	39%	51%	38%	12	(13)		
Hope Community Resources Inc.	52							
Interior AIDS Association	13	36%	13%	0%	(23)	(13)		
Juneau Alliance for Mental Health Inc	32							
Juneau Youth Services	72	n/a (EDI)	n/a (EDI)	n/a (EDI)				
Kenai Peninsula Care Center	30							
Kenaitze Indian Tribe	54	57%	35%	38%	(22)	3		
Ketchikan Indian Community	44	18%	25%	29%	7	4		
Lynn Canal Human Resources	35	20%	38%	28%	18	(10)		
Maniilaq Behavioral Health	55	21%	28%	24%	7	(4)		
Mat-Su Health Services Inc.	73							
Narcotic Drug Treatment Center Inc.	25	12%	5%	25%	(7)	20		
North Slope Borough Department of Health & Social Services	43	49%	40%	52%	(9)	12		
Norton Sound Health Corporation	53	13%	10%	1%	(3)	(9)		
Peninsula Community Health Centers	80							
Petersburg Mental Health Services	40	33%	43%	41%	10	(2)		
Providence Kodiak Island Counseling Center	27	34%	52%	42%	18	(10)		
Providence Valdez Counseling Center	5	65%	65%	67%	0	2		
Railbelt Mental Health & Addictions	3	44%	43%	64%	(1)	21		
Rainforest Recovery Center	78	45%	68%	58%	23	(10)		
Salvation Army Booth Memorial	42	70%	43%	69%	(27)	26		
Salvation Army Clitheroe Center	19	56%	43%	56%	(13)	13		
Seaview Community Services	2	42%	31%	33%	(11)	2		
Sitka Counseling and Prevention Services	9	43%	45%	56%	2	11		

A	SA Successful Program Completion Rate -- Comparison Across Years: FY10, FY11, and FY12						FY12 Detail (Not displayed per HIPAA)	
	B	C	D	E	F	G	H	I
Grantee	AKAIMS ID	FY10 % with Successful Completion	FY11 % with Successful Completion	FY12 % with Successful Completion	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12	Total Disenrolled	# with Successful Completion
South Peninsula Behavioral Health Services Inc	71							
Southcentral Foundation (W&C) - ANC (AKAIMS only)	1047	47%	36%	34%	(11)	(2)		
Southcentral Foundation (Adult) - McG (AKAIMS only)	1147		13%	0%		(13)		
S.E.A.R.H.C.	36	62%	66%	61%	4	(5)		
Tanana Chiefs Conference	12	73%	62%	80%	(11)	18		
TCC-FNA	90	70%						
Tok Area Counseling Center	11							
Volunteers of America	20	57%	47%	47%	(10)	0		
Yukon-Kuskokwim Health Corporation	65	72%	62%	59%	(10)	(3)		
Youth Advocates of Sitka	8							
* FNA performance in FY11 & FY12 includes TCC-FNA data.								

**Substance Abuse Successful Program Completion Rate
Summary Tables**

Minimum, Maximum, and Average					
	FY10 % Successful Completion	FY11 % Successful Completion	FY12 % Successful Completion	Percentage Pt Change* FY10 to FY11	Percentage Pt Change* FY11 to FY12
Minimum	12%	5%	0%	-27	-24
Maximum	75%	76%	80%	42	40
Average	47%	44%	46%	-2	3
*Minimum Percentage Point Change is the greatest negative point change; Maximum Percentage Point Change is the greatest positive point change; Average Percentage Point Change is the average point change.					

Attainment Range and Number / Percent of Grantees within each Range						
SA Successful Program Completion Rate: Attainment Range	FY10		FY11		FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
100%	0	0%	0	0%	0	0%
95% - 99%	0	0%	0	0%	0	0%
90% - 94%	0	0%	0	0%	0	0%
80% - 89%	0	0%	0	0%	1	3%
70% - 79%	5	14%	2	5%	3	8%
60% - 69%	5	14%	6	16%	8	20%
40% - 59%	14	38%	17	45%	13	33%
20% - 39%	10	27%	9	24%	11	28%
< 20%	3	8%	4	11%	4	10%
<i>TOTALS</i>	37	100%	38	100%	40	100%

**Substance Abuse Successful Program Completion Rate
Summary Tables- Continued**

Percentage Point Change and Number / Percent of Grantees with Improved or Worse Score				
SA Successful Program Completion Rate: Percentage Point Change	FY10 to FY11		FY11 to FY12	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees
Improved 41 or more points	1	3%	0	0%
Improved 21 to 40 points	1	3%	4	11%
Improved 6 to 20 points	8	22%	10	26%
Improved 1 to 5 points	4	11%	5	13%
No Change	2	6%	2	5%
Down -1 to -5 points	3	8%	6	16%
Down -6 to -20 points	14	39%	10	26%
Down -21 to -40 points	3	8%	1	3%
Down -41 or more points	0	0%	0	0%
<i>TOTALS</i>	36	100%	38	100%

Attachment A.7 CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Average Number of Days from Screening (AST) to First “Treatment” Service (RBA Measure):
Grantee Performance - Advisory Measure

Average Number of Days from Screening (AST) to First “Treatment” Service (RBA Measure). This measure looks at the elapsed period of time (# of days) from the completion of the Alaska Screening Tool (AST) to the date of the first treatment service. This measure is a proxy for the performance of the treatment system relative to timely access and engagement into treatment services. **Note:** the AST, CSR, and Assessment are excluded from the count of “first treatment service.” Assessment-only clients are excluded from this measure.

Grey Columns Not Displayed Per HIPAA

A Grantee	B AKAIMS ID	C		D		E		F		G		H	
		FY12 - ADULTS		FY12 - YOUTH		FY12 - All							
		Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment
Access Alaska	68		11										11
AKEELA, Inc (Co-ed)	1045		(2)				5						(2)
AKEELA, Inc (Women and Children)	1145		(2)				5						(2)
Akeela, Inc - Gateway	56		(13)				7						(9)
Alaska Addiction Rehabilitation Services	16		0										0
Alaska Children's Services	59		7				1						2
Alaska Family Services	23		27				9						22
Alaska Island Community Services	39		n/a				n/a						(33)
Aleutian/Pribilof Islands Association Inc.	15		1				8						1
Anchorage Community Mental Health Services	77		(287)				5						(217)
The Arc of Anchorage	46		27										27
Assets Inc.	21		23										23
Bristol Bay Area Health Corporation	74		18				31						21
Central Peninsula General Hospital	66		10				10						10
Community Connections	50		21				13						13
Cook Inlet Council on Alcohol and Drug Abuse	31		20				6						20
Cook Inlet Tribal Council	67		(1)										(1)
Copper River Native Association	48		11				3						10
Sound Alternatives	38		11				39						16

Grey Columns Not Displayed Per HIPAA

A Grantee	B AKAIMS ID	C		D		E		F		G		H	
		FY12 - ADULTS				FY12 - YOUTH				FY12 - All			
		Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment	Count of Clients Interviewed	Avg # Days from AST to 1st Treatment		
Daybreak CMI	24		5									5	
Denali Family Services	75		n/a				n/a					(60)	
Eastern Aleutian Tribes Inc	69		(10)				2					(6)	
Fairbanks Resource Agency	10												
Fairbanks Community Behavioral Health Center	88		17				18					17	
Fairbanks Native Association *	14		2									2	
Family Centered Services of Alaska	51		34				24					25	
Gastineau Human Services	7		21									21	
Hope Community Resources Inc.	52		45				22					26	
Interior AIDS Association	13		52									52	
Juneau Alliance for Mental Health Inc	32		25									25	
Juneau Youth Services	72		n/a				n/a					(40)	
Kenai Peninsula Care Center	30		7				(10)					(3)	
Kenaitze Indian Tribe	54		(7)				(19)					(9)	
Ketchikan Indian Community	44		9				15					11	
Lynn Canal Human Resources	35		6				5					6	
Maniilaq Behavioral Health	55		(9)				6					(7)	
Mat-Su Health Services Inc.	73		n/a				n/a					1	
Narcotic Drug Treatment Center Inc.	25		(1)									(1)	
North Slope Borough Department of Health & Social Services	43		26				51					27	
Norton Sound Health Corporation	53		21				30					23	
Peninsula Community Health Centers	80		(196)				(266)					(220)	
Petersburg Mental Health Services	40		2				2					2	
Providence Kodiak Island Counseling Center	27		2				15					4	
Providence Valdez Counseling Center	5		4				58					23	
Railbelt Mental Health & Addictions	3		22				32					29	
Rainforest Recovery Center	78		1									1	
Salvation Army Booth Memorial	42		2				3					3	
Salvation Army Clitheroe Center	19		13									13	
Seaview Community Services	2		22				24					22	
Sitka Counseling and Prevention Services	9		25				39					30	

**Average Number of Days from AST to First 'Treatment' Service
 Summary Tables**

	Minimum, Maximum, and Average			
		FY12 Avg # Days Adults	FY12 Avg # Days Youth	FY12 Avg # Days ALL
	Minimum	(287)	(266)	(220)
	Maximum	52	88	52
Average	3	7	(0)	

Attainment Range and Number / Percent of Grantees within each Range						
Average Number of Days from AST to First 'Treatment' Service: Attainment Range	FY12 - Adults		FY12 - Youth		FY12 - All	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
< (21)	2	4%	2	5%	6	10%
(8) - (21)	3	6%	3	7%	2	3%
(1) - (7)	7	13%	0	0%	8	14%
0-7	12	22%	13	32%	12	21%
8-14	9	17%	5	12%	9	16%
15-21	8	15%	5	12%	6	10%
22-28	8	15%	4	10%	11	19%
29-35	2	4%	4	10%	2	3%
>35	3	6%	5	12%	2	3%
<i>TOTALS</i>	54	100%	41	100%	58	100%

Attachment A.8 CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012
Program Enrollments with No Service in More than 134 Days (RBA Measure): Grantee Performance - Advisory Measure

Program Enrollments with No Service in More than 134 Days (RBA Measure). This measure looks at the proportion of program **enrollments** where there is a gap of more than 134 days since the client's last service. This measure targets timely program disenrollment and/or discharge in order to facilitate accurate reporting of several State and Federal outcome measures. This report currently displays the number of enrollments with a gap of more than 134 days between services, but does not provide the number of enrollments with a gap of more than 134 days since the **last** service. **Note: currently, this measure is not available for EDI Agencies.**

Grey Columns Not Displayed Per HIPAA

A	B	C	D	E	F	G	H	I	J	K
Grantee	AKAIMS ID	FY12 - ADULTS			FY12 - YOUTH			FY12 - All		
		Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days	Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days	Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days
Access Alaska	68			0.0%			0.0%			0.0%
AKEELA, Inc (Co-ed)	1045			0.4%			0.0%			0.4%
AKEELA, Inc (Women and Children)	1145			0.4%			0.0%			0.4%
Akeela, Inc - Gateway	56			0.5%			0.0%			0.5%
Alaska Addiction Rehabilitation Services	16			0.0%			0.0%			0.0%
Alaska Children's Services	59			0.0%			0.0%			0.0%
Alaska Family Services	23			0.0%			0.0%			0.0%
Alaska Island Community Services	39			n/a (EDI)			n/a (EDI)			n/a (EDI)
Aleutian/Pribilof Islands Association Inc.	15			1.1%			0.0%			1.1%
Anchorage Community Mental Health Services	77			7.4%			1.7%			6.9%
The Arc of Anchorage	46			1.6%			0.0%			1.6%
Assets Inc.	21			0.0%			0.0%			0.0%
Bristol Bay Area Health Corporation	74			1.5%			3.1%			2.0%
Central Peninsula General Hospital	66			1.0%			0.0%			1.0%
Community Connections	50			0.0%			2.6%			2.6%
Cook Inlet Council on Alcohol and Drug Abuse	31			1.4%			0.0%			1.4%
Cook Inlet Tribal Council	67			0.0%			0.0%			0.0%
Copper River Native Association	48			1.9%			0.0%			1.9%
Sound Alternatives	38			10.0%			11.1%			10.1%

