

Michigan Department of Corrections

Offender Success Administration

Office of Community Corrections



Quarterly Report FY 2024

CCAB Name:

Livingston

Report Period*:

Quarter 4: July 1 - September 30

*This report is due no later than 30 calendar days following the quarterly report period.

Email the report to your assigned Community Corrections Specialist by the due date:

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Program Utilization				
Local Program Name		SUD Groups/Individual		TREM
CCIS Code	C01 - Cognitive	G18 - Outpatient Svcs	G17 - Sub Abuse Testing	G18 - Outpatient Svcs
Projected # New Enrollments	60	65	24	15
# Carryovers from Previous Fiscal Year	9	19	30	0
YTD # New Enrollments	61	23	19	5
Actual Percentage % New Enrollments	102%	35%	79%	33%
YTD # Neutral Discharges	4	1	1	0
YTD # Unsuccessful Discharges	5	6	2	1
YTD # Successful Discharges	46	31	15	2
Approved Program Budget	\$17,748	\$20,937	\$31,692	\$2,723
Program Expenses Through Report Period	\$12,197	\$18,383	\$30,932	\$681
Actual Percentage % Expenses Through Report Period	69%	88%	98%	25%
Approved KPM from Program Description	80% of enrolled participants will successfully complete the program	80% of enrolled participants will successfully complete the program	85% of enrolled participants will successfully complete the Treatment Court program	80% of enrolled participants will successfully complete the program

Data Element	The contractor will provide completion certificates upon successful completion of the group	The contractor will provide completion certificates upon successful completion of the group	The Contractor/ADC Coordinator will provide completion certificates upon successful completion of the program	The contractor will provide completion certificates upon successful completion of the group
Tracking Source	CCAB Coordinator utilizes North Pointe to track enrollment and termination data for participants monthly	CCAB Coordinator utilizes North Pointe to track enrollment and termination data for participants monthly	CCAB Coordinator utilizes North Pointe to track enrollment and termination data for participants monthly	CCAB Coordinator utilizes North Pointe to track enrollment and termination data for participants monthly
Actual YTD KPM	Q4 - 84% - 46 participants were discharged from the treatment program and 55 were successful completions	Q4 - 79% - 39 participants were discharged from treatment and 31 were successful completions	Q4 - 83% - 18 participants were discharged from the program and 15 were successful completions	Q4 - 33% - 3 participants were discharged from treatment and 1 was a unsuccessful completion
Approved KPM from Program Description	100% of enrolled participants who successfully complete the program will report increased improvement on the URICA survey that is provided at the start of the group and upon completion of the group	100% of enrolled participants who successfully complete the program will report improvement on the Retrospective Survey and Self-Sufficiency Matrix (Catholic Charities)		100% of enrolled participants who successfully complete the program will report improvement on the Retrospective Survey and Self-Sufficiency Matrix (Catholic Charities) or the URICA questionnaire (Key

Data Element	y results upon the par	Key/Catholic Charities will provide a copy of the survey results upon the participants' completion of the program		Key will provide a copy of the survey results upon the participants' completion of the program
Tracking Source	CCAB Coordinator utilizes an excel document to record whether the participants reported improvement on more than half of the scales in the surveys administered, on an ongoing basis	CCAB Coordinator utilizes an excel document to record whether the participants reported improvement on more than half of the scales in the surveys		CCAB Coordinator utilizes an excel document to record whether the participants reported improvement on more than half of the scales in the surveys administered, on an ongoing basis
Actual YTD KPM	For Q4 - 100% of participants that completed the URICA survey at the start and upon successful completion of the group reported an improvement on more than half of the scales in the survey	For Q4 - 100% of participants that completed the URICA survey at the start and upon successful completion of the group reported an improvement on more than half of the scales in the survey		For Q4 - 100% of participants that completed the URICA survey at the start and upon successful completion of the group reported an improvement on more than half of the scales in the survey
Approved KPM from Program Description				

Narrative Section
You must provide an answer to each of the following questions. If the question does not apply to this report period, then enter "N/A."
1) Identify reason(s) for disparity between projected new enrollments and actual new enrollments, year-to-date, through the report period, for each P.A. 511 funded program. Our Program has exceeded our projected number of enrollments in some programs and have ended the fiscal year below in others. The C01-Our Thinking Matter programming has seen an increase in referrals especially in the referrals for the Thinking Matters group in the jail. At the end of the FY, our Program has exceeded the projected number of enrollments with a 102% utilization. The G18-Substance Use Treatment end the FY under target at 35%. This number is also low because our program works with the PHP to fund any of the participants that qualify for Medicaid. Our Coordinator continues to work with the MDOC agents to ensure that our programming is receiving any referrals that fit the criteria. The G17-Drug Testing is ending the FY slightly under target for number of new enrollees at 79% but on budget for the amount allocated to this service. Lastly, our G18-TREM group is a new group for this FY. We have received 3 referrals thus far this FY which ends the fiscal year under the target of 15 new enrollees. However, our Coordinator continues to work with the agents to make them aware of our TREM group. We are slowly receiving new referrals for this group so this will be an important group to continue to build into FY25.
2) For those programs indicated above as underutilized, provide an action plan outlining how the CCAB intends to increase utilization to the projected level. At the end of this FY, our Program has underutilization in the following three programs: SUD treatment, TREM, and drug testing. This information was used for the planning and application of the FY25 grant. For SUD treatment, we have created new programming categories for SUD individual therapy and assessments which will help us track and assess more accurately the utilization rates in the future. In addition, we have pared down the SUD group program description to better reflect the group programming that we are currently using and will be using for FY25. Lastly, our Project Director, Coordinator, and MDOC Supervisor will continue to work together to increase the number of referrals we are receiving for the TREM program.
3) 4th QUARTER ONLY: Provide information regarding policies, procedures, program operations, pertinent issues or opportunities that emerged, or other factors that have positively/negatively affected achievement of your CCAB's Comprehensive Plan. Briefly describe the impact, and if negative, how was it addressed. You must also describe what steps the CCAB will take to address it in next year's Plan. For the FY25 grant application and budget, the Project Director worked closely with Dawn to improve our Program descriptions, projected new enrollments, and data reporting to help us more accurately reflect tracking of programming, outcomes, and utilization of funding. We did this by creating new programming categories for SUD individual therapy and assessments which will help us track and assess more accurately the utilization rates in the future. In addition, we have pared down the SUD group program description to better reflect the group programming that we are currently using and will be using for FY25. The Project Director worked very closely with our contractor, Key Development, to look at the tools currently being utilized to assess improvements before and after programming. Key will be integrating new evidence-based tools for individual treatment and TREM programs to help determine if the participants are experiencing improvement from the start to the end of their treatment/programming. The LCCCAB will continue to work together to look at ways to increase utilization of the programming that was underutilized in FY24. Lastly, drug testing has been removed from the FY25 budget as the court received a grant that is able to cover drug testing for FY25. This ensures that there is more funding available for our other programming for FY25.