

SAMHSA Uniform Reporting System FY 2016 Data Definitions

September 2017

The SAMHSA Uniform Reporting System (URS) is organized around a common set of data elements, standardization of service names, and definitions. This document provides a summary of key definitions.

Term	Definition
Access	Access refers to the degree to which services are quickly and readily available.
Administration	<p>Include expenditures for the administration of the SMHA including central and regional offices define as SMHA activity that provide centralized policy direction and administrative management for all operational segments of the SMHA program. Functions usually include policy formulation, planning, budgeting, coordination, and evaluation. Supplemental/support activity may include fiscal administration, legal services, management information systems, purchasing, licensure, development of standards, and monitoring. SMHAs may operate from one central office or through a regional structure. Expenditures reported under this category should include the expenditures of the total central and/or regional structure. The infrastructure of the SMHA may include separate administrative components for the planning, coordination, and development of community administered programs, state psychiatric hospitals, and/or other programs. Expenditures for these SMHA divisions and/or components should be included in the total administration category. Research includes identifiable research activities funded and/or funded and conducted by the SMHA. Research activities may: (a) constitute one or more component within a state psychiatric hospital(s), community program, or independent facility; (b) comprise an entire program entity or facility (e.g., a children’s psychiatric research institute); and/or (c) be conducted at the SMHA central office. Training refers to identifiable staff training and human resource development (HRD) activities or facilities funded and/or funded and operated by the SMHA. Training activities may: (a) be conducted as part of the state hospital, within community administered programs or independently run through the SMHA regional or central office; and/or (b) comprise an entire program entity or facility (e.g., a mental health training institute). Include all funds from federal HRD grants as well as state funds devoted towards training activities.</p>
Admission	The number of persons admitted, readmitted, or transferred to a specified service setting during the reporting period.
Ambulatory/Community Non-24-Hour Care	<p>Services provided in less-than 24-hour care setting and not overnight. It includes outpatient, partial care, emergency and case management services.</p> <ol style="list-style-type: none"> <li data-bbox="553 1423 1435 1671">1. Outpatient: mental health services provided to clients on an hourly basis, on an individual or group basis, and usually in a clinic setting. Services such as screening, crisis intervention, outreach, and psychiatric treatment can be included. Outpatient services may be diagnostic, therapeutic, or adjunctive. Include expenditures for wraparound services in the ambulatory/community non-24 hour care category. <li data-bbox="553 1671 1435 1850">2. Partial care/day treatment: structured programs of treatment, activity, or other mental health services provided in clusters of three or more hours per day. These programs are often called day treatment, partial hospitalization, psychosocial rehabilitation, or activity centers. <li data-bbox="553 1850 1435 1915">3. Emergency: programs that provide immediate and short-term services to over patients experiencing psychiatric emergency or crisis

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	<p>situations. This covers telephone counseling, immediate services, and referral services.</p> <p>4. Case management: functions as an outreach intervention for clients with primary purpose of: (a) assisting clients in accessing financial, housing, medical, employment, social, transportation, and other essential community resources; (b) assisting community agencies in offering response services to the client population; or (c) mobilizing assistance from family, neighbors, self-help groups on behalf of clients.</p>
American Indian or Alaska Native	<p>“A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliations or community attachment” (U.S. Census Bureau, 2000 Census of Population, Public Law 94-171 Redistricting Data File).</p>
Appropriateness	<p>Appropriate services are those that are individualized to address a client’s strengths and weaknesses, cultural context, service preferences, and recovery goals.</p>
Asian	<p>“A person having origins in any of the original people of Far East and South East Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam” (U.S. Census Bureau, 2000 Census Population, Public Law 97-171 Redistricting Data File).</p>
Assertive Community Treatment (ACT)	<p>A team based approach to the provision of treatment, rehabilitation and support services. ACT/PACT models of treatment are built around a self-contained multi-disciplinary team that serves as the fixed point of responsibility for all patient care for a fixed group of clients. In this approach, normally used with clients with severe and persistent mental illness, the treatment team typically provides all client services using a highly integrated approach to care. Key aspects are low caseloads and the availability of the services in a range of settings. The service is a recommended practice in the PORT study (Translating Research Into Practice: The Schizophrenia Patient Outcomes Research Team (PORT) Treatment Recommendations, Lehman, Steinwachs and Co-Investigators of Patient Outcomes Research Team, Schizophrenia Bulletin, 24(1):1-10, 1998) and is cited as a practice with strong evidence based on controlled, randomized effectiveness studies in the Surgeon General's report on mental health (Mental Health: A Report of the Surgeon General, December, 1999, Chapter 4, "Adults and Mental Health, Service Delivery, Assertive Community Treatment"). Additionally, the Health Care Financing Administration (HCFA, the prior name for the Centers for Medicaid and Medicare recommended that state Medicaid agencies consider adding the service to their State Plans in HCFA Letter to State Medicaid Directors, Center for Medicaid and State Operations, June 07, 1999.</p>
Average Length of Stay	<p>This represents the average time a client receives services in a specified service setting (state psychiatric hospital, community mental health, etc.) during a specified time period. This is generally computed by counting all the days that clients received service during the time period and dividing by the number of clients that received the service during the same period (days a person was on furlough or not receiving services are not counted).</p>