Grey Columns Not Displayed Per HIPAA

A	B	C	D	E	F	G	H	I	J	K
Grantee	AKAIMS ID	FY12 - ADULTS			FY12 - YOUTH			FY12 - All		
		Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days	Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days	Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days
Daybreak CMI	24			2.7%			0.0%			2.7%
Denali Family Services	75			n/a (EDI)			n/a (EDI)			n/a (EDI)
Eastern Aleutian Tribes Inc	69			0.0%			0.0%			0.0%
Fairbanks Resource Agency	10									
Fairbanks Community Behavioral Health Center	88			2.8%			2.8%			2.8%
Fairbanks Native Association *	14			3.7%			0.0%			3.7%
Family Centered Services of Alaska	51			0.0%			0.6%			0.6%
Gastineau Human Services	7			1.4%			0.0%			1.4%
Hope Community Resources Inc.	52			0.0%			0.0%			0.0%
Interior AIDS Association	13			0.0%			0.0%			0.0%
Juneau Alliance for Mental Health Inc	32			1.2%			0.0%			1.2%
Juneau Youth Services	72			n/a (EDI)			n/a (EDI)			n/a (EDI)
Kenai Peninsula Care Center	30			0.0%			0.0%			0.0%
Kenaitze Indian Tribe	54			0.0%			4.6%			4.6%
Ketchikan Indian Community	44			0.8%			0.0%			0.8%
Lynn Canal Human Resources	35			3.1%			2.8%			3.0%
Manilaq Behavioral Health	55			4.3%			5.0%			4.4%
Mat-Su Health Services Inc.	73			n/a (EDI)			n/a (EDI)			n/a (EDI)
Narcotic Drug Treatment Center Inc.	25			0.0%			0.0%			0.0%
North Slope Borough Department of Health & Social Services	43			8.5%			5.4%			8.1%
Norton Sound Health Corporation	53			0.0%			2.1%			2.1%
Peninsula Community Health Centers	80			0.7%			0.6%			0.7%
Petersburg Mental Health Services	40			6.5%			0.0%			6.5%
Providence Kodiak Island Counseling Center	27			7.7%			8.2%			7.8%
Providence Valdez Counseling Center	5			1.2%			8.3%			2.3%
Railbelt Mental Health & Addictions	3			0.0%			0.0%			0.0%
Rainforest Recovery Center	78			no data			no data			no data
Salvation Army Booth Memorial	42			0.0%			0.0%			0.0%
Salvation Army Clitheroe Center	19			0.0%			0.0%			0.0%
Seaview Community Services	2			1.8%			2.6%			1.9%
Sitka Counseling and Prevention Services	9			1.7%			0.0%			1.7%

Grey Columns Not Displayed Per HIPAA

A	B	C	D	E	F	G	H	I	J	K
Grantee	AKAIMS ID	FY12 - ADULTS			FY12 - YOUTH			FY12 - All		
		Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days	Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days	Count of Service Gaps Over 134 Days	Enrollment Count in Specified Period	% Enrolled Not Served For Over 134 Days
South Peninsula Behavioral Health Services Inc	71			0.4%			0.0%			0.4%
Southcentral Foundation (W&C) - ANC (AKAIMS only)	1047			5.5%			4.7%			5.3%
Southcentral Foundation (Adult) - McG (AKAIMS only)	1147			5.5%			4.7%			5.3%
S.E.A.R.H.C.	36			2.6%			0.0%			2.6%
Tanana Chiefs Conference	12			5.7%			0.0%			5.7%
TCC-FNA	90									
Tok Area Counseling Center	11			4.3%			0.0%			4.3%
Volunteers of America	20			0.0%			0.0%			0.0%
Yukon-Kuskokwim Health Corporation	65			0.50%			1.3%			0.7%
Youth Advocates of Sitka	8			0.0%			0.0%			0.0%
* FNA performance in FY12 includes TCC-FNA data.										

**Program Enrollments with No Service in More than 134 Days
Summary Tables**

	Minimum, Maximum, and Average			
		FY12 % with No Service Adults	FY12 % with No Service Youth	FY12 % with No Service All
	Minimum	0.0%	0.0%	0.0%
	Maximum	10.0%	11.1%	10.1%
	Average	1.9%	1.4%	2.1%

Attainment Range and Number / Percent of Grantees within each Range						
% Enrolled with No Service for Over 134 Days: Attainment Range	FY12 - Adults		FY12 - Youth		FY12 - All	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
0%	20	38%	35	66%	16	30%
0.1% - 2.0%	18	34%	4	8%	18	34%
2.1% - 6.0%	10	19%	11	21%	14	26%
6.1% - 10.0%	5	9%	2	4%	4	8%
10.1% - 12.0%	0	0%	1	2%	1	2%
<i>TOTALS</i>	53	100%	53	100%	53	100%

Attachment A.9 CBHTR Grantee Performance Through 3rd Qtr: FY2010, FY2011, & FY2012

Client Change Over Time in CSR Health Domains (RBA Measure) - Adults & Youth Combined: Grantee Performance - Advisory Measure

Client Change Over Time in CSR Health Domains (RBA Measure). This measure looks at the CSR health-related quality of life questions (i.e., the first seven questions of the CSR). For clients who had a follow-up CSR during the reporting period, this measure compares the total number of “bad days” (for all seven questions combined) reported in the initial CSR to the total number of “bad days” reported in the most recent follow-up CSR. If the total number of “bad days” decreased, then the client is counted as showing improvement in the CSR Health Domains. This measure reports the proportion of clients showing improvement in the CSR Health Domains for each of the following target populations: SMI, SED, COD, General MH, and SUD. **Note: currently, this measure is not available for EDI Agencies.**



Grey Columns Not Displayed Per HIPAA

A Grantee	B AKAIMS ID	C		D		E		F		G		H		I		J		K		L	
		SMI		SED		COD		General MH		SUD											
		# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains
Access Alaska	68		30%																		
AKEELA, Inc (Co-ed)	1045										100%										39%
AKEELA, Inc (Women and Children)	1145										100%										39%
Akeela, Inc - Gateway	56		77%		63%						67%			63%							52%
Alaska Addiction Rehabilitation Services	16										100%										60%
Alaska Children's Services	59						44%								50%						
Alaska Family Services	23						33%				67%			21%							43%
Alaska Island Community Services	39		n/a (EDI)		n/a (EDI)						n/a (EDI)			n/a (EDI)							n/a (EDI)
Aleutian/Pribilof Islands Association Inc.	15		33%											33%							35%
Anchorage Community Mental Health Services	77		50%		49%									40%							
The Arc of Anchorage	46		72%		67%						100%			67%							
Assets Inc.	21		60%		50%									67%							
Bristol Bay Area Health Corporation	74		40%		20%									75%							15%
Central Peninsula General Hospital	66		50%		50%						67%			57%							70%
Community Connections	50				59%									67%							
Cook Inlet Council on Alcohol and Drug Abuse	31																				38%
Cook Inlet Tribal Council	67																				74%
Copper River Native Association	48		40%		50%						75%			50%							50%

A	B	C	D	E	F	G	H	I	J	K	L
Grantee	AKAIMS ID	SMI		SED		COD		General MH		SUD	
		# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains
Sound Alternatives	38		69%						50%		53%
Daybreak CMI	24		54%								
Denali Family Services	75		n/a (EDI)								
Eastern Aleutian Tribes Inc	69		50%		50%						63%
Fairbanks Resource Agency	10										
Fairbanks Community Behavioral Health Center	88		44%		53%				43%		
Fairbanks Native Association *	14										70%
Family Centered Services of Alaska	51				47%		25%		63%		79%
Gastineau Human Services	7						23%				36%
Hope Community Resources Inc.	52		75%		36%				50%		
Interior AIDS Association	13										71%
Juneau Alliance for Mental Health Inc	32		55%						60%		
Juneau Youth Services	72		n/a (EDI)								
Kenai Peninsula Care Center	30				67%				33%		
Kenaitze Indian Tribe	54				47%		100%		50%		20%
Ketchikan Indian Community	44										
Lynn Canal Human Resources	35		62%		82%		67%		65%		75%
Maniilaq Behavioral Health	55		42%		17%		67%				45%
Mat-Su Health Services Inc.	73		n/a (EDI)								
Narcotic Drug Treatment Center Inc.	25										61%
North Slope Borough Department of Health & Social Services	43		65%		100%		75%		50%		44%
Norton Sound Health Corporation	53		58%		46%		36%		48%		42%
Peninsula Community Health Centers	80		60%		53%				54%		
Petersburg Mental Health Services	40		74%		80%		67%		70%		67%
Providence Kodiak Island Counseling Center	27		55%		52%		58%		37%		57%
Providence Valdez Counseling Center	5		45%				50%		100%		60%
Railbelt Mental Health & Addictions	3		50%		60%		100%		20%		88%
Rainforest Recovery Center	78										80%
Salvation Army Booth Memorial	42						57%		69%		80%
Salvation Army Clitheroe Center	19										59%
Seaview Community Services	2		25%		50%		100%		100%		50%

A	B	C	D	E	F	G	H	I	J	K	L
Grantee	AKAIMS ID	SMI		SED		COD		General MH		SUD	
		# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains	# Clients Improving / # Clients with Follow-Up CSR	% of Clients Improving in Health Domains
Sitka Counseling and Prevention Services	9		52%		55%		57%		89%		59%
South Peninsula Behavioral Health Services Inc	71		35%		45%				43%		
Southcentral Foundation (W&C) - ANC (AKAIMS only)	1047		54%		40%		40%		45%		64%
Southcentral Foundation (Adult) - McG (AKAIMS only)	1147		54%		40%		40%		45%		64%
S.E.A.R.H.C.	36		80%		50%		100%		85%		61%
Tanana Chiefs Conference	12		46%								58%
TCC-FNA	90										
Tok Area Counseling Center	11		73%		44%						
Volunteers of America	20						56%				40%
Yukon-Kuskokwim Health Corporation	65		38%		33%		60%		33%		50%
Youth Advocates of Sitka	8				43%						
* FNA performance in FY12 includes TCC-FNA data.											

**Client Change Over Time in CSR Health Domains - Adults & Youth Combined
Summary Tables**

	Minimum, Maximum, and Average					
		FY12 SMI % Improving	FY12 SED % Improving	FY12 COD % Improving	FY12 Gen MH % Improving	FY12 SUD % Improving
	Minimum	25.0%	17.0%	23.0%	20.0%	15.0%
	Maximum	80.0%	100.0%	100.0%	100.0%	88.0%
Average	53.5%	50.8%	68.7%	55.6%	55.6%	

Attainment Range and Number / Percent of Grantees within each Range										
% Improving in CSR Health Domains: Attainment Range	FY12 - SMI		FY12 - SED		FY12 - COD		FY12 - General MH		FY12 - SUD	
	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees	# of Grantees	% of Grantees
100%	0	0%	1	3%	8	30%	2	6%	0	0%
90% - 99%	0	0%	0	0%	0	0%	0	0%	0	0%
80% - 89%	1	3%	2	6%	0	0%	2	6%	3	8%
70% - 79%	5	15%	0	0%	2	7%	2	6%	6	16%
60% - 69%	5	15%	4	12%	7	26%	8	24%	8	21%
50% - 59%	11	33%	11	33%	5	19%	8	24%	9	24%
40% - 49%	6	18%	10	30%	2	7%	6	18%	5	13%
30% - 39%	4	12%	3	9%	1	4%	4	12%	5	13%
< 30%	1	3%	2	6%	2	7%	2	6%	2	5%
TOTALS	33	100%	33	100%	27	100%	34	100%	38	100%

Attachment B

CBHTR Grantee Performance Report Card: Standard and Advisory Measures- FY2010, FY2011, & FY2012

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ACCESS ALASKA**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		97%	100%	100%	3	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	100%	100%	100%	0	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		89%	94%	95%	5	1
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults	Youth	All		
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		11				11
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		30%				

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: ***AKEELA, INC (CO-ED)***

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	97%	100%	-3	3
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	95%	83%	90%	-12	7
	CSR % Compliance	88%	79%	89%	-9	10
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		166%	162%	91%	-4	-71
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		61%	42%	69%	-19	27
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		55%	44%	59%	-11	15
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-2		5		-2
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.4%		0.0%		0.4%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
				100%		39%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: ***AKEELA, INC (WOMEN AND CHILDREN)***

