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Since 2008, NC START (Systemic, Therapeutic, Assessment, Resources, and Treatment) has been a part of the North Carolina system working to achieve its mission of creating a support network that provide crisis prevention and intervention supports for individual with IDD and behavioral health needs. With support and consultation from the Center for START Services at the University of New Hampshire's Institute on Disability/UCED, NC START was the first statewide implementation of the START model in the nation and the three regional teams: NC START East, NC START Central, and NC START West. Each of the NC START programs maintain their START Program Certification through the Center for START Services. In 2014, the START Information Reporting System (SIRS), a national database was launched, and NC START became a part of this national initiative. This report reflects data on individuals who received NC START services in Fiscal Year 2018 (July, 2017-June, 2018).

NC START provides lifespan services consisting of a full array of clinical and therapeutic supports including START coordination, 24-hour on-call support, in-home therapeutic coaching and Resource Center services. The Central program has the largest team out of all three programs due to the population density of the central part of the state as well as funding opportunities available through MCOs in their region. The NC START West program is the second largest and also has additional support from MCOs. Resource Center services are similar across the state, with each team operating a 4-bed facility within their respective regions. Each of the NC START programs have been providing In-home Therapeutic Coaching for a full fiscal year. The programs have served a combined total of 89 individuals in planned and emergency capacities, most being children and transitional age youth. The programs have provided 2316 hours of coaching services throughout the state in FY18. A major goal of the programs in the coming year is to collaborate with the Center for START Services to evaluate this service in greater detail to clearly determine outcome measures, caseload capacity and service benchmarks.

The programs initially served adults (ages 18 and older) and expanded to children (age 6-17) in 2016. During FY18, the NC START programs served a total of 697 individuals, including 271 (39%) children under the age of 18. NC START Central expanded to serve children prior to East and West, but by 2017, all three were lifespan programs, serving individuals age 6 and older. Statewide, about half of all NC START enrollees are children and transitional youth (18-21), with NC Central having a higher percentage of children (65%) enrolled than the other two programs. Within the child population enrolled, the teams support many children with autism spectrum disorder. Overall, most enrollees are male and Caucasian. There does appear to be a great proportion of enrollees of African American race (34%) when compared to the general population (22%). Individuals enrolled in START are more likely to be diagnosed with moderate-severe ID when compared to the general population of individuals with ID. This means that individuals enrolled in START services in North Carolina are more severely cognitively impaired than most individuals with ID.

One area of concern highlighted through the enrollment data is related to child referrals. Data show that children and transitional youth referred to the START programs in North Carolina are about 20% less likely to be residing with their family than in other START programs across the country. Additionally, the rates of emergency service use prior to START enrollment is also higher. There is a need to examine referral protocols and collaborate with the system to identify children earlier to prevent these high rates of emergency service use and increase the likelihood that children can remain in their homes.

Primary, secondary and tertiary services provided by the NC START programs are in line with national expectations. Each program holds regular regional advisory council meetings and community outreach efforts,



including Clinical Education Team Meetings. START Central provides a great deal of clinical and medical consultation and this is an area of exploration and expansion for the East and the West. The East and the West are excelling in in-person, on-site crisis response rates. All three of the programs provided high rates of outreach and START assessments and tools and will also focus on conducting and completing more Comprehensive Service Evaluations in the coming year. Professional Learning Community (PLCs) have been provided across the state which engage and train IDD and MH providers. This is an area of continued focus for each of the teams as they work to build capacity in the community for supporting individuals with IDD and complex needs.

Overall, more than 50% of individuals enrolled are noted to have experienced at least one emergency department visit and/or psychiatric hospitalization in the year prior to START enrollment. As demonstrated in previous years, as well as this year, these rates drop by at least half once enrolled in START. There is also a statistically significant improvement in Aberrant Behavior Checklist (ABC) scores for the individuals served, which indicates that individuals enrolled in the NC START programs are more likely to achieve clinical stability once enrolled. Improvements in ABC scores coupled with decreases in emergency service use are promising trends and are consistent with certified START programs across the country.

NC START continues to provide a critical role as part of the state's safety net for children and adults with IDD and behavioral health needs. The annual reports highlight each program's unique contribution and provide greater detail regarding their specific enrollment/demographic information, services provision, and outcomes, as well as recommendations and goals for the current year. NC START looks forward to continuing to expand and enhance the START network to provide effective community-based supports for individuals with IDD and behavioral health needs across the state of North Carolina.

Respectfully Submitted,

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