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Black or African American	“A person having origins in any of the black racial groups of Africa. It includes people who indicate their race as “Black, African Am., or Negro,” or provide written entries such as African American, Afro American, Kenyan, Nigerian or Haitian” (U.S. Census Bureau, 2000 Census Population, Public Law 97-171 Redistricting Data File).
Case Management Services	Case management services include activities for the purpose of locating services, linking the client/patient with these services, monitoring the client’s/patient’s receipt of these services on behalf of the patient/client. Case Management can be provided by an individual or a team; may include both face-to-face and telephone contact with the client/patient as well as contact with other service providers.
Community Services	Community services refer to all services that are provided in a community setting, i.e., services not provided in an inpatient setting.
Convenience Sample	Convenience sample refers to a type of non-probability sample where the consumers are selected, in part or in whole, at the convenience of the researcher. The researcher makes no attempt, or only a limited attempt, to insure that the sample is an accurate representation of some larger group or population. An example would be giving the consumer survey to all persons who attend services in a given week or month.
Consumer-run Services	Consumer-run services refer to mental health treatment or support services that are provided by current or former mental health consumers. These include social clubs, peer-support groups, and other peer-organized or consumer-run activities.
Coordinated Specialty Care (CSC) for First Episode Psychosis (FEP)	“Coordinated specialty care (CSC) is a recovery-oriented program for people with first episode psychosis (FEP). CSC promotes shared decision making and uses a team of specialists who work with the client to create a personal treatment plan. The specialists offer psychotherapy, medication management geared to individuals with FEP, family education and support, case management, and work or education support, depending on the individual’s needs and preferences. The client and the team work together to make treatment decisions, involving family members as much as possible. The goal is to link the individual with a CSC team as soon as possible after psychotic symptoms begin. There are many different programs that are considered CSC. Examples of CSC programs include, but are not limited to, NAVIGATE, the Connection Program, OnTrackNY, the Specialized Treatment Early in Psychosis (STEP) program, and Early Assessment and Support Alliance (EASA). RAISE is not a CSC program. RAISE is the name of a research initiative developed and funded by NIMH to test CSC programs. (The two programs tested by the RAISE initiative were NAVIGATE and the Connection Program)” (National Institute of Mental Health: https://www.nimh.nih.gov/health/topics/schizophrenia/raise/what-is-coordinated-specialty-care-csc.shtml).
Discharge	A discharge is the formal termination of service generally when treatment has been completed or through administrative discharge.
Dually Diagnosed	A person has both an alcohol or drug problem and an emotional/psychiatric problem.

