



PROGRAM DESCRIPTION

The program description is NOT required for contracts that are solely for the purposes of billing Medicaid, PPG, FACT, or Title XXI.

The contractor shall prepare and submit the following proposed Program Description to the department for approval prior to the start of the contract period. Once a contract has been signed, the contractor shall prepare and submit a final version of the Program Description to the department. Modifications to the program description will be resubmitted in accordance Program Description Guidelines.

Organizational Profile

(This includes the total operations of the organization providing the services. If the entity is the same as the provider/organization this will encompass the total agency. If the organization is a subdivision of a governmental or other umbrella organization, this will only include the subdivision/department that is administering the services.)

A. ORGANIZATION NAME:

(The legal name of the provider that will assume/sign the contract)

Subdivision/Department Administering Services (as appropriate):

B. ORGANIZATION ADDRESS:

() _____ () _____
Phone Number: Fax Number:

Federal ID Number _____ National Provider Identifier _____

C. ORGANIZATIONAL OFFICIALS AND OFFICERS

1. Board President/Chairperson: _____

2. Chief Executive Officer: _____

3. Chief Operating Officer: _____

4. Chief Financial Officer: _____

5. Data Security Officer: _____

D. ORGANIZATIONAL CAPACITY

1. Annual Operating Budget: \$ _____
(Include all revenue sources)

2. Number of employees: _____

3. Geographic area(s) served: _____

4. Accreditations: _____

5. Major Funders: _____
(Circuits define "major")

6. Year of Incorporation: _____

7. Corporate Mission Statement: _____

8. Summary Description of Organization's Services:

9. Chart of major organizational units: *(Attach as an exhibit to the Organizational Profile)*

10. Not-For-Profit Incorporation

(Attach documentation of Not-for-profit statues)

Inventory of Proposed Services

E. Total Contract Funding Request: \$ _____
(Provide totals for each year of the contract)(SAMH funding)

F. Projected Numbers Served, By Target Population:

Population	Number Contract Funded <i>(Includes: SAMH, Medicaid, and Local Match funds)</i>	Number Other Funded <i>(Services which are funded from other sources, not reported to the SAMH data system.)</i>	Total Served
Adult Mental Health			
Persons with Severe & Persistent Mental Illness			
Adults with Serious & Acute Episodes of Mental Illness			
Adults with Mental Health Problems			
Adults with Forensic Involvement			
Other Populations to be Served			
Children's Mental Health			
Children with Serious Emotional Disturbance			
Children with Emotional Disturbance			
Children at Risk of Emotional Disturbance			
Other Populations to be Served			
Adult Substance Abuse			
Adults with Substance Abuse			
Other Populations to be Served			
Children's Substance Abuse			
Children with Substance Abuse			
Other Populations to be Served			

G. Service Delivery Sites for This Contract:

Site Address Contact Person (Name/Title) Phone # Fax # Email	SAMH Program	Cost Center(s)	Service/ Organizational Program	Days/Hours of Operation	Population(s) Served <i>Both State categories & other population(s) served</i>	Facility Licenses <i>To be submitted with the Program Description</i>

(The following narratives shall describe the organizations approach to the delivery of care and the array of services that will be available through the funds allocated. (Exhibit G)

H. Integration of Recovery and Resiliency Concepts:

Describe the steps that the organization will take to integrate recovery and resiliency into service provision. Demonstrate how the organization will promote individual and family living, working learning and socializing. Discuss how the organization will employ person-centered language. Demonstrate how the organization will involve individuals and families in the planning, development and implementation and evaluation of all aspects of this service delivery system. Example: Peer Support

I. Individual and Family Participation Strategies:

Describe your agency's practices for individual and family participation.

J. Agency Outcomes (Optional):

(This section gives the organization the opportunity to develop outcomes and measure their performance. If the organization develops performance measures, the measure(s) will not constitute a contractual obligation and will not be monitored. This does not take the place of the organization's requirements within the contract through Exhibit D.)

Please state two specific outcomes related to the proposed contract cycle.

1. _____

2. _____

Individual Completing the Document:

Name: _____
Title: _____
Phone: () _____ Fax: () _____
E-mail Address: _____

CHANGES MADE A TO THE ORGANIZATIONAL PROFILE SHALL BE MADE WITHIN THE PROGRAM DESCRIPTION GUIDELINES AND REQUIRE THE SIGNATURE OF BOTH THE DEPARTMENT AND PROVIDER CONTRACT SIGNER OR THEIR DESIGNEE.

Department Date

Provider Date

SERVICE ACTIVITY DESCRIPTION

(Complete a Service Activity description form for each activity under each program area where the organization proposes to offer services)

A. Organization Name: _____

B. Program Area: *(X one)*

- Adult Mental Health
- Children's Mental Health
- Adult Substance Abuse
- Children's Substance Abuse

C. Activity Classification: *(X one)*

- Mental Health:* Emergency Stabilization
 Recovery and Resiliency
- Substance Abuse:* Detoxification
 Treatment and Aftercare

D. Total Activity Funding Requested: \$ _____

(Includes: SAMH funds only) (Provide totals for each year of the contract)

E. Projected Unduplicated Number of Individuals to be Served*: _____

(Includes: SAMH funds, Medicaid, and Local Match funds) (Provide totals for each year of the contract)

**Not applicable for non-client specific activities (i.e. outreach)*

F. Applicable Special Funding Considerations: *(Refer to the Funding Detail)*

- TANF
- SAPTBG Set Aside for Women
- SAPTBG Prevention Set Aside
- SAPTBG HIV Set Aside
- FIS Appropriation
- PATH Grant Award
- Indigent Drug Program
- Title XXI
- Purchase of Therapeutic Services
- Other: Describe _____
- Other: Describe _____
- Other: Describe _____

