

**FY 2020**  
**Mandatory Outpatient Treatment (MOT)**  
**Annual Report**

***Executive Summary***

Mandatory Outpatient Treatment (MOT) refers to a legal obligation for a person to participate in outpatient mental health and/or substance abuse treatment. The purpose of MOT is to provide a less restrictive alternative to inpatient care for service recipients with a mental illness who require continued treatment to prevent deterioration in their mental condition and who will respond to a legal obligation to participate in outpatient treatment. The treatment itself is the same treatment as for any individual living with mental illness and/or substance use disorders, such as supervised housing, medications, psychosocial programming, and various forms of therapy.

In Fiscal Year 2020 (July 1, 2019-June 30, 2020), 29 separate providers had clients subject to MOT, most of which were traditional community mental health agencies, but also included private practitioners and the Veteran's Administration. During this period, the exact same number of new MOT cases were added as the number of MOT cases that were terminated (36), and at year's end there were a total of 354 MOT cases across the state of Tennessee.

The individuals constituting new MOT cases were predominately individuals who had been found Not Guilty by Reason of Insanity, committed to a Regional Mental Health Institute, and then discharged to the community with an MOT obligation or individuals charged with a criminal offense who were found to be unrestorably incompetent to stand trial after being committed to a Regional Mental Health Institution and then discharged to the community with an MOT obligation. Individuals who were committed to a Regional Mental Health Institute for treatment who had not been charged with a criminal offense were also subject to release on MOT at discharge.

Most (31 of 36) of the individuals whose MOT obligation was terminated during FY 20 had their MOT terminated because they no longer required the legal obligation or whose circumstances changed so that it no longer applied (three moved into a nursing home, five passed away of natural causes, one was terminated by the court, five moved out of state and 17 simply did not require MOT in order to participate in treatment). Three people were incarcerated on new charges while on MOT, another was not compliant with treatment even with MOT, and one person eloped from their placement and their whereabouts are unknown. The length of time on MOT for those whose MOT was terminated during FY 20 ranged from six months to over 23 years.

MOT cases are logged and tracked by the MOT Coordinator in the Office of Forensic and Juvenile Court Services of the Tennessee Department of Mental Health and Substance Abuse Services. The following is a detailed report of MOT activity during FY 20.

**FY 2020**  
**Mandatory Outpatient Treatment (MOT)**  
**Annual Report**  
**Debbie Wynn, LCSW, MOT Coordinator**

Mandatory Outpatient Treatment (MOT) refers to a legal obligation for a person to participate in outpatient treatment. The purpose of MOT is to provide a less restrictive alternative to inpatient care for service recipients with a mental illness who require continued treatment to prevent deterioration in their mental condition and who will respond to a legal obligation to participate in outpatient treatment. There are three main types of MOT in Tennessee law, one in Title 33, Chapter 6, Part 6 (the requirements for which are defined in T.C.A. § 33-6-602), one in T.C.A. § 33-7-303(b), and one in T.C.A. § 33-7-303(g). Differences are summarized in Table 1, below:

**Table 1: Three Types of MOT**

T.C.A. § 33-6-602	T.C.A. § 33-7-303(b)	T.C.A. § 33-7-303(g)
Starts in the hospital for those committed under Title 33, Chapter 6, Part 5	Starts in the community for NGRI acquttees after evaluation under T.C.A. § 33-7-303(a)	Is required for service recipients found not guilty by reason of insanity of murder or a class A felony under Title 39, Chapter 13 whether released after evaluation under 33-7-303(a) or after commitment under 33-7-303(c).
Expires six months after release or previous renewal unless renewed	Does not expire	Does not expire: Need for continued treatment reviewed by court after an initial six month mandatory period, thereafter the court reviews annually
Can be modified or terminated by provider	Can only be terminated by the court	Can only be terminated by the court
A court finding of non-compliance can result in re-hospitalization	Does not allow for hospitalization, may result in civil or criminal contempt	Allows for hospitalization for those judicially committed, or may result in civil or criminal contempt

