INSTRUCTIONS FOR COMPLETING MHSA QUARTERLY “NARRATIVE ONLY” REPORTS

MHSA PROGRAM BACKGROUND

Agency/Organization: Enter the name of your agency/program.
MHSA Component: Check the MHSA component that funds your program.
Current Fiscal Year: Check the current fiscal year to which this report refers.
Current Quarter: Check the current quarter to which this report refers (or Annual Summary).
(The Annual Summary covers the full fiscal year and should include highlights of services, a summary of qualitative outcome measures, and aggregated data for any quantitative outcome measures that you are employing.)

Name: Enter the name(s) of the individual(s) who completed this Quarterly Report.
Email Address: Enter the email address(es) of the individual(s) who completed this Quarterly Report.
Phone Number: Enter the phone number(s) of the individual(s) who completed this Quarterly Report.

NARRATIVE DESCRIPTION OF SERVICES

Number and Types of Services Provided: Describe the number and types of services that your agency/program provided to your target population(s). Provide additional information about these activities, such as:
- How often did participants receive these services (e.g., once a week)?
- How long did they receive them (e.g., six months)?

Client, Consumer, & Family Outcomes: Describe the impact of the services to participants. This includes data that shows:
- Changes in participants’ overall functioning
- Results from screenings/assessments
- Participant satisfaction with program delivery, implementation, and content

Implementation Challenges: Describe any difficulties implementing services and/or reaching your target population(s).
Service Types

- **Case Management**: Services that provide coordination, support, and advocacy to address multiple needs (e.g., mental health, vocational, educational, child welfare, other community services)
- **Crisis Intervention**: Services to support individuals experiencing a psychiatric crisis designed to reduce symptoms, assist in stabilization, and aid in restoring a level of functioning
- **Group-level Interventions**: Psychotherapeutic programs and services (e.g., social skills groups, peer support groups) that are delivered in a group format to reduce psychiatric symptoms and promote adaptive functioning
- **Individual-level Interventions**: Psychotherapeutic programs and services delivered one-on-one to reduce psychiatric symptoms and promote adaptive functioning
- **Medication Management**: Support for the use of psychotropic medicines, administration of those medicines, and appropriate observation and follow-up
- **Outreach**: Public awareness activities (e.g., social media campaigns, health fairs) to promote knowledge of an agency’s program and services
- **Referrals**: Coordinated linkages with other providers for additional mental health resources and supports
- **Screenings/Assessments**: Mental health evaluations (e.g., comprehensive psychological testing, educational diagnostic testing) that help identify service needs and recommendations for treatment
- **Trainings**: Educational activities (e.g., presentations, workshops) that support the knowledge and skill development of providers and community leaders