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	97%	100%	-3	3
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	95%	83%	90%	-12	7
	CSR % Compliance	88%	79%	89%	-9	10
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		76%	99%	93%	23	-6
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		61%	42%	69%	-19	27
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		38%	40%	35%	2	-5
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-2		5		-2
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.4%		0.0%		0.4%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
				100%		39%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **AKEELA, INC - GATEWAY**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		n/a	79%	88%	n/a	9
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		n/a	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	n/a	94%	99%	n/a	5
	CSR % Compliance	n/a	91%	98%	n/a	7
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		n/a	39%	75%	n/a	36
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		n/a	60%	84%	n/a	24
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		n/a	40%	43%	n/a	3
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-13		7		-9
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.5%		0.0%		0.5%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		77%	63%	67%	63%	52%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ALASKA ADDICTION REHAB SERVICE - NUGEN'S RANCH**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		93%	86%	71%	-7	-15
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	100%	100%	100%	0	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		89%	92%	94%	3	2
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		53%	65%	65%	12	0
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		32%	20%	31%	-12	11
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		0				0
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
				100%		60%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ALASKA CHILDREN'S SERVICES**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	90%	98%	100%	8	2
	CSR % Compliance	88%	95%	100%	7	5
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		88%	98%	92%	10	-6
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		7		1	2	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%	0.0%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			44%		50%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ALASKA FAMILY SERVICES, INC**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		90%	79%	79%	-11	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	97%	98%	99%	1	1
	CSR % Compliance	90%	98%	95%	8	-3
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		57%	64%	80%	7	16
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		37%	37%	56%	0	19
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		27		9		22
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			33%	67%	21%	43%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *ALASKA ISLAND COUNSELING SERVICES*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	83%	92%	-12	9
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	99%	100%	100%	1	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		95%	91%	23%	-4	-68
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		n/a (EDI)	n/a (EDI)	n/a (EDI)		
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		n/a		n/a	-33	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		n/a (EDI)		n/a (EDI)	n/a (EDI)	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ALEUTIAN PRIBILOF ISL. ASSN.**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	92%	96%	-3	4
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	85%	75%	98%	-10	23
	CSR % Compliance	93%	86%	92%	-7	6
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		18%	26%	22%	8	-4
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		56%	55%	68%	-1	13
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		1		8		1
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.1%		0.0%		1.1%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		33%			33%	35%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ANCHORAGE COMMUNITY MENTAL HEALTH SERVICES**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	46%	94%	99%	48	5
	CSR % Compliance	48%	91%	98%	43	7
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		54%	57%	82%	3	25
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-287		5	-217	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		7.4%		1.7%	6.9%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		50%	49%		40%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ARC OF ANCHORAGE**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	64%	86%	100%	22	14
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		69%	83%	73%	14	-10
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)				0%		
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		27			27	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.6%		0.0%		1.6%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		72%	67%	100%	67%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **ASSETS**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	100%	100%	5	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	80%	100%	100%	20	0
	CSR % Compliance	80%	89%	73%	9	-16
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		57%	71%	90%	14	19
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		23			23	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		60%	50%		67%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **BRISTOL BAY AREA HEALTH CORP.**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	79%	96%	-16	17
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	98%	80%	91%	-18	11
	CSR % Compliance	87%	73%	82%	-14	9
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		107%	113%	56%	6	-57
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		20%	13%	34%	-7	21
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		75%	58%	75%	-17	17
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		18		31		21
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.5%		3.1%		2.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		40%	20%		75%	15%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **CENTRAL PENINSULA GENERAL HOSPITAL**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	92%	0	-8
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	95%	97%	100%	2	3
	CSR % Compliance	91%	93%	100%	2	7
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		88%	97%	91%	9	-6
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		32%	64%	78%	32	14
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		63%	48%	48%	-15	0
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		10		10		10
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.0%		0.0%		1.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		50%	50%	67%	57%	70%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *COMMUNITY CONNECTIONS*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		90%	75%	92%	-15	17
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	96%	68%	100%	-28	32
	CSR % Compliance	92%	45%	95%	-47	50
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		76%	68%	73%	-8	5
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		21		13	13	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		2.6%	2.6%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			59%		67%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **COOK INLET COUNCIL ON ALCOHOL & DRUG ABUSE**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	78%	0	-22
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	98%	99%	98%	1	-1
	CSR % Compliance	89%	84%	89%	-5	5
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		77%	90%	85%	13	-5
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		67%	76%	69%	9	-7
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		20		6		20
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.4%		0.0%		1.4%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
						38%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **COOK INLET TRIBAL COUNCIL, INC**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	100%	92%	5	-8
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	96%	94%	56%	-2	-38
	CSR % Compliance	98%	99%	99%	1	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		162%	142%	97%	-20	-45
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		100%	92%	86%	-8	-6
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		50%	33%	73%	-17	40
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-1			-1	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
						74%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *COPPER RIVER NATIVE ASSOCIATION*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		78%	94%	100%	16	6
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	88%	98%	89%	10	-9
	CSR % Compliance	88%	94%	87%	6	-7
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		44%	39%	61%	-5	22
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		46%	61%	37%	15	-24
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		11		3		10
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.9%		0.0%		1.9%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		40%	50%	75%	50%	50%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **CORDOVA COMM. MED. CLINIC - SOUND ALTERNATIVES**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	100%	100%	5	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	87%	65%	83%	-22	18
	CSR % Compliance	86%	51%	83%	-35	32
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		45%	50%	72%	5	22
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		48%	50%	72%	2	22
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		11		39		16
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		10.0%		11.1%		10.1%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		69%				50%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **DAYBREAK**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	92%	83%	-8	-9
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	72%	100%	-28	28
	CSR % Compliance	90%	72%	93%	-18	21
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		78%	92%	92%	14	0
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		5			5	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		2.7%		0.0%		2.7%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		54%				

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: ***DENALI FAMILY SERVICES***

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	100%	100%	5	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	96%	83%	94%	-13	11
	CSR % Compliance	84%	84%	95%	0	11
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		61%	74%	37%	13	-37
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		n/a		n/a		-60
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		n/a (EDI)		n/a (EDI)		n/a (EDI)
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *EASTERN ALEUTIAN TRIBES*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	85%	100%	-15	15
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	98%	90%	73%	-8	-17
	CSR % Compliance	90%	62%	61%	-28	-1
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		38%	0%	21%	-38	21
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		68%	59%	47%	-9	-12
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-10		2	-6	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%	0.0%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		50%	50%			63%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **FAIRBANKS RESOURCE AGENCY**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	n/a	n/a		
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		n/a	n/a	n/a		
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	n/a	n/a	n/a		
	CSR % Compliance	n/a	n/a	n/a		
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		n/a	n/a	n/a		
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)						
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)						
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **FAIRBANKS CBHC**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	95%	99%	96%	4	-3
	CSR % Compliance	90%	97%	91%	7	-6
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		35%	48%	50%	13	2
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		17		18		17
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		2.8%		2.8%		2.8%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		44%	53%		43%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *FAIRBANKS NATIVE ASSOCIATION*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		85%	92%	100%	7	8
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	99%	88%	-1	-11
	CSR % Compliance	100%	100%	97%	0	-3
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		69%	103%	59%	34	-44
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		8%	64%	53%	56	-11
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		30%	72%	63%	42	-9
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		2				2
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		3.7%		0.0%		3.7%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *FAMILY CENTERED SERVICES*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	83%	76%	98%	-7	22
	CSR % Compliance	95%	83%	99%	-12	16
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		84%	77%	95%	-7	18
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)				67%		
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		34		24		25
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.6%		0.6%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			47%	25%	63%	79%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **GASTINEAU HUMAN SERVICES**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	61%	97%	100%	36	3
	CSR % Compliance	60%	95%	99%	35	4
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		13%	61%	74%	48	13
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		39%	51%	38%	12	-13
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		21				21
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.4%		0.0%		1.4%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
				23%		36%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **HOPE COMMUNITY RESOURCES**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	100%	100%	100%	0	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		79%	100%	100%	21	0
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		45		22		26
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		75%	36%		50%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *INTERIOR AIDS ASSOCIATION*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	88%	100%	-12	12
	CSR % Compliance	93%	100%	100%	7	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		89%	93%	90%	4	-3
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		36%	13%	0%	-23	-13
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		52			52	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
						71%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **JUNEAU ALLIANCE FOR MENTAL HEALTH INC.**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	61%	100%	100%	39	0
	CSR % Compliance	61%	99%	100%	38	1
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		76%	82%	80%	6	-2
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		25			25	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.2%		0.0%		1.2%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		55%				60%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *JUNEAU YOUTH SERVICES*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	79%	100%	-21	21
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	97%	94%	100%	-3	6
	CSR % Compliance	98%	79%	100%	-19	21
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		71%	39%	27%	-32	-12
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		n/a (EDI)	n/a (EDI)	n/a (EDI)		
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		n/a		n/a		-40
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		n/a (EDI)		n/a (EDI)		n/a (EDI)
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: ***KENAI PENIN. COMM. CARE***

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	76%	92%	-24	16
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	93%	84%	94%	-9	10
	CSR % Compliance	93%	72%	94%	-21	22
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		0%	29%	73%	29	44
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		7		-10	-3	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%	0.0%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			67%		33%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **KENAITZE INDIAN TRIBE**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	83%	88%	-12	5
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	93%	92%	99%	-1	7
	CSR % Compliance	81%	75%	99%	-6	24
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		5%	5%	10%	0	5
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		57%	35%	38%	-22	3
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-7		-19		-9
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		4.6%		4.6%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			47%	100%	50%	20%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **KETCHIKAN INDIAN COMMUNITY**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		38%	63%	74%	25	11
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	70%	64%	20%	-6	-44
	CSR % Compliance	67%	57%	32%	-10	-25
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		5%	16%	1%	11	-15
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		18%	25%	29%	7	4
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		9		15		11
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.8%		0.0%		0.8%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **LYNN CANAL COUNSELING**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		90%	100%	96%	10	-4
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	57%	99%	100%	42	1
	CSR % Compliance	57%	100%	100%	43	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		76%	86%	100%	10	14
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		20%	38%	28%	18	-10
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		6		5		6
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		3.1%		2.8%		3.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		62%	82%	67%	65%	75%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **MANILAQ ASSO.**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		90%	67%	100%	-23	33
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	89%	66%	87%	-23	21
	CSR % Compliance	59%	37%	64%	-22	27
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		4%	15%	52%	11	37
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		21%	28%	24%	7	-4
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-9		6	-7	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		4.3%		5.0%	4.4%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		42%	17%	67%		45%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **MAT-SU HEALTH SVC.**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	83%	83%	-17	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	95%	95%	-5	0
	CSR % Compliance	100%	100%	94%	0	-6
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		85%	68%	45%	-17	-23
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		n/a		n/a		1
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		n/a (EDI)		n/a (EDI)		n/a (EDI)
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)	n/a (EDI)