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Early Serious Mental Illness (ESMI)	An early serious mental illness or ESMI is a condition that affects an individual regardless of their age and that is a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-5 (APA, 2013). For a significant portion of the time since the onset of the disturbance, the individual has not achieved or is at risk for not achieving the expected level of interpersonal, academic or occupational functioning. This definition is not intended to include conditions that are attributable to the physiologic effects of a substance, substance use disorder, are attributable to an intellectual developmental disorder or are attributable to another medical condition. The term ESMI is intended for the initial period of onset.
Employed	This is a broad category of full or part time employment under the competitive labor market environment and supported employment.
Family-like arrangements	Family-like arrangements refer to a broad range of living arrangements that simulate a family situation. This includes foster care and small group homes.
Family Psychoeducation	Family psychoeducation is offered as part of an overall clinical treatment plan for individuals with mental illness to achieve the best possible outcome through the active involvement of family members in treatment and management and to alleviate the suffering of family members by supporting them in their efforts to aid the recovery of their loved ones. Family psychoeducation programs may be either multi-family or single-family focused. Core characteristics of family psychoeducation programs include the provision of emotional support, education, and resources during periods of crisis, and problem-solving skills.
First Episode Psychosis (FEP)	Psychosis is when a person loses contact with reality due to the onset of a serious mental illness—such as schizophrenia, bipolar disorder, and post-traumatic stress disorder. Psychosis includes symptoms such as hallucinations, delusions, or confused thinking. The onset of symptoms typically occurs between the ages of 16 and 25.
Foster Care	Foster care refers to the provision of a living arrangement in a household other than that of the client's biological family.
Foster Home	A home licensed by a County or State Department to provide care to children, adolescents, and/or adults. This includes Therapeutic Foster Care Facilities. Therapeutic Foster Care is a service that provides treatment for troubled children within private homes of trained families.
Forensic Clients	Forensic clients are consumers who come to the mental health system due to their contact with the criminal justice systems. Specific forensic activities may include, but are not limited to: a) diagnosis of individuals placed in an inpatient unit for short term psychiatric observation; b) provision of diagnostic and treatment support for correctional populations on an inpatient basis; providing security up to maximum levels; and provision of security staff in secure units for the rehabilitation and management of behaviorally problematic individuals. Forensic patients include: <ul style="list-style-type: none"> a. NGRI/GBMI: "Not guilty by reason of insanity" (NGRI) and/or "guilty but mentally ill" (GBMI) have been referred by legal and law enforcement agencies for emergency psychiatric evaluations; and

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	<p>persons who are to be evaluated for dangerousness. Provision of Forensic services may occur within any of the separate state psychiatric hospital services, other hospital programs, community-based programs, and/or through the SMHA administrative offices.</p> <ul style="list-style-type: none"> b. Competency: Defendants who are detained and evaluated as to their mental competence to stand trial. c. Transfers from criminal/juvenile justice: Services to adult or juvenile prisoners who have been transferred to the state hospital to receive services. d. Sexually violent predators: An increasing population in many state mental health systems is persons deemed to be "Sexually Violent Predators". These persons have been convicted of a sexual offence and been sent to the mental health system for treatment and control
Functional Family Therapy (FFT)	FFT is a phasic program where each step builds on one another to enhance protective factors and reduce risk by working with both the youth and their family.
General Hospital	A hospital with a separate psychiatric unit and specially allocated staff for the treatment of persons with mental illness.
General Support	General support includes transportation, childcare, homemaker services, day care, and other general services for clients/patients.
Hispanic or Latino	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."
Homeless/Shelter	<p>A person is considered homeless if he/she lacks a fixed, regular, and adequate nighttime residence and/or his/her primary nighttime residency is:</p> <ul style="list-style-type: none"> a. A supervised publicly or privately operated shelter designed to provide temporary living accommodations, b. An institution that provides a temporary residence for individuals intended to be institutionalized, or c. A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings (e.g., on the street).
Housing Services	Assistance to clients/patients in finding and/or maintaining appropriate housing arrangements
Illness Self-Management and Recovery	<p>Illness Self-Management and Recovery (also called illness management or wellness management) is a broad set of rehabilitation methods aimed at teaching individuals with strategies for collaborating actively in their treatment with professionals, for reducing their risk of relapses and re-hospitalizations, for reducing severity and distress related to symptoms, and for improving their social support. Specific evidence-based practices that are incorporated under the broad rubric of illness self-management are psychoeducation about the nature of mental illness and its treatment, "behavioral tailoring" to help individuals incorporate the taking of medication into their daily routines, relapse prevention planning, teaching coping strategies to managing distressing persistent symptoms, cognitive-behavior</p>