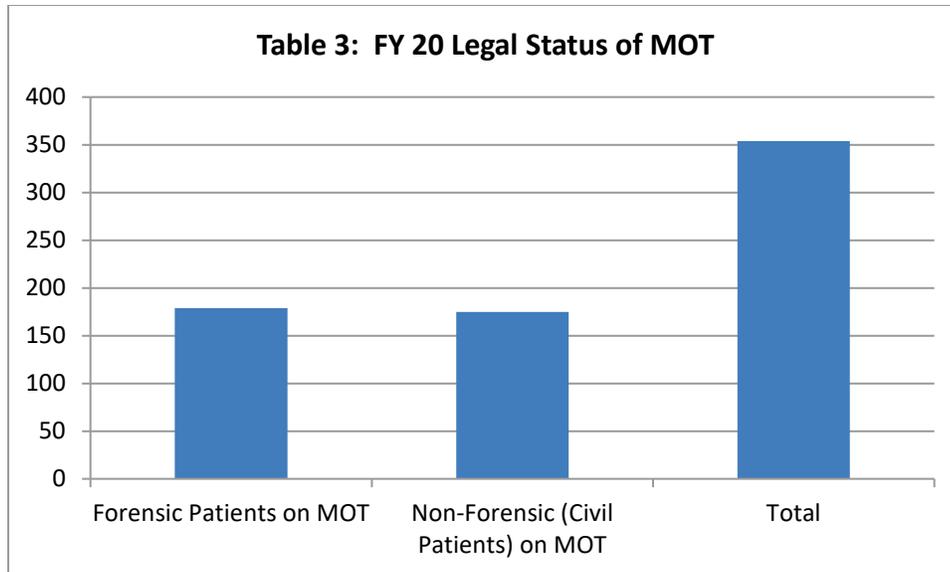
**Table 2: Total MOTs  
June 30, 2020**

Type of MOT	Active MOTs	Suspended MOTs Due to Hospitalization	Total MOTs
<b>303b</b>	94	4	98
<b>303g</b>	5	1	6
<b>602</b>	226	22	248
<b>Both 303b and 602</b>	2	0	2
<b>Totals</b>	327	27	354

The majority of the 354 total MOTs originated in Shelby County courts which oversee a total of 199 MOTs. Forty-five MOTs originated in Davidson County, 20 in Hamilton, and 14 in Knox. Eleven originated in Madison County, seven in Sumner, four in Anderson, Hardeman, and Rutherford. Three counties (Gibson, Hickman, Scott) have three MOTs each. Nine counties (Henderson, Henry, Lauderdale, Lewis, Maury, Robertson, Sullivan, Tipton, and Williamson) have two MOTs each. Nineteen counties have only one MOT (Bedford, Bradley, Campbell, Carroll, Chester, Cocke, Coffee, Cumberland, Dyer, Giles, Grundy, Hawkins, Marion, McMinn, Monroe, Overton, Roane, Union and Weakley).

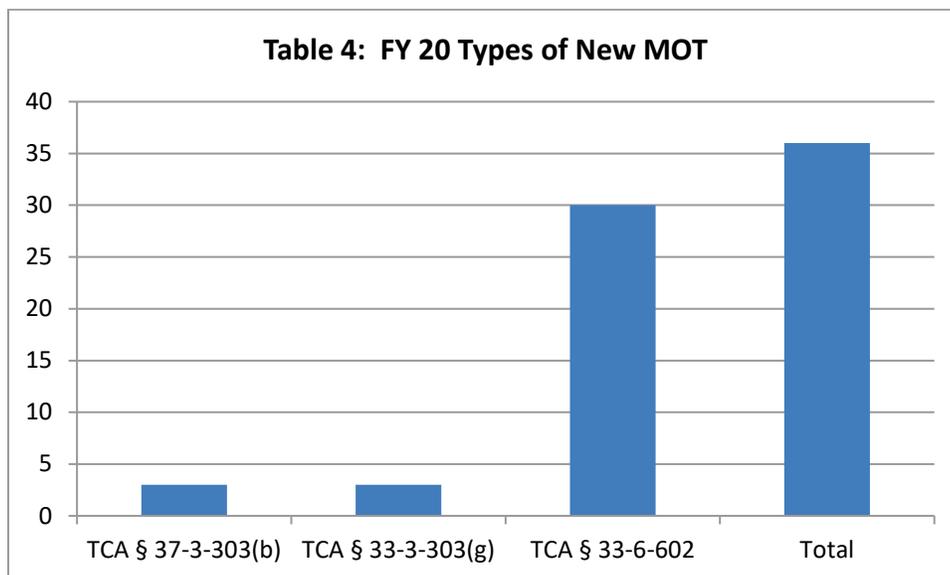
In the following charts in this report, the two individuals who have a MOT under both T.C.A. § 33-6-602 and T.C.A. § 33-7-303(b) will be counted under T.C.A. § 33-6-602 as they are eligible for re-hospitalization under T.C.A. § 33-6-602 if they become non-compliant with their MOT contract.