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **NARCOTIC DRUG TREATMENT CENTER**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	65%	0	-35
	CSR % Compliance	100%	100%	63%	0	-37
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		91%	93%	87%	2	-6
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		12%	5%	25%	-7	20
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-1			-1	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
						61%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **NORTH SLOPE BOROUGH**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	92%	100%	-8	8
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	59%	70%	86%	11	16
	CSR % Compliance	58%	69%	85%	11	16
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		33%	13%	42%	-20	29
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		49%	40%	52%	-9	12
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		26		51		27
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		8.5%		5.4%		8.1%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		65%	100%	75%	50%	44%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **NORTON SOUND HEALTH CORPORATION**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		90%	89%	100%	-1	11
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	84%	99%	99%	15	0
	CSR % Compliance	82%	98%	95%	16	-3
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		5%	38%	20%	33	-18
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		13%	10%	1%	-3	-9
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		21		30		23
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		2.1%		2.1%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		58%	46%	36%	48%	42%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *PENINSULA COMM. HEALTH SV.*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		93%	100%	88%	7	-12
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	93%	93%	97%	0	4
	CSR % Compliance	91%	94%	97%	3	3
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		14%	15%	6%	1	-9
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-196		-266		-220
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.7%		0.6%		0.7%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		60%	53%		54%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **PETERSBURG MENTAL HEALTH SERVICES**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	100%	100%	100%	0	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		49%	95%	95%	46	0
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		33%	43%	41%	10	-2
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		2		2		2
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		6.5%		0.0%		6.5%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		74%	80%	67%	70%	67%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **PROVIDENCE KODIAK ISLAND COUNSELING CENTER**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	96%	100%	-4	4
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	84%	100%	100%	16	0
	CSR % Compliance	92%	100%	100%	8	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		25%	49%	78%	24	29
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		34%	52%	42%	18	-10
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		2		15		4
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		7.7%		8.2%		7.8%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		55%	52%	58%	37%	57%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **PROVIDENCE VALDEZ COUNSELING CENTER**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	92%	0	-8
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	74%	96%	90%	22	-6
	CSR % Compliance	70%	96%	92%	26	-4
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		7%	17%	13%	10	-4
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		65%	65%	67%	0	2
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		4		58		23
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.2%		8.3%		2.3%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		45%			50%	100%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *RAILBELT MENTAL HEALTH AND ADDICTIONS*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	88%	0	-12
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	100%	100%	100%	0	0
	CSR % Compliance	100%	100%	100%	0	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		6%	13%	22%	7	9
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		44%	43%	64%	-1	21
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		22		32		29
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		50%	60%	100%	20%	88%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **RAINFOREST RECOVERY CENTER**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	99%	91%	100%	-8	9
	CSR % Compliance	76%	91%	100%	15	9
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		76%	85%	83%	9	-2
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		27%	0%	76%	-27	76
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		45%	68%	58%	23	-10
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		1				1
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		no data		no data		no data
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
						80%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *SALVATION ARMY - BOOTH MEMORIAL*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	74%	100%	-26	26
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	83%	80%	95%	-3	15
	CSR % Compliance	67%	77%	95%	10	18
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		100%	25%	88%	-75	63
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		70%	43%	69%	-27	26
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		2		3		3
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
				57%	69%	80%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **SALVATION ARMY - CLITHEROE CENTER**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		93%	93%	88%	0	-5
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	91%	96%	100%	5	4
	CSR % Compliance	92%	99%	99%	7	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		98%	70%	68%	-28	-2
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		31%	58%	67%	27	9
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		56%	43%	56%	-13	13
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		13			13	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
						59%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *SEAVIEW COMM. SVC.*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		93%	92%	96%	-1	4
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	97%	96%	98%	-1	2
	CSR % Compliance	97%	96%	97%	-1	1
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		22%	13%	11%	-9	-2
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		42%	31%	33%	-11	2
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		22		24		22
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.8%		2.6%		1.9%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		25%	50%	100%	100%	50%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *SITKA COUNSELING AND PREVENTION SERVICES*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	92%	100%	-8	8
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	97%	97%	99%	0	2
	CSR % Compliance	96%	95%	99%	-1	4
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		81%	85%	76%	4	-9
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		21%	25%	60%	4	35
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		43%	45%	56%	2	11
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		25		39		30
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		1.7%		0.0%		1.7%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		52%	55%	57%	89%	59%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: ***SOUTH PENIN. BEHAV. HEALTH***

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	99%	99%	99%	0	0
	CSR % Compliance	96%	99%	99%	3	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		32%	71%	83%	39	12
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		13		9		12
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.4%		0.0%		0.4%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		35%	45%		43%	

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *SOUTHCENTRAL FOUNDATION - ANC*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	88%	0	-12
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	98%	80%	99%	-18	19
	CSR % Compliance	97%	80%	98%	-17	18
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		72%	65%	59%	-7	-6
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		16%	5%	42%	-11	37
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		47%	36%	34%	-11	-2
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		9		15		11
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		5.5%		4.7%		5.3%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		54%	40%	40%	45%	64%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *SOUTHCENTRAL FOUNDATION - MCG*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	98%	80%	99%	-18	19
	CSR % Compliance	97%	80%	98%	-17	18
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		16%	5%	42%	-11	37
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)			13%	0%		-13
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		9		15		11
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		5.5%		4.7%		5.3%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		54%	40%	40%	45%	64%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **SOUTHEAST ALASKA REGIONAL HEALTH CONSORTIUM**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		95%	100%	96%	5	-4
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	93%	93%	84%	0	-9
	CSR % Compliance	77%	90%	79%	13	-11
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		80%	68%	94%	-12	26
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		26%	78%	81%	52	3
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		62%	66%	61%	4	-5
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-2		-11		-4
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		2.6%		0.0%		2.6%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		80%	50%	100%	85%	61%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **TANANA CHEIFS CONFERENCE**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	92%	82%	-8	-10
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	96%	94%	91%	-2	-3
	CSR % Compliance	97%	93%	93%	-4	0
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		140%	121%	90%	-19	-31
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		31%	71%	91%	40	20
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		73%	62%	80%	-11	18
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		37		88		38
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		5.7%		0.0%		5.7%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		46%				58%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *TANANA CHEIFS CONFERENCE - FNA*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	n/a	n/a		
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	n/a	n/a		
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	99%				
	CSR % Compliance	98%	n/a			
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		85%	n/a	n/a		
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		100%	n/a	n/a		
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		70%				
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)						
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)						
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **TOK AREA MENTAL HEALTH COUNCIL**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	86%	0	-14
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	99%	93%	92%	-6	-1
	CSR % Compliance	94%	93%	87%	-1	-6
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		99%	97%	72%	-2	-25
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		32		5	20	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		4.3%		0.0%	4.3%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		73%	44%			

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **VOLUNTEERS OF AMERICA ALASKA**

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	100%	0	0
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	97%	100%	100%	3	0
	CSR % Compliance	98%	95%	100%	-3	5
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		92%	74%	80%	-18	6
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		48%	49%	66%	1	17
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		57%	47%	47%	-10	0
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		16		29		23
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%		0.0%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
				56%		40%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: **YKHC**Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	100%	95%	0	-5
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	90%	87%	91%	-3	4
	CSR % Compliance	88%	88%	92%	0	4
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)		100%	116%	101%	16	-15
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		24%	9%	7%	-15	-2
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)		72%	62%	59%	-10	-3
Advisory "RBA Measures"		FY2012				
		Adults		Youth		All
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		-7		23		1
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.5%		1.3%		0.7%
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
		38%	33%	60%	33%	50%

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment B. CBHTR Grantee Performance Report Card: Standard and Advisory Measures - FY2010, FY2011, & FY2012

GRANTEE: *YOUTH ADVOCATES OF SITKA*

Performance Through 3rd Quarter (March 31st) of each year:

Standard Measures		FY2010*	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Grant Review and Progress Report: DBH Staff Score (Attachment A.1)		100%	85%	92%	-15	7
2. Participation in Administering the Behavioral Health Consumer Survey (Attachment A.2)		Yes	Yes	Yes	n/a	n/a
3. Data Completeness & Compliance (Attachment A.3)	AST % Compliance	84%	95%	93%	11	-2
	CSR % Compliance	68%	89%	97%	21	8
4. Substance Abuse Residential Bed Utilization Rate (Attachment A.4)						
Advisory Measures		FY2010	FY2011	FY2012	Percentage Point Change FY10 to FY11	Percentage Point Change FY11 to FY12
1. Follow-Up Client Status Review Completion Rate (Attachment A.5)		57%	79%	87%	22	8
2. Substance Abuse Successful Program Completion Rate (Attachment A.6)						
Advisory "RBA Measures"		FY2012				
		Adults		Youth	All	
3. Average # of Days from AST to First Treatment Service (Attachment A.7)		16		-73	-53	
4. Percent of Program Enrollments with No Service in More than 134 Days (Attachment A.8)		0.0%		0.0%	0.0%	
5. Client Change Over Time in CSR Health Domains: Adult & Youth Combined - Percent of Clients Improving (Attachment A.9)		SMI	SED	COD	Gen MH	SUD
			43%			

*In FY2010, grantees were held accountable for the four standard performance measures; grantees who achieved a high performance were awarded a funding increment in their FY2011 CBHTR grant award.

Attachment C

FY2012 DBH Treatment & Recovery Services: Grant Review and Progress Report

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Access Alaska Inc.		
Grant No:	602-12-202	FY12 Funding:	\$1,005
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
Detoxification – SA		1,005 SMI – Outpatient – MH
Youth Residential – SA		Adult – Outpatient – SA
Youth Residential – MH		Women and Children – Outpatient – SA
Adult Residential – SA		Employment Services
Women and Children’s Residential – SA		Disability Justice – MH and SA
Adult Residential – MH		Consumer/Family Directed Program – MH
Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
Recovery Camps – SA		Other
SED Youth Outpatient – MH		1,005 TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Access Alaska Inc.

Grant No: 602-12-202 **FY12 funding:** \$1,005

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Akeela, Inc.		
Grant No:	602-12-230	FY12 Funding:	\$681,225
Reviewer:	Joan Houlihan	Date:	

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
681,225	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	681,225	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Akeela staff are very active participants in community planning, not only as part of the Anchorage Regional Behavioral Health Coalition, but as voluntary participants on various task forces, work groups, associations, etc.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

All Reports were submitted on time.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

The Quarterly Narrative and Logic Model Reports are up to date, informative and accurately reflect progress achieved.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

The Logic Model Reports contain numbers, percentages, and comparisons and clearly demonstrate progress toward the stated Outcomes.

Grantee:

Grant No: **FY12 funding:**

Reviewer: **Date:**

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Akeela, Inc.		
Grant No:	602-12-231	FY12 Funding:	\$896,955
Reviewer:	Joan Houlihan	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH	184,576	Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
712,379	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH		896,955 TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Akeela staff is extremely active in community planning, not only as part of the Anchorage Regional Behavioral Health Coalition, but as participants in many other planning groups, task forces and workgroups.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

In addition to providing the services committed to in their grant agreement, Akeela upgraded their facilities and made several improvements to this program re: integration of mental health and substance abuse services.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

All Reports were submitted on time.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Reports are complete, informative, and demonstrate progress toward stated outcomes.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

The Logic Model for this program contains numbers and statistics that clearly demonstrate progress toward stated outputs.

Grantee:

Grant No: **FY12 funding:**

Reviewer: **Date:**

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Gateway for Human Services (Akeela Inc.)		
Grant No:	602-12-237	FY12 Funding:	\$1,057,638
Reviewer:	Richard Nault	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

36,330	Psychiatric Emergency Services – MH	16,900	Youth and Family Outpatient – SA
-	Detoxification – SA	482,261	SMI – Outpatient – MH
	Youth Residential – SA	146,954	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
296,320	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
78,873	SED Youth Outpatient – MH	1,057,638	TOTAL

Comments:

Agency attempted to implement ambulatory detox but could not find medical staff willing to provide oversight as defined in regulations.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Grantees face a particular challenge in Ketchikan as non DBH grantees are reluctant to participate in the CAP process. This is partly because many of the functions of the CAP are performed by two groups that meet regularly; the Behavioral Health Action Group (BHAG) and Wellness coalition. Grantees have made tremendous progress in the CAP process by meeting together monthly and utilizing the existing groups to meet the intent of the CAP process.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 0

0=NO

3=YES

Comments:

Ambulatory detox services were not provided. This was largely outside the control of Gateway, as the medical availability and oversight required by regulation was not available in Ketchikan. Nonetheless, service delivery differed from the FY'10 CBHTR submission.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

All reports were complete and submitted on time.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic Model has been used to improve psychiatric services. Statistics show that a very small percentage of the many clients seen (Ketchikan has a high utilization of PES contacts), few of those seen are subsequently sent to DET facilities. Children's services have also expanded and improved.

Grantee: Gateway for Human Services (Akeela Inc.)