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	therapy for psychosis, and social skills training. The goal of illness self-management is to help individuals develop effective strategies for managing their illness in collaboration with professionals and significant others, thereby freeing up their time to pursue their personal recovery goals.
Information Systems	This includes collecting and analyzing treatment data in order to monitor performance and outcomes. Costs for electronic health records (EHRs) and other health information technology also fall under this category.
Infrastructure Support	This includes activities that provide the infrastructure to support services but for which there are no individual services delivered. Examples include the development and maintenance of crisis-response capacity, including hotlines, mobile crisis teams, web-based check-in groups (for medication, treatment, and re-entry follow-up), drop-in centers, and respite services.
In-Home Family Services	Mental health treatment and support services offered to children and adolescents with mental illness and to their family members in their homes.
Institutional Setting	An institutional care facility in which care is provided on a 24 hour, 7 day a week basis. This level of care may include a Skilled Nursing/Intermediate Care Facility, Nursing Homes, Institutes of Mental Disease (IMD), Inpatient Psychiatric Hospital, Psychiatric Health Facility (PHF), Veterans Affairs Hospital, or State Hospital.
Integrated Services for Persons with Mental Illness and Substance Abuse	Dual diagnosis treatments combine or integrate mental health and substance abuse interventions at the level of the clinical encounter. Hence, integrated treatment means that the same clinicians or teams of clinicians, working in one setting, provide appropriate mental health and substance abuse interventions in a coordinated fashion. In other words, the caregivers take responsibility for combining the interventions into one coherent package. For the individual with a dual diagnosis, the services appear seamless, with a consistent approach, philosophy, and set of recommendations. The need to negotiate with separate clinical teams, programs, or systems disappears. The goal of dual diagnosis interventions is recovery from two serious illnesses.
Jail/Correctional Facility	This setting may include a Jail, Correctional Facility, Detention Centers, Prison, Youth Authority Facility, Juvenile Hall, Boot Camp, or Boys Ranch.
Living Independently	A client who lives in a private residence and requires no assistance in carrying out activities of daily living.
Medicaid Client	Mental health clients to whom some services were reimbursable through Medicaid.
Medication Management	<p>The critical elements identified for evidence-based medication management approaches are the following:</p> <ol style="list-style-type: none"> 1. Utilization of a systematic plan for medication management 2. Objective measures of outcome are produced 3. Documentation is thorough and clear 4. Consumers and practitioners share in the decision-making
More Than One Race	An OMB race category for a person who identifies himself/herself with more than one racial group
Multisystemic Therapy (MST)	MST views the individual as nestled within a complex network of interconnected systems (family, school, peers). The goal is to facilitate change

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	in this natural environment to promote individual change. The caregiver is viewed as the key to long-term outcomes
Native Hawaiian or Other Pacific Islander	“A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. It includes people who indicate their race as “Native Hawaiian.: “Guamanian or Chamorro,” “Samoan,” and “Other Pacific Islander” (U.S. Census Bureau, 2000 Census Population, Public Law 97-171 Redistricting Data File).
New Generation Medications	See Atypical Medications definition.
Non-Institutional Settings	A setting that provides mental health services, but not on an inpatient facility or nursing home level of care (e.g., care is provided in a community based setting).
Non-Medicaid Services	Services not covered or paid for by Medicaid
Not In Labor Force	Persons who are not employed or actively looking for employment. This category includes persons who are retired, work in non-competitive employment settings such as sheltered workshops or other sheltered employment, plus others such as homemakers, students, volunteers, disabled, etc.
Nursing Home	An establishment that provides living quarters and care for the elderly and the chronically ill. This includes assisted living outside a nursing home
Other 24-Hour Care	<p>A setting, other than hospital inpatient setting, that provides congregate overnight living. A variety of services along a continuum of living arrangements may be offered, ranging from basic room and board with minimal supervision through 24-hour medical, nursing, and/or intensive therapeutic programs. Activities include: diagnosis, treatment, and care to mentally ill individuals, either on a residential treatment or residential support services basis. Residential treatment is overnight care in conjunction with an intensive treatment program. Residential support is overnight care in conjunction with supervised living and other support services. Depending upon the nomenclature used in the state, residential settings may include, but may not be limited to, any of the following:</p> <ol style="list-style-type: none"> 1. Residential treatment <ol style="list-style-type: none"> a. Intermediate Care Facility (ICF): a residential facility providing room, board, social and rehabilitative services, and nursing services to include treatment, medication, and counseling. One registered or licensed nurse per 40 patients is usually minimal. b. Skilled Nursing Facility (SNF): a residential facility offering services characteristic of ICF with the addition of 24-hour, seven-days a week nursing services required for complex patient medical conditions. These facilities usually have no less than one registered licensed nurse per 15 patients. SNF must have at least one or more medically related health services such as physical services, physical, occupational, or speech therapy, diagnostic and laboratory services, and/or medication.

