Agency Director's Report for the Commission on Behavioral Health (Adult)

Agency:	Representative:	Date:
Reporting Period:		
Agency Caseloads/Waiting Lists		
1. Program:	Case Load:	Wait List:
2. Program:	Case Load:	Wait List:
3. Program:	Case Load:	Wait List:
4. Program:	Case Load:	Wait List:
5. Program:	Case Load:	Wait List:
6. Program:	Case Load:	Wait List:
7. Program:	Case Load:	Wait List:
8. Program:	Case Load:	Wait List:
9. Program:	Case Load:	Wait List:
10. Program:	Case Load:	Wait List:
11. Program:	Case Load:	Wait List:
12. Program:	Case Load:	Wait List
Staffing		
Percentage of Positions Vacant:		
Staffing Difficulties (Give a brief description):		
Program Highlight/Difficulties and Summary		
Program Highlight/Difficulties and Summary		
Program Difficulties:		
Program Changes and/or Successes:		
Summary Statement to the Commission:		
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