Grant No: 602-12-237 **FY12 funding:** \$1,057,638

Reviewer: Richard Nault **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	0	0	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					63
Weighted Score divided by Total Possible					
FINAL SCORE					87.50%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Alaska Addiction Rehabilitation Services, Inc./Nugen's Ranch		
Grant No:	602-12-280	FY12 Funding:	\$878,829
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
878,829	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	878,829	TOTAL

Comments:

ARRS only provides longterm residential services for individuals with chronic substance use disorders. AARS reduced patient beds from 25 to 20 in FY12 and no longer provides treatment to individuals with significant medical and co-occurring disorders due to thier new facilities distance from emergency services.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 6

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 8

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 4

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Alaska Addiction Rehabilitation Services, Inc./Nugen's Ranch

Grant No: 602-12-280 **FY11 funding:** \$878,829

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	1	6	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	2	8	12
	3	2	2	4	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					51
Weighted Score divided by Total Possible					
FINAL SCORE					70.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Alaska Children's Services		
Grant No:	602-12-203	FY12 Funding:	\$144,839
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
144,839	SED Youth Outpatient – MH	144,839	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Alaska Children's Services

Grant No: 602-12-203 **FY12 funding:** \$144,839

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Alaska Family Services, Inc.		
Grant No:	602-12-260	FY12 Funding:	\$540,172
Reviewer:	Joan Houlihan	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

	180,058	Youth and Family Outpatient – SA
Psychiatric Emergency Services – MH		SMI – Outpatient – MH
Detoxification – SA		
Youth Residential – SA	180,057	Adult – Outpatient – SA
Youth Residential – MH		
Adult Residential – SA	180,057	Women and Children – Outpatient – SA
Women and Children’s Residential – SA		Employment Services
Adult Residential – MH		Disability Justice – MH and SA
Outpatient Opioid Treatment Program – SA		Consumer/Family Directed Program – MH
Recovery Camps – SA		Pilots – MH and SA
SED Youth Outpatient – MH		Other
	540,172	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 6

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

The grantee did participate in their Regional Coalition's formulation of a Community Action Plan, however this CAP was not updated regularly.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

According to their AKAIMS data, Logic Model Reports and Quarterly Narratives, AFS has been successful in providing the services agreed upon.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

The 3rd Quarter Narrative was not received until 5/11/12.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

AFS does appear to have an adequate data entry system in place.

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

The AFS Logic Model is updated quarterly and contains actual numbers and percentages, which demonstrates progress.

Grantee: Alaska Family Services, Inc.

Grant No: 602-12-260 **FY12 funding:** \$540,172

Reviewer: Joan Houlihan **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	1	6	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					57
Weighted Score divided by Total Possible					
FINAL SCORE					79.17%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee: Alaska Islands Community Services

Grant No: 602-12-254 **FY12 Funding:** \$417,670

Reviewer: Richard Nault **Date:**

Program Types (please provide component funding amount for each program type):

200,634	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	46,466	SMI – Outpatient – MH
	Youth Residential – SA	132,724	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
37,846	SED Youth Outpatient – MH	417,670	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Alaska Islands Community Services

Grant No: 602-12-254 **FY12 funding:** \$417,670

Reviewer: Richard Nault **Date:** 1/0/1900

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Aleutian Pribilof Island Association		
Grant No:	602-12-268	FY12 Funding:	\$302,647
Reviewer:	Sharon Walluk	Date:	May 10,2012

Program Types (please provide component funding amount for each program type):

60,826	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	91,450	SMI – Outpatient – MH
	Youth Residential – SA	109,487	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
40,884	SED Youth Outpatient – MH	302,647	TOTAL

Comments:

No comment

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency has recently completed a "community readiness survey" and are beginning to analyse to determine revised program directions based on identified community needs. The survey also looked at barriers to service delivery and coordination and will take the survey results into account in planning responses to these barriers.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

No comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

1st quarter narrative report was received late in Juneau

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Reports were complete and very informative about current status of services and activities

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

No comments

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Agency is using Logic Model to work toward CARF accreditation and reports indicate they are taking steps to obtain accreditation.

Grantee: Aleutian Pribilof Island Association

Grant No: 602-12-268 **FY11 funding:** \$302,647

Reviewer: Sharon Walluk **Date:** May 10,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					69
Weighted Score divided by Total Possible					
FINAL SCORE					95.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	ACMHS		
Grant No:	602-12-204	FY12 Funding:	\$4,804,398
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	3,497,525	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
1,306,873	SED Youth Outpatient – MH	4,804,398	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Allen Blair, the Clinical Director for DFS, has taken a leadership role in our ARBHC/CAP group spearheading the improvements in our CAP for FY13 as well as facilitating our Provider's group meetings earlier in FY12.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

While discrepancies were noted and questioned regarding DFS's use of grant funds further investigation would be required by this reviewer could answer with a "no".

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: ACMHS

Grant No: 602-12-204 **FY12 funding:** \$4,804,398

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Arc of Anchorage		
Grant No:	602-12-210	FY12 Funding:	\$342,630
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	227,229	SMI – Outpatient – MH
	Youth Residential – SA	41,253	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
74,148	SED Youth Outpatient – MH	342,630	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Arc of Anchorage

Grant No: 602-12-210 **FY12 funding:** \$342,630

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	ASSETS		
Grant No:	602-12-205	FY12 Funding:	\$787,707
Reviewer:	George Girod	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

Psychiatric Emergency Services – MH	Youth and Family Outpatient – SA
Detoxification – SA	787,707
Youth Residential – SA	SMI – Outpatient – MH
Youth Residential – MH	Adult – Outpatient – SA
Adult Residential – SA	Women and Children – Outpatient – SA
Women and Children’s Residential – SA	Employment Services
Adult Residential – MH	Disability Justice – MH and SA
Outpatient Opioid Treatment Program – SA	Consumer/Family Directed Program – MH
Recovery Camps – SA	Pilots – MH and SA
SED Youth Outpatient – MH	Other
	787,707 TOTAL

Comments:

All reporting timely and complete. Reports and physical on-site visit indicate good client care.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: ASSETS

Grant No: 602-12-205 **FY12 funding:** \$787,707

Reviewer: George Girod **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee: Bristol Bay Area Health Corporation

Grant No: 602-12-281 **FY12 Funding:** \$937,662

Reviewer: Sharon Walluk **Date:** May 10,2012

Program Types (please provide component funding amount for each program type):

207,698	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	131,876	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
409,184	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
188,904	SED Youth Outpatient – MH	937,662	TOTAL

Comments:

Adult SUD outpatient and day treatment program are totaled into the residential budget since residential program staff are the same as outpatient.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Program is making concerted effort to become more fully integrated with trainings for staff being provided. Plan is for all staff to understand SUD and how that interacts with suicidal behavioral so as to better respond. They also are providing ASSIST training and working with the local schools to provide prevention services.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

No comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

Second quarter narrative report was late.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Reports were complete and very informative about current status of services and activities

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

No comments

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Agency is using data being gathered to evaluate and to plan for changes to improve program services and outcomes.

Grantee: Bristol Bay Area Health Corporation

Grant No: 602-12-281 **FY11 funding:** \$937,662

Reviewer: Sharon Walluk **Date:** May 10,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					69
Weighted Score divided by Total Possible					
FINAL SCORE					95.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Central Peninsula General Hospital/Serenity House		
Grant No:	602-12-282	FY12 Funding:	\$87,807
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
87,807	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	87,807	TOTAL

Comments:

Comments: CPGH attempted to provide 12 residential beds, but was unable to do so due to staffing issues and reduced beds back to 10.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Central Peninsula General Hospital/Serenity House

Grant No: 602-12-282 **FY11 funding:** \$87,807

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Community Connections		
Grant No:	602-12-250	FY12 Funding:	\$174,840
Reviewer:	Richard Nault	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
174,840	SED Youth Outpatient – MH	174,840	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Difficult to ascertain whether services were improved. However, the kinds of activities that the CAP engaged in were likely to have improved services and quality of life issues for clients and the community.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Community Connections

Grant No: 602-12-250 **FY12 funding:** \$174,840

Reviewer: Richard Nault **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Cook Inlet Council on Alcoholism and Drug Abuse		
Grant No:	602-12-232	FY12 Funding:	\$486,477
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

	35,972	Youth and Family Outpatient – SA
Psychiatric Emergency Services – MH		SMI – Outpatient – MH
Detoxification – SA		Adult – Outpatient – SA
Youth Residential – SA	282,160	Women and Children – Outpatient – SA
Youth Residential – MH	168,345	Employment Services
Adult Residential – SA		Disability Justice – MH and SA
Women and Children’s Residential – SA		Consumer/Family Directed Program – MH
Adult Residential – MH		Pilots – MH and SA
Outpatient Opioid Treatment Program – SA		Other
Recovery Camps – SA		486,477 TOTAL
SED Youth Outpatient – MH		

Comments:

Comments: CICADA discontinued the provision of Intensive Outpatient Treatment in FY12.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 3

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 2

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Cook Inlet Council on Alcoholism and Drug Abuse

Grant No: 602-12-232 **FY11 funding:** \$486,477

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	1	3	9
	2	4	3	12	12
	3	2	1	2	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					56
Weighted Score divided by Total Possible					
FINAL SCORE					77.78%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Cook Inlet Tribal Council, Inc.		
Grant No:	602-12-233	FY12 Funding:	\$1,454,792
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
1,120,189	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
334,603	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	1,454,792	TOTAL

Comments:

None

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

None

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

None

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

No effort or changes reported in Outcomes #1,2,3 relating to Increase in satisfaction with services, Increase in persons reporting their life has improved and Decrease in reported days of substance use in past month for all 3 quarters. Minimal effort and little changes reported on Outcomes 1,2,3 relating to maintenance of 90% utilization rate for each level of care, Improved and consistent adherence to the Recovery Oriented System of Care, and Minimally 50% will complete entry level of care and 30% will be retained in a step down level of care for all 3 quarters

Grantee: Cook Inlet Tribal Council, Inc.

Grant No: 602-12-233 **FY12 funding:** \$1,454,792

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Copper River Native Association		
Grant No:	602-12-283	FY12 Funding:	\$237,344
Reviewer:	Sharon Walluk	Date:	May 10,2012

Program Types (please provide component funding amount for each program type):

47,469	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	59,336	SMI – Outpatient – MH
	Youth Residential – SA	83,070	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
47,469	SED Youth Outpatient – MH	237,344	TOTAL

Comments:

No comment

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency has reported active participation with coordinating agencies working together to improve the service delivery system and coordination of services. This was demonstrated at community meetings during recent site visit.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

No comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

no comments

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Reports were complete and very informative about current status of services and activities

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Per request, Agency is no longer entering Hudson Lake data onto the quarter report

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Agency is using data being gathered to evaluate and to plan for changes to improve program services and outcomes. They did an agency and community wide survey to assess service needs and they are beginning to review the information for planning.

Grantee: Copper River Native Association

Grant No: 602-12-283 **FY11 funding:** \$237,344

Reviewer: Sharon Walluk **Date:** May 10,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Sound Alternatives - Cordova Community Medical Center		
Grant No:	602-12-288	FY12 Funding:	\$357,605
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

63,559	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	89,573	SMI – Outpatient – MH
	Youth Residential – SA	99,070	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
105,403	SED Youth Outpatient – MH	357,605	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Sound Alternatives - Cordova Community Medical Center

Grant No: 602-12-288 **FY12 funding:** \$357,605

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Daybreak, Inc.		
Grant No:	602-12-263	FY12 Funding:	\$98,906
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

Psychiatric Emergency Services – MH	Youth and Family Outpatient – SA
Detoxification – SA	98,906
Youth Residential – SA	SMI – Outpatient – MH
Youth Residential – MH	Adult – Outpatient – SA
Adult Residential – SA	Women and Children – Outpatient – SA
Women and Children’s Residential – SA	Employment Services
Adult Residential – MH	Disability Justice – MH and SA
Outpatient Opioid Treatment Program – SA	Consumer/Family Directed Program – MH
Recovery Camps – SA	Pilots – MH and SA
SED Youth Outpatient – MH	Other
	98,906 TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 6

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

No new activity/progress documented in Quarters 2 or 3.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Daybreak, Inc.

Grant No: 602-12-263 **FY12 funding:** \$98,906

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	1	6	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					60
Weighted Score divided by Total Possible					
FINAL SCORE					83.33%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Denali Family Services		
Grant No:	602-12-201	FY12 Funding:	\$106,101
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
106,101	SED Youth Outpatient – MH	106,101	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Denali Family Services

Grant No: 602-12-201 **FY12 funding:** \$106,101

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Eastern Aleutian Tribes		
Grant No:	602-12-264	FY12 Funding:	\$291,551
Reviewer:	Sharon Walluk	Date:	May 10,2012

Program Types (please provide component funding amount for each program type):

43,733	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	29,155	SMI – Outpatient – MH
	Youth Residential – SA	160,353	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
58,310	SED Youth Outpatient – MH	291,551	TOTAL

Comments:

No comment

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency has reported active participation with coordinating agencies (APIA) working together to improve the service delivery system and coordination of services in all communities. They also are working closely with the local school district to coordinate referrals and services.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

No comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

no comments

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

Reports were complete and very informative about current status of services and activities

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

No comments

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Agency has used data gathered per Logic Model to redesign PES service system and also has identified issues that will need continued work in FY13.

