

Behavioral Health System and/or Provider Agency	Agency:	
	Program:	
Co-occurring Capability Development Program Report	Report Date:	
	Submitted by:	

<i>If you are "progressing," please rate on a scale of 1-9 (1 = just starting; 9 = near completion).</i>					
Item No.	Item Measured / Implementation Indicator	Completed	Progressing (1-9)	Not Started	Comments
Section 1: Organizing the Change Process for Co-occurring Capability					
1A	Agency/program leadership makes formal announcement that co-occurring capability is a goal.	<input type="checkbox"/>		<input type="checkbox"/>	
1B	Agency/program organizes a QI team to work on co-occurring capability.	<input type="checkbox"/>		<input type="checkbox"/>	
	• The team meets regularly.	<input type="checkbox"/>		<input type="checkbox"/>	
	• The team has identified front-line change agents for each program.	<input type="checkbox"/>		<input type="checkbox"/>	
1C	Agency/program has done a self-assessment of co-occurring capability using COMPASS-EZ™ or equivalent tool in the past year.	<input type="checkbox"/>		<input type="checkbox"/>	
	• Agency/program plans to repeat the tool annually.	<input type="checkbox"/>		<input type="checkbox"/>	
1D	Agency/program has created a QI action plan for co-occurring capability. The plan includes measurable objectives for the following elements of co-occurring practice and competency. (Check all that apply. This is just about what is <i>in the plan</i> , not about measuring progress.)	<input type="checkbox"/>		<input type="checkbox"/>	
	• Welcoming (co-occurring clients and families)	<input type="checkbox"/>		<input type="checkbox"/>	
	• Improving access	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated screening (MH, SUD, PH, BI, trauma)	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated person-centered strength-based assessment	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated stage-matched recovery/service/support plans	<input type="checkbox"/>		<input type="checkbox"/>	
	• Skill-building interventions/manuals	<input type="checkbox"/>		<input type="checkbox"/>	
	• Positive behavior supports	<input type="checkbox"/>		<input type="checkbox"/>	
	• Staff competency development	<input type="checkbox"/>		<input type="checkbox"/>	
• Partnership and collaboration with other providers	<input type="checkbox"/>		<input type="checkbox"/>		

Item No.	Item Measured / Implementation Indicator	Completed	Progressing (1-9)	Not Started	Comments
Section 2: Making Progress in Co-Occurring Capability					
The agency/program has made measurable progress in the following program co-occurring capability areas. Mark progress or lack of progress in each:					
2A	Welcoming and access for co-occurring clients	<input type="checkbox"/>		<input type="checkbox"/>	
	• Progress in welcoming policy and procedure	<input type="checkbox"/>		<input type="checkbox"/>	
	• Progress in improving access	<input type="checkbox"/>		<input type="checkbox"/>	
2B	Integrated screening and identification	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated screening: MH, SA, DD, BI, trauma	<input type="checkbox"/>		<input type="checkbox"/>	
	• Improved recognition of co-occurring clients in data	<input type="checkbox"/>		<input type="checkbox"/>	
2C	Integrated person-centered strength-based assessment	<input type="checkbox"/>		<input type="checkbox"/>	
	• Identifying hopeful person-centered goals	<input type="checkbox"/>		<input type="checkbox"/>	
	• Identifying periods of strength and success	<input type="checkbox"/>		<input type="checkbox"/>	
	• Identifying multiple primary issues/conditions	<input type="checkbox"/>		<input type="checkbox"/>	
2D	Integrated stage-matched recovery/support plans	<input type="checkbox"/>		<input type="checkbox"/>	
	• Plans begin with hopeful goals and successes	<input type="checkbox"/>		<input type="checkbox"/>	
	• Plans identify multiple primary conditions	<input type="checkbox"/>		<input type="checkbox"/>	
	• Plans are stage-matched for each condition	<input type="checkbox"/>		<input type="checkbox"/>	
	• Plans describe positive supports for new skills for each condition	<input type="checkbox"/>		<input type="checkbox"/>	
2E	Skill-building and positive behavior supports	<input type="checkbox"/>		<input type="checkbox"/>	
	• Skill-building and/or manuals for co-occurring issues	<input type="checkbox"/>		<input type="checkbox"/>	
	• Positive behavior supports for progress on each issue	<input type="checkbox"/>		<input type="checkbox"/>	
2F	General staff competency development activities	<input type="checkbox"/>		<input type="checkbox"/>	
	• All staff have goal of co-occurring competency	<input type="checkbox"/>		<input type="checkbox"/>	
	• Co-occurring competency in job descriptions	<input type="checkbox"/>		<input type="checkbox"/>	
	• Co-occurring competency development plan	<input type="checkbox"/>		<input type="checkbox"/>	
	• Supervision and training provided regularly	<input type="checkbox"/>		<input type="checkbox"/>	
2G	Specific staff progress: Staff have made progress in co-occurring competency in one or more areas:	<input type="checkbox"/>		<input type="checkbox"/>	
	• Welcoming and engagement	<input type="checkbox"/>		<input type="checkbox"/>	
	• Inspiring hope	<input type="checkbox"/>		<input type="checkbox"/>	
	• Working as integrated partners on multiple issues	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated screening	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated assessment	<input type="checkbox"/>		<input type="checkbox"/>	
	• Integrated stage-matched service planning	<input type="checkbox"/>		<input type="checkbox"/>	
	• Stage-matched interventions (MI)	<input type="checkbox"/>		<input type="checkbox"/>	
	• Skill-building for co-occurring issues	<input type="checkbox"/>		<input type="checkbox"/>	
	• Skills for supporting medication adherence	<input type="checkbox"/>		<input type="checkbox"/>	
	• Positive behavior supports for all issues	<input type="checkbox"/>		<input type="checkbox"/>	

Item No.	Item Measured / Implementation Indicator	Yes, Definitely	Partly/Slightly	No, Not at All	Comments
Section 3: Asking for Help with Co-Occurring Capability					
3A	The agency/program <i>has received</i> co-occurring capability training, consultation or TA in the past year. List which types have been received:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Change Agent trainings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Other learning communities (e.g., NIATx, TIC, PBIS.) Specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• On-site individual program TA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Telephone individual program TA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• On-site group TA (e.g., to a local network)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Telephone group TA (e.g., to a local network)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Attendance at co-occurring trainings other than Change Agent (Specify topics)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3B	The agency/program <i>plans to receive</i> co-occurring capability training, consultation or TA in the coming year. List which types are preferred/ planned:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Statewide co-occurring/change agent trainings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Regional co-occurring/change agent trainings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Other learning communities (e.g., NIATx, TIC, PBIS). Specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• On-site individual program TA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Telephone individual program TA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• On-site group TA (e.g., to a local network)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Telephone group TA (e.g., to a local network)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Attendance at other co-occurring trainings. Specify topics:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Section 4: Partnership and Collaboration					
	• The program has service provider partners from which it <i>receives</i> consultation and support for co-occurring capability development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• The program <i>provides</i> consultation and support to service provider partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• The program participates in a local (county) or regional collaboration or learning community working on co-occurring capability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	• The program participates in statewide learning communities (e.g., Change agent meetings or other activities) to support co-occurring capability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	