Non-forensic patients who are judicially committed to a hospital for involuntary care under Title 33, Chapter 6, Part 5, Tenn. Code Annotated may be released on MOT when eligible for discharge if they meet the criteria for MOT under T.C.A. § 33-6-602. Forensic patients may be released on MOT if they are committed subsequent to T.C.A. § 33-7-301(b) or 33-7-303(c) and meet the criteria for MOT under T.C.A. § 33-6-602 just like non-forensic patients. Forensic patients may be placed on MOT in the community under T.C.A. § 33-7-303(b) or (g) if the consumer is adjudicated not guilty by reason of insanity, does not meet commitment standards under Title 33, Chapter 6, Part 5, Tenn. Code Ann., and meets the criteria for MOT. In FY 20 there were 179 forensic patients on MOT and 175 non-forensic patients on MOT. Many of the non-forensic patients released on MOT were originally forensic cases in the RMHIs under 33-7-301(b) but had their charges retired prior to discharge.



**New MOT Cases**

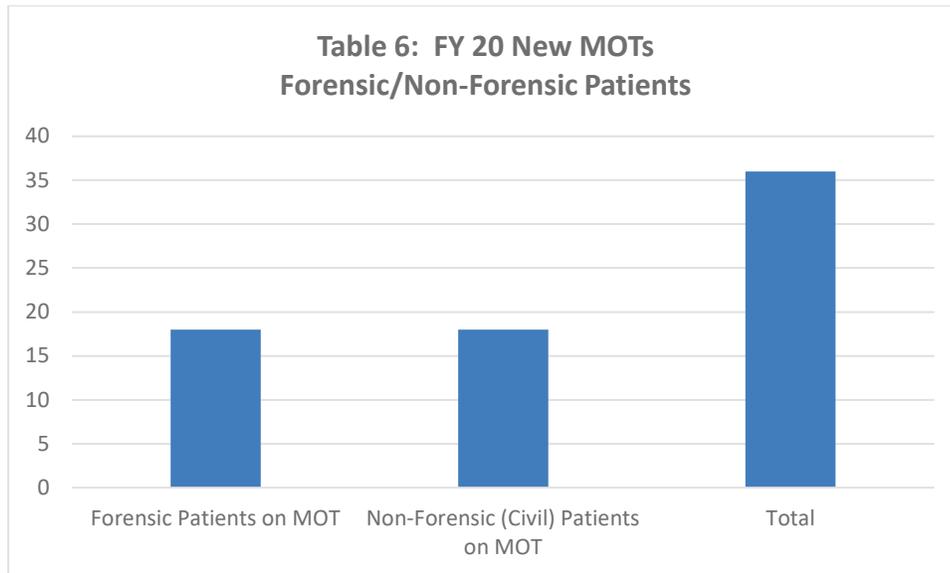
In FY 2020, 36 new MOT cases were initiated. Of these cases, 30 were initiated under TCA § 33-6-602, three were initiated under TCA § 33-7-303(b) and three were initiated under T.C.A. § 33-7-303(g). This was a decrease from FY 2019 in which 45 new MOT cases were initiated.