Grantee: Eastern Aleutian Tribes

Grant No: 602-12-264 **FY11 funding:** \$291,551

Reviewer: Sharon Walluk **Date:** May 10,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	FCBHC		
Grant No:	602-12-270	FY12 Funding:	\$2,595,939
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

508,786	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	1,508,331	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
578,822	SED Youth Outpatient – MH	2,595,939	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee:

Grant No: **FY12 funding:**

Reviewer: **Date:**

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Fairbanks Native Association		
Grant No:	602-12-271	FY12 Funding:	\$3,120,704
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
1,697,324	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		129,423
	Youth Residential – MH		Adult – Outpatient – SA
770,127	Adult Residential – SA		Women and Children – Outpatient – SA
523,830	Women and Children’s Residential – SA		Employment Services
	Adult Residential – MH		Disability Justice – MH and SA
	Outpatient Opioid Treatment Program – SA		Consumer/Family Directed Program – MH
	Recovery Camps – SA		Pilots – MH and SA
	SED Youth Outpatient – MH		Other
		3,120,704	TOTAL

Comments:

None

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

None

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

None

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

None. Well done.

Grantee: Fairbanks Native Association

Grant No: 602-12-271 **FY12 funding:** \$3,120,704

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Family Centered Services of Alaska		
Grant No:	602-12-273	FY12 Funding:	\$562,672
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
562,672	SED Youth Outpatient – MH	562,672	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Family Centered Services of Alaska

Grant No: 602-12-273 **FY12 funding:** \$562,672

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Gastineau Human Services		
Grant No:	602-12-241	FY12 Funding:	\$337,962
Reviewer:	Marilee Fletcher	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

Psychiatric Emergency Services – MH	Youth and Family Outpatient – SA
Detoxification – SA	SMI – Outpatient – MH
Youth Residential – SA	337,962
Youth Residential – MH	Adult – Outpatient – SA
Adult Residential – SA	Women and Children – Outpatient – SA
Women and Children’s Residential – SA	Employment Services
Adult Residential – MH	Disability Justice – MH and SA
Outpatient Opioid Treatment Program – SA	Consumer/Family Directed Program – MH
Recovery Camps – SA	Pilots – MH and SA
SED Youth Outpatient – MH	Other
	337,962 TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Gastineau Human Services

Grant No: 602-12-241 **FY12 funding:** \$337,962

Reviewer: Marilee Fletcher **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Hope Community Resources		
Grant No:	602-12-206	FY12 Funding:	\$75,376
Reviewer:	Dave Reeves, M.Ed.	Date:	5/21/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
75,376	SED Youth Outpatient – MH	75,376	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Hope Community Resources

Grant No: 602-12-206 **FY12 funding:** \$75,376

Reviewer: Dave Reeves, M.Ed. **Date:** 5/21/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Interior AIDS Association/Project Special Delivery		
Grant No:	602-12-284	FY12 Funding:	\$222,015
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
222,015	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	222,015	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Interior AIDS Association/Project Special Delivery

Grant No: 602-12-284 **FY11 funding:** \$222,015

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Juneau Alliance for Mental Health Inc.		
Grant No:	602-12-251	FY12 Funding:	\$1,598,072
Reviewer:	Richard Nault	Date:	5/18/2012

Program Types (please provide component funding amount for each program type):

336,975	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	1,261,097	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	1,598,072	TOTAL

Comments:

\$325,000 is Difficulat to place 'pass through' money to Polaris House.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Juneau has a very active CAP team. JAMHI participates on an ongoing basis. Services show improvement on a quarterly basis.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Grants funds were appropriately expended. SMI and PES clients are receiving good services.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

The agency has a very detailed Outcome monitoring report that breaks down itmes of the logic model and additional progress idicators and is making excellent progress toward measurable objectives.

Grantee: Juneau Alliance for Mental Health Inc.

Grant No: 602-12-251 **FY12 funding:** \$1,598,072

Reviewer: Richard Nault **Date:** 5/18/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Juneau Youth Services		
Grant No:	602-12-244	FY12 Funding:	\$880,217
Reviewer:	Richard Nault	Date:	5/18/2012

Program Types (please provide component funding amount for each program type):

57,700	Psychiatric Emergency Services – MH	114,430	Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
53,790	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
654,297	SED Youth Outpatient – MH	880,217	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

The Juneau team has an excellent planning document and all agencies worked together to improve services each quarter of this year.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

JYS implemented a clinical on call protocol that has been effective in preventing acute hospitalization of Juneau youth.

Grantee: Juneau Youth Services

Grant No: 602-12-244 **FY12 funding:** \$880,217

Reviewer: Richard Nault **Date:** 5/18/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Kenai Peninsula Community Care Center		
Grant No:	602-12-266	FY12 Funding:	\$14,593
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
14,593	SED Youth Outpatient – MH	14,593	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Minimal activity described in 2nd Quarter Report.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Kenai Peninsula Community Care Center

Grant No: 602-12-266 **FY12 funding:** \$14,593

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Kenaitze Indian Tribe		
Grant No:	602-12-267	FY12 Funding:	\$80,909
Reviewer:	Sharon Walluk	Date:	May 10,2012

Program Types (please provide component funding amount for each program type):

	18,263	Youth and Family Outpatient – SA
Psychiatric Emergency Services – MH	23,255	SMI – Outpatient – MH
Detoxification – SA	22,988	Adult – Outpatient – SA
Youth Residential – SA		Women and Children – Outpatient – SA
Youth Residential – MH		Employment Services
Adult Residential – SA		Disability Justice – MH and SA
Women and Children’s Residential – SA		Consumer/Family Directed Program – MH
Adult Residential – MH		Pilots – MH and SA
Outpatient Opioid Treatment Program – SA		Other
Recovery Camps – SA		
16,403		80,909 TOTAL
SED Youth Outpatient – MH		

Comments:

No comment

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

This agency is not the CBHT&R program responsible for community PES. They do work closely with the school district however, to respond to the needs of local students in both treatment and prevention per their quarter reports.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

No comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

The 3rd quarter narrative report was 1 day late in FY12

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Reports were complete and very informative about current status of services and activities.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Complete and demonstrate active delivery of services, especially to the schools.

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic model reports did not demonstrate progress on outcomes, nor did they describe any revisions to outcomes.

Grantee: Kenaitze Indian Tribe

Grant No: 602-12-267 **FY11 funding:** \$80,909

Reviewer: Sharon Walluk **Date:** May 10,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					63
Weighted Score divided by Total Possible					
FINAL SCORE					87.50%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Ketchikan Indian Community		
Grant No:	602-12-245	FY12 Funding:	\$14,734
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

Psychiatric Emergency Services – MH	Youth and Family Outpatient – SA
Detoxification – SA	SMI – Outpatient – MH
Youth Residential – SA	14,734
Youth Residential – MH	Adult – Outpatient – SA
Adult Residential – SA	Women and Children – Outpatient – SA
Women and Children’s Residential – SA	Employment Services
Adult Residential – MH	Disability Justice – MH and SA
Outpatient Opioid Treatment Program – SA	Consumer/Family Directed Program – MH
Recovery Camps – SA	Pilots – MH and SA
SED Youth Outpatient – MH	Other
	14,734 TOTAL

Comments:

None

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

CAP missing in first quarter

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

First quarter reports were submitted late

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 8

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

First quarter was submitted incomplete. No CAP.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Very minimal effort reported

Grantee: Ketchikan Indian Community

Grant No: 602-12-245 **FY12 funding:** \$14,734

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	2	8	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					53
Weighted Score divided by Total Possible					
FINAL SCORE					73.61%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Lynn Canal Counseling Services		
Grant No:	602-12-252	FY12 Funding:	\$262,709
Reviewer:	Richard Nault	Date:	5/18/2012

Program Types (please provide component funding amount for each program type):

19,740	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	122,101	SMI – Outpatient – MH
	Youth Residential – SA	67,994	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
52,874	SED Youth Outpatient – MH	262,709	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency utilizes the CAP process to improve services in a manner consistent with logic model. Improvement is seen each quarter.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

LCCC has served the appropriate targeted populations with a full array of services for a rural grantee.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

CFR for 1st quarter was tardy.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

Quarterly reports are highly detailed and provide a good picture of the agency's services and community involvement.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Agency is working on increasing referrals from primary care providers and utilizing CSR and other client feedback to increase quality of services. Data has help informed service delivery to the betterment of clients.

Grantee: Lynn Canal Counseling Services

Grant No: 602-12-252 **FY12 funding:** \$262,709

Reviewer: Richard Nault **Date:** 5/18/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					69
Weighted Score divided by Total Possible					
FINAL SCORE					95.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Maniilaq Association		
Grant No:	602-12-001	FY12 Funding:	\$1,363,670
Reviewer:	Sharon Walluk	Date:	5/10/2012

Program Types (please provide component funding amount for each program type):

297,410	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	71,101	SMI – Outpatient – MH
	Youth Residential – SA	924,057	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
71,102	SED Youth Outpatient – MH	1,363,670	TOTAL

Comments:

no comment

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency reports coordination with other local service agencies, village corporations and NSB and NSHC regional agencies to work together for suicide prevention and community wellness activities. This is being done through a Federal grant and they have provided training in local communities for providers as well as the general community members. School districts are included in the planning and implementation of these activities. They looking at ways to document the outcomes of these activities for evaluation and future planning

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

no comment, other than they are underspent at the end of the 3rd quarter.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

no comments

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

Reports are complete and include information and data which give a clear picture of program activities, problems and how they are attempting to solve the issues.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

No comment

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic model is focused on staff training and development and implementation of functioning billing system. These areas continue to be problematic but the agency is taking advantage of consultants, trainers and the Tribal team staff who are providing TA in these areas.

Grantee: Maniilaq Association

Grant No: 602-12-001 **FY11 funding:** \$1,363,670

Reviewer: Sharon Walluk **Date:** 5/10/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Mat-Su Health Services		
Grant No:	602-12-261	FY12 Funding:	\$1,702,095
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

255,359	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	887,323	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
559,413	SED Youth Outpatient – MH	1,702,095	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 6

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

No new activity documented in Quarter 2 or 3.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Mat-Su Health Services

Grant No: 602-12-261 **FY12 funding:** \$1,702,095

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	1	6	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					60
Weighted Score divided by Total Possible					
FINAL SCORE					83.33%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Narcotic Drug Treatment Center/Center for Drug Problems		
Grant No:	602-12-285	FY12 Funding:	\$950,301
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
950,301	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	950,301	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Narcotic Drug Treatment Center/Center for Drug Problems

Grant No: 602-12-285 **FY11 funding:** \$950,301

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	North Slope Borough		
Grant No:	602-12-274	FY12 Funding:	\$777,285
Reviewer:	Sharon Walluk	Date:	5/11/2012

Program Types (please provide component funding amount for each program type):

555,365	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	34,241	SMI – Outpatient – MH
	Youth Residential – SA	176,316	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
11,363	SED Youth Outpatient – MH	777,285	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency has been working with coordinating agencies, villages and other providers to improve response to crisis, suicide prevention and wellness approaches throughout the region as reported on the CAP summary each quarter.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic Model has been used to monitor activity in the following areas: intake process, CARF accreditation, new electronic HR and other areas this year. Documentation of activity and evaluation of outcomes is shown each quarter.

Grantee: North Slope Borough

Grant No: 602-12-274 **FY12 funding:** \$777,285

Reviewer: Sharon Walluk **Date:** 5/11/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Norton Sound Health Corporation		
Grant No:	602-12-002	FY12 Funding:	\$1,287,492
Reviewer:	Sharon Walluk	Date:	May 11,2012

Program Types (please provide component funding amount for each program type):

151,079	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	33,881	SMI – Outpatient – MH
	Youth Residential – SA	1,068,650	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
33,882	SED Youth Outpatient – MH	1,287,492	TOTAL

Comments:

Sobering Center planning project \$100,000 funding listed in Adult - Outpatient - SA

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency is involved with the federally funded Suicide Prevention project with Kawerak Inc, Maniilaq and NSB. This group also includes the relevant school districts and the local village councils. They also participate in the regional Wellness Forum for planning and are sponsoring the Cultural Committee for community input into the development of the new Wellness Center. They also attend regular meetings with DJJ, OCS and others and provide groups in coordination with the local Women's Shelter.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

no comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

no comment

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

Reports are complete and very informative providing good information about status of services being provided

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

no comment

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

The agency reports on 3 Logic Models because of the developing Wellness Center. Reports discuss issues and barriers to the goals and have been revised accordingly during the FY. Reports are informative and provide information on current progress.