G. Individuals to be Served: *(Mark all groups of individuals to be served through this Program Activity (X)). (Includes: SAMH funds, Medicaid, and Local Match funds)*

1. Adult Mental Health:
 - ___ a. Adults with Severe and Persistent Mental Illness
 - ___ b. Adults with Serious and Acute Episodes of Mental Illness
 - ___ c. Adults with Mental Health Problems
 - ___ d. Adults with Forensic Involvement

2. Children's Mental Health:
 - ___ a. Children with Serious Emotional Disturbance
 - ___ b. Children with Emotional Disturbance
 - ___ c. Children At Risk of Emotional Disturbance

3. Adult Substance Abuse:
 - ___ a. Adults with Substance Abuse Problems

4. Children's Substance Abuse:
 - ___ a. Children with Substance Abuse Problems

Number of FTE's that provide direct services by Cost Center

Cost Center Name	Supervisory	Direct Service	Support	Total FTE's

(Includes SAMH, Medicaid, and Local Match funds: Personnel Detail Report)

Service Delivery Strategies and Approaches

H. Identification and Engagement Strategies:

1. Identify the major referral sources for persons receiving services:
 - a. General (SAMH Target) Population Served:
 - b. Enhanced Services for Special Populations:
Examples:
 1. Children at risk of residential services or juvenile justice involvement
 2. Pregnant/Post-partum Women
 3. Individuals Involved with the Forensic or Criminal Justice System
 4. Individuals with co-occurring disorders
 5. Individuals with HIV
 6. Others: *(describe)*

2. Describe the organization's specific individual identification and engagement strategies applicable to this Program Activity: (Information and Referral, Outreach/In-reach activities, Marchman Act Interventions, Crisis Support/Emergency services, Baker Act Intervention, Prevention, etc.). Highlight any use of science-based or evidence-based approaches.
 - a. General SAMH (Target Population) Served:

- b. Special Populations:
 1. Children at risk of residential services or juvenile justice involvement
 2. Pregnant/Post-partum Women
 3. Individuals Involved with the Forensic or Criminal Justice System
 4. Individuals with co-occurring disorders
 5. Individuals with HIV
 6. Others: *(describe)*
3. Specify the nature and role of Incidental funding and any categorical funding applicable used in support of individual identification and engagement (such as SAMH Substance Abuse Women's set-aside funding).
4. Describe the role and contribution of matching funds to support these strategies (Plan for Match).

I. Service Delivery Strategies:

1. Describe the organization's specific service delivery strategies for providing individual services/care under this Program Activity. Service delivery strategy descriptions should separately address those strategies as applied to:
 - a. The general SAMH target populations served. This description should address:
 1. The cost centers that will be used,
 2. The specific services that will be made available through each cost centers,
 3. The means by which individual and family needs will be evaluated and re-evaluated throughout the episode of care,
 4. The processes employed to match individuals and families to services and ensure that services are consistent with the individuals' and families' individual recovery and resiliency needs,
 5. Any science-based or evidence-based models employed or practices utilized,
 6. The service capacity proposed for funding,
 7. Admission and discharge criteria;
 8. Average length of participation for persons served,
 9. The use of Incidental funds and any categorical funding to support consumer participation in services.
 10. Minimum service qualifications for each type of service delivery position
 11. Describe the role and contribution of matching funds to support these strategies (Plan for Match). .
 - b. Any specific strategies designed for Enhanced Services for special population groups* (children at risk of residential or juvenile justice involvement, pregnant and post-partum women, individuals involved with the forensic or criminal justice system, others). These descriptions should address
 1. The cost centers that will be used,
 2. The specific services that will be made available through each cost centers,

3. The means by which individual and family needs will be evaluated and re-evaluated throughout the episode of care,
4. The processes employed to match individual and families to services and ensure that services are consistent with the individuals' recovery and resiliency needs,
5. Any science based or evidence based models employed or practices utilized,
6. The service capacity proposed for funding,
7. Admission and discharge criteria,
8. The use of Incidental funds and any categorical funding to support individual and family participation in services.
9. Describe the role and contribution of matching funds to support these strategies (Match Plan).
10. Minimum service qualifications for each type of service delivery position
11. Describe the role and contribution of matching funds to support these strategies (Plan for Match).

***Organizations must complete an Enhanced Services for Special Populations Matrix to delineate the additional services rendered.**

J. Continuing Care Strategies:

1. Identify the major continuing strategies for individuals and families completing services through this Activity. Continuing care strategy descriptions should address placement and referral activities specific to:
 - a. The general SAMH Target Population Served. This description should address:
 1. The processes by which individuals and families are prepared for and transitioned to continuing care services,
 2. The major continuing care strategies, best practice models, and community housing/living options alternatives for individuals and families completing services in this Activity (within the organization and within the community system of care),
 3. A description of any Activity funded cost centers and related services utilized to affect the transition, and
 4. How Incidental funds and any applicable, restricted funding are used to support individual transitions.
 - b. Services for Special Populations (children at risk of residential or juvenile justice, pregnant/post-partum women, individuals involved with the forensic or criminal justice systems, persons with HIV, and others). These descriptions should address:
 1. The processes by which individuals and families are prepared for and transitioned to continuing care service,
 9. The major continuing care strategies, best practice models and community housing/living options for individuals and families completing services in this Activity (within the organization and within the community system of care),

- 10. A description of any Activity funded cost centers and related services utilized to effect the transition, and
- 11. How Incidental funds and if applicable, restricted funding are used to support individual transitions.

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Department

Date

Provider

Date