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	<ul style="list-style-type: none"> c. Residential treatment center for emotionally disturbed children: an organization that provides individually planned programs of mental health treatment services in conjunction with residential care for patients. It serves children and youth primarily under the age of 18. <p>2. Housing support services</p> <ul style="list-style-type: none"> a. Group homes: a residential facility providing post-institutional care or alternative to institutional care including counseling, rehabilitation, supervised living, personal care, and other supportive services. b. Supportive living facility: a long-term residential facility that provides room, board, and possibly mental health care. c. Halfway house: a residential facility providing short-term supervised living and/or care. d. Board and lodging home/domiciliary: provide only room and board. <p>Unsupervised and supervised apartments: provide only room and board and/or minimal supervision.</p>
Partnerships, Community Outreach, and Needs Assessment	<p>This includes state, regional, and local personnel salaries prorated for time and materials to support planning meetings, information collection, analysis, and travel. It also includes the support for partnerships across state and local agencies, and tribal governments. Community/network development activities such as marketing, communication, and public education, and including the planning and coordination of services, fall into this category, as do needs-assessment projects to identify the scope and magnitude of the problem, resources available, gaps in services, and strategies to close those gaps.</p>
Peer Support	<p>These include a wide range of supports, services, and advocacy provided by peers (mental health treatment consumers) to other peers. These services may include but are not limited to: self-help support groups, telephone support lines, drop-in centers, residential programs, outreach services, education, and advocacy.</p>
Planning Council Activities	<p>This includes those supports for the performance of a Mental Health Planning Council or Behavioral Health Planning Council.</p>
Primary Prevention	<p>Mental health primary prevention programs are designed to directly reduce the incidence of mental disorders, the high risk of precursors of disorders, and the adverse consequences of high risk precursors/and or early manifestations of the disorders themselves. Prevention services may vary widely but are generally associated with primary and early intervention, secondary intervention, and/or tertiary prevention activities and may also include such promotion services as information, education, literature distribution, media campaigns, clearinghouse activities, speaker's bureaus, and school or peer group situations. These services may be directed at any portion of the population. No patient expenditures of any kind are to be included in this category.</p>
Private Residence	<p>Individual lives in a house, apartment, trailer, hotel, dorm, barrack, and/or Single Room Occupancy (SRO).</p>

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Quality Assurance and Improvements	This includes activities to improve the overall quality of services, including those activities to assure conformity to acceptable professional standards, adaptation and review of implementation of evidence-based practices, identification of areas of technical assistance related to quality outcomes, including feedback. Administrative agency contracts to monitor service-provider quality fall into this category, as do independent peer-review activities.
Random Sample	A subset of the population derived using a sampling technique that gives each member of the population an equal chance of being selected.
Research and Evaluation	This includes performance measurement, evaluation, and research such as services research and demonstration projects to test feasibility and effectiveness of a new approach as well as the dissemination of such information.
Residential Care	This level of care may include a Group Home, Therapeutic Group Home, Board and Care, Residential Treatment, or Rehabilitation Center, or Agency-operated residential care facilities.
Residential Treatment Center for Children (RTC)	“An organization, not licensed as a psychiatric hospital, whose primary purpose is the provision of individually planned programs of mental health treatment services in conjunction with residential care for children and youth primarily 17 years old and younger. It has a clinical program that is directed by a psychiatrist, psychologist, social worker, or psychiatric nurse who has a master’s degree or doctorate. The primary reason for the admission of the clients is mental illness that can be classified by DSM-IV codes-other than the codes for mental retardation, developmental disorders, and substance-related disorders such as drug abuse and alcoholism (unless these are co-occurring with a mental illness).”
Retired	Clients who have concluded their working or professional career and stopped working and have withdrawn from their occupation.
School Attendance	Physical presence of a child in a school setting during scheduled class hours.
School Based Services	School-based treatment and support interventions designed to address emotional disturbances of children and youth, including activities that assist parents, teachers, and counselors in developing comprehensive strategies for addressing these disturbances. School-based services include counseling or other school-based programs for emotionally disturbed children, adolescents, and their families within the school.
Serious Emotional Disturbance (SED)	Pursuant to section 1912(c) of the Public Health Service Act "children with a serious emotional disturbance" are persons: (1) from birth up to age 18 and (2) who currently have, or at any time during the last year, had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-III-R. Federal Register Volume 58 No. 96 published Thursday May 20, 1993 pages 29422 through 29425.
Serious Mental Illness (SMI)	Pursuant to section 1912(c) of the Public Health Service Act, adults with serious mental illness SMI are persons: (1) age 18 and over and (2) who currently have, or at any time during the past year had a diagnosable mental behavioral or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-IV or their ICD-9-CM equivalent (and