Grantee: Norton Sound Health Corporation

Grant No: 602-12-002 **FY12 funding:** \$1,287,492

Reviewer: Sharon Walluk **Date:** May 11,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Peninsula Community Health Services		
Grant No:	602-12-262	FY12 Funding:	\$528,656
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

195,087	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	200,109	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
133,460	SED Youth Outpatient – MH	528,656	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2nd Quarter Narrative received on 1-31-12

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Peninsula Community Health Services

Grant No: 602-12-262 **FY12 funding:** \$528,656

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					63
Weighted Score divided by Total Possible					
FINAL SCORE					87.50%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Petersburg Mental Health Services		
Grant No:	602-12-253	FY12 Funding:	\$353,498
Reviewer:	Marilee Fletcher	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

183,731	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	31,088	SMI – Outpatient – MH
	Youth Residential – SA	123,983	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
14,696	SED Youth Outpatient – MH	353,498	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Petersburg Mental Health Services

Grant No: 602-12-253 **FY12 funding:** \$353,498

Reviewer: Marilee Fletcher **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Providence Kodiak Island Counseling Center		
Grant No:	602-12-286	FY12 Funding:	\$805,208
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

45,133	Psychiatric Emergency Services – MH	74,899	Youth and Family Outpatient – SA
	Detoxification – SA	456,738	SMI – Outpatient – MH
	Youth Residential – SA	120,497	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
107,941	SED Youth Outpatient – MH	805,208	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Providence Kodiak Island Counseling Center

Grant No: 602-12-286 **FY11 funding:** \$805,208

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Providence Valdez Counseling Center		
Grant No:	602-12-289	FY12 Funding:	\$329,232
Reviewer:	Viki Wells	Date:	5/14/2012

Program Types (please provide component funding amount for each program type):

101,475	Psychiatric Emergency Services – MH	40,509	Youth and Family Outpatient – SA
	Detoxification – SA	70,363	SMI – Outpatient – MH
	Youth Residential – SA	48,452	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
68,433	SED Youth Outpatient – MH	329,232	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Providence Valdez Counseling Center

Grant No: 602-12-289 **FY11 funding:** \$329,232

Reviewer: Viki Wells **Date:** 5/14/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Railbelt Mental Health and Addictions		
Grant No:	602-12-275	FY12 Funding:	\$295,831
Reviewer:	Viki Wells	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

222,124	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		73,707 Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH		295,831 TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Railbelt Mental Health and Addictions

Grant No: 602-12-275 **FY11 funding:** \$295,831

Reviewer: Viki Wells **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					63
Weighted Score divided by Total Possible					
FINAL SCORE					87.50%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Rainforest Recovery @ Bartlett Regional		
Grant No:	602-12-243	FY12 Funding:	\$650,414
Reviewer:	Marilee Fletcher	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
72,683	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
577,731	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	650,414	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO

3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Rainforest Recovery @ Bartlett Regional

Grant No: 602-12-243 **FY12 funding:** \$650,414

Reviewer: Marilee Fletcher **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Salvation Army Booth Memorial		
Grant No:	602-12-234	FY12 Funding:	\$53,606
Reviewer:	Joan Houlihan	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

	53,606	Youth and Family Outpatient – SA
Psychiatric Emergency Services – MH		SMI – Outpatient – MH
Detoxification – SA		Adult – Outpatient – SA
Youth Residential – SA		Women and Children – Outpatient – SA
Youth Residential – MH		Employment Services
Adult Residential – SA		Disability Justice – MH and SA
Women and Children’s Residential – SA		Consumer/Family Directed Program – MH
Adult Residential – MH		Pilots – MH and SA
Outpatient Opioid Treatment Program – SA		Other
Recovery Camps – SA		
SED Youth Outpatient – MH		
	53,606	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Not only did the Ex. Director and/or Clinical Director participate in Anchorage Regional Behavioral Health Coalition meetings, but they did extensive outreach to increase their visibility and referrals and to coordinate with other entities.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Booth put significant effort into improving their substance abuse education and treatment services during this fiscal year.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

All Reports were submitted on time.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

The Logic Model, in particular, is very comprehensive, as well as detailed and specific to each aspect of the program, and clearly demonstrates progress made toward proposed outcomes.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

As stated previously, the Logic Model is very well done and utilized fully to demonstrate progress toward proposed outcomes.

Grantee: Salvation Army Booth Memorial

Grant No: 602-12-234 **FY12 funding:** \$53,606

Reviewer: Joan Houlihan **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Salvation Army Clitheroe Center		
Grant No:	602-12-235	FY12 Funding:	\$3,623,372
Reviewer:	Joan Houlihan	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
234,480	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA	723,218	Adult – Outpatient – SA
	Youth Residential – MH	418,417	Women and Children – Outpatient – SA
1,428,856	Adult Residential – SA		Employment Services
818,401	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	3,623,372	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Clitheroe's Ex. Director and Clinical Director were very active in community planning and coordination with other treatment providers.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 3

0=NO 3=YES

Comments:

The Detoxification Unit was forced to close down on January 11th and had not yet reopened at the end of the 3rd quarter. The Women & Childrens Outpatient Program is no longer a gender specific program.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

The Quarter 2 T&R Quarterly Summary Report was submitted late.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

The Logic Model is well done; comprehensive and informative, and is clearly being utilized to track and demonstrate progress toward proposed outcomes.

Grantee: Salvation Army Clitheroe Center

Grant No: 602-12-235 **FY12 funding:** \$3,623,372

Reviewer: Joan Houlihan **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	1	3	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					63
Weighted Score divided by Total Possible					
FINAL SCORE					87.50%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Seaview Community Services		
Grant No:	602-12-287	FY12 Funding:	\$365,193
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

64,230	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	146,437	SMI – Outpatient – MH
	Youth Residential – SA	154,526	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	365,193	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Seaview was given full credit for this element as they pursued efforts independently from the Kenai BH Collaborative within their own service area.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

First Quarter Narrative was received on 11-3-11.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Seaview Community Services

Grant No: 602-12-287 **FY12 funding:** \$365,193

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					69
Weighted Score divided by Total Possible					
FINAL SCORE					95.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Sitka Counseling and Prevention		
Grant No:	602-12-247	FY12 Funding:	\$896,707
Reviewer:	Marilee Fletcher	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

123,039	Psychiatric Emergency Services – MH	88,967	Youth and Family Outpatient – SA
	Detoxification – SA	105,893	SMI – Outpatient – MH
	Youth Residential – SA	75,623	Adult – Outpatient – SA
	Youth Residential – MH	51,825	Women and Children – Outpatient – SA
300,000	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
151,360	SED Youth Outpatient – MH	896,707	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: Sitka Counseling and Prevention

Grant No: 602-12-247 **FY12 funding:** \$896,707

Reviewer: Marilee Fletcher **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	South Peninsula Behavioral Health Services		
Grant No:	602-12-207	FY12 Funding:	\$358,359
Reviewer:	Jim McLaughlin	Date:	5/16/2012

Program Types (please provide component funding amount for each program type):

104,158	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	188,399	SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
65,802	SED Youth Outpatient – MH	358,359	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

South Peninsula given full credit for this element as they pursued activities independently from the Kenai BH Collaborative within their own service area.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee: South Peninsula Behavioral Health Services

Grant No: 602-12-207 **FY12 funding:** \$358,359

Reviewer: Jim McLaughlin **Date:** 5/16/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	SouthCentral Foundation		
Grant No:	602-12-208	FY12 Funding:	\$393,746
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

1,000	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
280,917	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
111,829	SED Youth Outpatient – MH	393,746	TOTAL

Comments:

None

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

None

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

1st quarter report Narrative was late.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

SCF is still working on their Electronic Health Records' being compatible with AKAIMS

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Minimal effort reported on logic model process.

Grantee: SouthCentral Foundation

Grant No: 602-12-208 **FY12 funding:** \$393,746

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					63
Weighted Score divided by Total Possible					
FINAL SCORE					87.50%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	SCF McGrath		
Grant No:	602-12-200	FY12 Funding:	\$309,371
Reviewer:	Sharon Walluk	Date:	May 11,2012

Program Types (please provide component funding amount for each program type):

2,170	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	111,338	SMI – Outpatient – MH
	Youth Residential – SA	97,931	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
97,932	SED Youth Outpatient – MH	309,371	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Agency has been working to develop MOA's and new relationships with (IASD) local schools, City of McGrath and other providers to develop coordination for delivery of services and planning for the region.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

no comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

No comment

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

no comment

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic Model has been used to monitor success of activities being done to improve the crisis response system for the region.

Grantee: SCF McGrath

Grant No: 602-12-200 **FY12 funding:** \$309,371

Reviewer: Sharon Walluk **Date:** May 11,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	SouthEast Alaska Regional Health Consortium		
Grant No:	602-12-209	FY12 Funding:	\$906,802
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

36,440	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	360,500	SMI – Outpatient – MH
193,010	Youth Residential – SA	316,852	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	906,802	TOTAL

Comments:

N/A

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Most of the CAP was focused on coordination of services within SEARHC rather the community at large. Improvements were noted.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

CFR received late

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

None

Grantee: SouthEast Alaska Regional Health Consortium

Grant No: 602-12-209 **FY12 funding:** \$906,802

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					69
Weighted Score divided by Total Possible					
FINAL SCORE					95.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Tanana Chiefs Conference		
Grant No:	602-12-211	FY12 Funding:	\$1,208,195
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

309,160	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	176,749	SMI – Outpatient – MH
	Youth Residential – SA	306,819	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
415,467	Recovery Camps – SA		Other
	SED Youth Outpatient – MH	1,208,195	TOTAL

Comments:

None

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 12

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

No CAP report was submitted in third quarter

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

CFR and narrative reports were late for the second quarter.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 8

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

CAP was not submitted with 3rd quarter report. Logic Model submitted with 3rd quarter reports was a completely different logic model than the previous two quarters.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

None

Grantee: Tanana Chiefs Conference

Grant No: 602-12-211 **FY12 funding:** \$1,208,195

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	2	12	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	2	8	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					59
Weighted Score divided by Total Possible					
FINAL SCORE					81.94%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Tok Area Counseling Center		
Grant No:	602-12-276	FY12 Funding:	\$224,823
Reviewer:	Lynn M. Eldridge, MEd	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

224,823	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH		224,823 TOTAL

Comments:

None

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

None

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

None

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

None

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 8

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3rd quarter missing the Narrative.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

None

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

It appears the Grantee is using the CAP and the Logic Model interchangeably to reflect activities and outcomes. TACC is obviously conducting services above and beyond psychiatric emergencies. Grantee needs Logic Model training to effectively use the tool to indicate success/need revision for their activities.

Grantee: Tok Area Counseling Center

Grant No: 602-12-276 **FY12 funding:** \$224,823

Reviewer: Lynn M. Eldridge, MEd **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	2	8	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					62
Weighted Score divided by Total Possible					
FINAL SCORE					86.11%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Volunteers of America Alaska, Inc.		
Grant No:	602-12-236	FY12 Funding:	\$983,352
Reviewer:	Joan Houlihan	Date:	5/17/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH	271,755	Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
711,597	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
	SED Youth Outpatient – MH		983,352 TOTAL

Comments:

VOA's Component Budget is well laid out, clear and easy to read. Their Quarterly CFR's are consistently on time, with funds well distributed.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

VOA is a very active participant both in the Anchorage Regional Behavioral Health Coalition and in several other task forces and work groups. As well, they have many MOA's with organizations outside of the ARBHC.

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Objectives on the Logic Model were not only met, but exceeded.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

All reports were submitted on time.

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

All reports were accurate and complete.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

VOA's Logic Model contains specific statistical data, within some indicators. All proposed indicators were not only achieved, but exceeded.

Grantee: Volunteers of America Alaska, Inc.

Grant No: 602-12-236 **FY12 funding:** \$983,352

Reviewer: Joan Houlihan **Date:** 5/17/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					72
Weighted Score divided by Total Possible					
FINAL SCORE					100.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Yukon Kuskokwim Health Corporation		
Grant No:	602-12-005	FY12 Funding:	\$2,648,838
Reviewer:	Sharon Walluk	Date:	May 11,2012

Program Types (please provide component funding amount for each program type):

650,114	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA	271,499	SMI – Outpatient – MH
	Youth Residential – SA	199,641	Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
855,375	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA	277,137	Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
395,072	SED Youth Outpatient – MH	2,648,838	TOTAL

Comments:

Other category is the funding for the Therapeutic Court project.

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

Program reports outreach efforts to each community in response to deaths and need for CISM or other supportive response. BHA's make up the response teams so that acceptance is better in the villages and more culturally appropriate. Reports discuss plans for increased services through the CRC allowing for clients in crisis more services locally. Telemedicine is on-going. Have established "IMPACT" clinicians who work with the medical staff in the clinic. Report is that this is very effective for referrals and works well with the Womens Shelter

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

no comment

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 6

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2nd quarter narrative report was received late

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

No comment

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

no comment

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 18

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic Model has been used to monitor and revise, as needed, services to SED kids with the goal of improving client retention and AKAIMS documentation. Logic Model is also being used to monitor followup care for SMI adults.

Grantee: Yukon Kuskokwim Health Corporation

Grant No: 602-12-005 **FY12 funding:** \$2,648,838

Reviewer: Sharon Walluk **Date:** May 11,2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	2	6	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	3	18	18
Total Possible Score					72
Weighted Score Total					69
Weighted Score divided by Total Possible					
FINAL SCORE					95.83%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:	Youth Advocates of Sitka		
Grant No:	602-12-255	FY12 Funding:	\$1,022
Reviewer:	Bradley Grigg	Date:	5/15/2012

Program Types (please provide component funding amount for each program type):

	Psychiatric Emergency Services – MH		Youth and Family Outpatient – SA
	Detoxification – SA		SMI – Outpatient – MH
	Youth Residential – SA		Adult – Outpatient – SA
	Youth Residential – MH		Women and Children – Outpatient – SA
	Adult Residential – SA		Employment Services
	Women and Children’s Residential – SA		Disability Justice – MH and SA
	Adult Residential – MH		Consumer/Family Directed Program – MH
	Outpatient Opioid Treatment Program – SA		Pilots – MH and SA
	Recovery Camps – SA		Other
1,022	SED Youth Outpatient – MH	1,022	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 18

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 9

0=NO 3=YES

Comments:

Grantee continues to evidence increase capacity of community youth with SED served through this grant.

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), “the grantee will submit a report to reach the grantor within 30 days after each quarter ending...” Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 9

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

All quarterly reports were submitted in a timely manner

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (“Complete” means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 4 x Score Weighted Score: 12

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

T/R Quarterly, Logic Model and CFR's were accurate and submitted on time each quarter.

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 6

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

In reviewing AKAIMS Quarterly Summaries numbers were found to be accurate and complete each quarter.

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 12

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Logic Model was revised in Q2 as evidenced by agency expanding their capacity in serving SED youth in the school setting.

Grantee: Youth Advocates of Sitka

Grant No: 602-12-255 **FY12 funding:** \$1,022

Reviewer: Bradley Grigg **Date:** 5/15/2012

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	3	18	18
	2	3	3	9	9
II	1	3	3	9	9
	2	4	3	12	12
	3	2	3	6	6
	4	6	2	12	18
Total Possible Score					72
Weighted Score Total					66
Weighted Score divided by Total Possible					
FINAL SCORE					91.67%

Attachment D

DBH Treatment & Recovery Services - Grant Review and Progress Report *Templates*: FY2010, FY2011, & FY2012

FY10 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:

Grant No: **FY10 funding:**

Reviewer:

Program Types (please provide component funding amount for each program type):

-	Psychiatric Emergency Services – MH	-	Youth and Family Outpatient – SA
-	Detoxification – SA	-	SMI – Outpatient – MH
-	Youth Residential – SA	-	Adult – Outpatient – SA
-	Youth Residential – MH	-	Women and Children – Outpatient – SA
-	Adult Residential – SA	-	Employment Services
-	Women and Children’s Residential – SA	-	Disability Justice – MH and SA
-	Adult Residential – MH	-	Consumer/Family Directed Program – MH
-	Outpatient Opioid Treatment Program – SA	-	Pilots – MH and SA
-	Recovery Camps – SA	-	Other
-	SED Youth Outpatient – MH	-	TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning quarterly?

Factor Weight: 4 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = Reported participation in one quarter.
- 2 = Reported participation in two quarters.
- 3 = Reported participation in three quarters.

Comments:

2. Did grantee spend funds as approved in the grant agreement?

Factor Weight: 3 **x Score** **Weighted Score:** 0

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

- 1. **Have all required reports been submitted timely? Required reports include narrative, AKAIMS, and cumulative fiscal. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.***

Factor Weight: 3 x Score Weighted Score: 0

Anchor Points:

- 1 = 1 quarter's reports have been submitted to Grants and Contracts by deadline.
- 2 = 2 quarter's reports have been submitted to Grants and Contracts by deadline.
- 3 = 3 quarter's reports have been submitted to Grants and Contracts by deadline.

Comments:

- 2. **Are quarterly reports complete? (*"Complete" means that all questions on the Quantitative and Narrative report are answered in sufficient detail to judge progress and CFR is filled out correctly. This excludes Logic Model and AKAIMS reports.*)**

Factor Weight: 4 x Score Weighted Score: 0

Anchor Points:

- 1 = 1 quarter's reports have been submitted complete
- 2 = 2 quarter's reports have been submitted complete.
- 3 = 3 quarter's reports have been submitted complete.

Comments:

3. Grantee used Logic Model to make program improvements?

Factor Weight: 6 x **Score** **Weighted Score:** 0

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process. (output accomplished or revision of the plan)
- 3 = Grantee reported progress on proposed outcome indicators.

Comments:

Grantee:

Grant No: **FY10 funding:**

Reviewer:

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	4	0	0	12
	2	3	0	0	9
II	1	3	0	0	9
	2	4	0	0	12
	3	6	0	0	18
Total Possible Score					60
Weighted Score Total					0
Weighted Score divided by Total Possible					
FINAL SCORE					0.00%

FY11 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:

Grant No: **FY11 Funding:**

Reviewer: **Date:**

Program Types (please provide component funding amount for each program type):

<input type="text"/>	Psychiatric Emergency Services – MH	<input type="text"/>	Youth and Family Outpatient – SA
<input type="text"/>	Detoxification – SA	<input type="text"/>	SMI – Outpatient – MH
<input type="text"/>	Youth Residential – SA	<input type="text"/>	Adult – Outpatient – SA
<input type="text"/>	Youth Residential – MH	<input type="text"/>	Women and Children – Outpatient – SA
<input type="text"/>	Adult Residential – SA	<input type="text"/>	Employment Services
<input type="text"/>	Women and Children’s Residential – SA	<input type="text"/>	Disability Justice – MH and SA
<input type="text"/>	Adult Residential – MH	<input type="text"/>	Consumer/Family Directed Program – MH
<input type="text"/>	Outpatient Opioid Treatment Program – SA	<input type="text"/>	Pilots – MH and SA
<input type="text"/>	Recovery Camps – SA	<input type="text"/>	Other
<input type="text"/>	SED Youth Outpatient – MH	<input type="text"/>	- TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 **x Score** **Weighted Score:** 0

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 x Score Weighted Score: 0

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 x Score Weighted Score: 0

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee:

Grant No: FY11 funding:

Reviewer: Date:

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	0	0	18
	2	3	0	0	9
II	1	3	0	0	9
	2	4	0	0	12
	3	2	0	0	6
	4	6	0	0	18
Total Possible Score					72
Weighted Score Total					0
Weighted Score divided by Total Possible					
FINAL SCORE					0.00%

FY12 DBH Treatment & Recovery Services Grant Review & Progress Report

Grantee:

Grant No: **FY12 Funding:**

Reviewer: **Date:**

Program Types (please provide component funding amount for each program type):

<input type="text"/>	Psychiatric Emergency Services – MH	<input type="text"/>	Youth and Family Outpatient – SA
<input type="text"/>	Detoxification – SA	<input type="text"/>	SMI – Outpatient – MH
<input type="text"/>	Youth Residential – SA	<input type="text"/>	Adult – Outpatient – SA
<input type="text"/>	Youth Residential – MH	<input type="text"/>	Women and Children – Outpatient – SA
<input type="text"/>	Adult Residential – SA	<input type="text"/>	Employment Services
<input type="text"/>	Women and Children’s Residential – SA	<input type="text"/>	Disability Justice – MH and SA
<input type="text"/>	Adult Residential – MH	<input type="text"/>	Consumer/Family Directed Program – MH
<input type="text"/>	Outpatient Opioid Treatment Program – SA	<input type="text"/>	Pilots – MH and SA
<input type="text"/>	Recovery Camps – SA	<input type="text"/>	Other
<input type="text"/>	SED Youth Outpatient – MH	<input type="text"/>	- TOTAL

Comments:

Section I: Fidelity

Please score each of the categories in this section. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agency's overall performance outcomes.

1. Grantee participated in community planning for the purpose of improving services through interagency coordination? Grantee described the changes implemented that improved services.

Factor Weight: 6 x Score Weighted Score: 0

Anchor Points:

- 1 = Reported participation and changes that improved services in one quarter.
- 2 = Reported participation and changes that improved services in two quarters.
- 3 = Reported participation and changes that improved services in three quarters.

Comments:

2. Did grantee spend their grant funds to provide the services described in the CBHTR FY10 - FY12 RFP that they committed to provide when they accepted their Notice of Grant Award and subsequent amendments (if any)?

Factor Weight: 3 x Score Weighted Score: 0

0=NO 3=YES

Comments:

Section II: Agency Performance

Please score each of the questions in this section on a scale of 1 to 3. Anchor points for each score are listed below the question. Each question is weighted according to level of importance and impact on the agencies overall performance outcomes.

1. Have all required reports been submitted timely? Required items are: T & R Quarterly Report, AKAIMS Quarterly Summary, Logic Model and Cumulative Fiscal Report. *Timely is defined in the DHSS Grant Agreement on page 4 under section 10 General Administration (b) and (c), "the grantee will submit a report to reach the grantor within 30 days after each quarter ending..." Timeliness is measured by the date stamp from G&C.*

Factor Weight: 3 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = All 4 required reports of 1 quarter has been submitted to Grants and Contracts by deadline.
- 2 = All 4 required reports of 2 quarters reports have been submitted to Grants and Contracts by deadline.
- 3 = All 4 required reports of 3 quarters reports have been submitted to Grants and Contracts by deadline.

Comments:

2. Were the T & R Quarterly Report, Logic Model and Cumulative Fiscal Report accurate and complete? (*"Complete" means that all questions are answered in sufficient detail to judge activity / progress and filled out correctly.*)

Factor Weight: 4 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = 1 quarter's reports were submitted accurate and complete.
- 2 = 2 quarter's reports were submitted accurate and complete.
- 3 = 3 quarter's reports were submitted accurate and complete.

Comments:

3. Are the AKAIMS Quarterly Summaries accurate and complete? (“Complete” means that all required data elements have been reported in sufficient detail to judge activity / progress and filled out correctly.)

Factor Weight: 2 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = 1 quarter’s reports were submitted accurate and complete.
- 2 = 2 quarter’s reports were submitted accurate and complete.
- 3 = 3 quarter’s reports were submitted accurate and complete.

Comments:

4. Grantee used Logic Model to make program improvements? (An output is the work being done and the indicator is the evaluation of those outputs)

Factor Weight: 6 **x Score** **Weighted Score:** 0

Anchor Points:

- 1 = Grantee reported quarterly on their logic model.
- 2 = Grantee reported effort on logic model process (output accomplished or revision of the plan).
- 3 = Grantee reported progress on proposed or revised outcome indicators.

Comments:

Grantee:

Grant No: FY12 funding:

Reviewer: Date:

Final Scoring Table					
<i>Scores will automatically transfer to this sheet</i>					
Section	Item #	Factor Weight	Score	Weighted Score	Total Possible Score
I	1	6	0	0	18
	2	3	0	0	9
II	1	3	0	0	9
	2	4	0	0	12
	3	2	0	0	6
	4	6	0	0	18
Total Possible Score					72
Weighted Score Total					0
Weighted Score divided by Total Possible					
FINAL SCORE					0.00%