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	subsequent revisions) with the exception of DSM-IV "V" codes, substance use disorders, and developmental disorders, which are excluded, unless they co-occur with another diagnosable serious mental illness. (3) That has resulted in functional impairment, which substantially interferes with or limits one or more major life activities. Federal Register Volume 58 No. 96 published Thursday May 20, 1993 pages 29422 through 29425.
State Psychiatric Hospital	A state owned psychiatric inpatient facility licensed as a hospital that provides primarily inpatient care to mentally ill individuals from a specific geographic area and/or statewide.
Stratified Random Sample	A type of random sampling where sub-populations are represented equally or proportionately to the whole population.
Substance Abuse	Misuse of medications, alcohol or other controlled substances.
Supported Employment	Mental Health Supported Employment (SE) is an evidence-based service to promote rehabilitation and return to productive employment for persons with serious mental illness' rehabilitation and their return to productive employment. SE programs use a team approach for treatment, with employment specialists responsible for carrying out all vocational services from intake through follow-along. Job placements are: community-based (i.e., not sheltered workshops, not onsite at SE or other treatment agency offices), competitive (i.e., jobs are not exclusively reserved for SE clients, but open to public), in normalized settings, and utilize multiple employers. The SE team has a small client: staff ratio. SE contacts occur in the home, at the job site, or in the community. The SE team is assertive in engaging and retaining clients in treatment, especially utilizing face-to-face community visits, rather than phone or mail contacts. The SE team consults/works with family and significant others when appropriate. SE services are frequently coordinated with Vocational Rehabilitation benefits.
Supported Housing	<p>Services to assist individuals in finding and maintaining appropriate housing arrangements. This activity is premised upon the idea that certain clients are able to live independently in the community only if they have support staff for monitoring and/or assisting with residential responsibilities. These staff assist clients to select, obtain, and maintain safe, decent, affordable housing and maintain a link to other essential services provided within the community. The objective of supported housing is to help obtain and maintain an independent living situation.</p> <p>Supported Housing is a specific program model in which a consumer lives in a house, apartment or similar setting, alone or with others, and has considerable responsibility for residential maintenance but receives periodic visits from mental health staff or family for the purpose of monitoring and/or assisting with residential responsibilities, criteria identified for supported housing programs include: housing choice, functional separation of housing from service provision, affordability, integration (with persons who do not have mental illness), right to tenure, service choice, service individualization and service availability.</p>
Therapeutic Foster Care	Children are placed with foster parents who are trained to work with children with special needs. Usually, each foster home takes one child at a time, and caseloads of supervisors in agencies overseeing the program remain small. In

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	<p>addition, therapeutic foster parents are given a higher stipend than to traditional foster parents, and they receive extensive pre-service training and in-service supervision and support. Frequent contact between case managers or care coordinators and the treatment family is expected, and additional resources and traditional mental health services may be provided as needed. A key difference between TFC and traditional foster care is the TFC family receives an extensive pre-service training and in service supervision and support.</p>
Training and Evaluation	<p>This includes skill development and continuing education for personnel employed in local programs as well as partnering agencies, as long as the training relates services to adults with SMI or children with SED. Typical costs include course fees, tuition, and reimbursements to employees, trainer(s) and support staff salaries, and certification expenditures.</p>
Unduplicated Counts	<p>Counting a client/consumer and their services uniquely. Unduplicated counts can exist at different levels: a program, a local system of care, or at the State level.</p>
Unemployed	<p>According to the U.S. Department of Labor: Persons are classified as unemployed if they do not have a job, have actively looked for work in the prior 4 weeks, and are currently available for work. Actively looking for work may consist of any of the following activities:</p> <ul style="list-style-type: none"> • Contacting: <ul style="list-style-type: none"> ○ An employer directly or having a job interview ○ A public or private employment agency ○ Friends or relatives ○ A school or university employment center • Sending out resumes or filling out applications • Placing or answering advertisement • Checking union or professional registers • Some other means of active job search
Vocational Rehabilitation	<p>Services that include job finding/development, assessment and enhancement of work-related skills, attitudes, and behaviors as well as provision of job experience to clients/patients. Includes transitional employment.</p>
White	<p>“A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.” It includes people who indicate their race as “White’ or report entries such as Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish” (U.S. Census Bureau, 2000 Census Population, Public Law 97-171 Redistricting Data File).</p>