**Table 5: FY 2020 Added MOTs by Month**

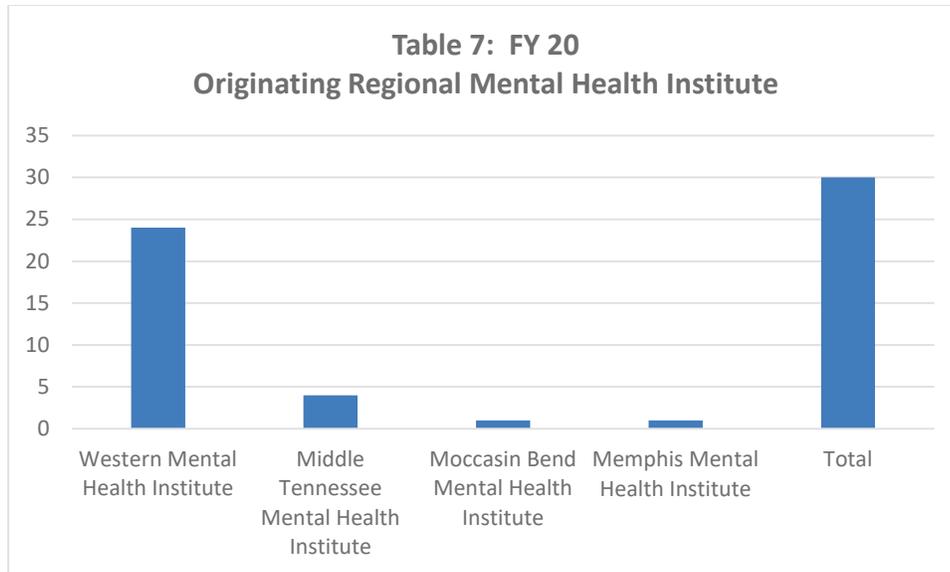
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
<b>Added Total</b>	4	5	4	2	5	2	4	5	1	0	2	2	36
<b>303b</b>	1	0	0	0	0	0	1	1	0	0	0	0	3
<b>303g</b>	0	2	0	0	1	0	0	0	0	0	0	0	3
<b>602</b>	3	3	4	2	4	2	3	4	1	0	2	2	30

TCA § 33-6-602 patients may have been in either forensic or non-forensic legal status, whereas all TCA § 33-7-303(b) and 303(g) MOTs are considered forensic patients having been found NGRI on a criminal offense. Eighteen of the FY 20 new MOT cases had non-forensic legal statuses and 18 had forensic legal statuses. The breakout by month, above, shows releases slowed during the last three months as movement was restricted due to the pandemic.



Twenty-one of the 36 new MOT consumers had legal charges that originated in Shelby County. Four had legal charges that originated in Davidson and four in Madison County. Hamilton, Henderson, Hickman, Lewis, Robertson, Rutherford, and Sumner Counties had one each.

Of the 30 new MOTs originating under T.C.A. § 33-6-602, 24 originated at Western Mental Health Institute, four at Middle Tennessee Mental Health Institute, one at Moccasin Bend Mental Health Institute, and one at Memphis Mental Health Institute (which typically serves only acute forensic cases). All three of the new MOTs under T.C.A. § 33-6-303(b) originated in the community, and all three of the new MOTs under T.C.A. § 33-7-303(g) originated at Western Mental Health Institute.



## Terminations

In FY 2020, there were 36 MOT consumers whose MOT services were terminated. Five of these were terminated due to the death of the consumer (due to natural causes). Twenty-nine others had their MOT terminated by decision of the MOT agency’s Treatment Team or by court order. Two of the consumers had MOTs that were not renewed by their MOT agencies, so their MOT was allowed to lapse.

Of the 31 consumers whose MOT were terminated or lapsed, three received MOT services under the auspices of T.C.A. § 33-7-303(b), and 28 received MOT services under the auspices of T.C.A. § 33-6-602.

**Table 8: FY 2020 MOTs Terminated or Lapsed  
By Type**

TCA § 33-7-303(b)	TCA § 33-6-602
3	33

**Table 9: FY 2020 Terminated MOTs by Month**

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	TOTALS
<b>Terminated Total</b>	0	6	5	2	4	2	5	5	1	1	2	3	36
<b>303b</b>	0	1	0	0	0	1	0	1	0	0	0	0	3
<b>602</b>	0	5	5	2	4	1	5	4	1	1	2	3	33

The length of MOT service of those 36 consumers whose MOT was terminated by the MOT agency, death, or by court order ranged from six months to over 23 years, as outlined below:

**Table 10: FY 2020 MOT Terminations  
By Number of Years on MOT at Time of Termination**

0 – 1 Year	1 – 2 Years	2 – 5 Years	5 – 10 Years	10 + Years
4	5	8	11	8

As noted above, five consumers died of natural causes while on active MOT in FY 20. Four of the deceased consumers were receiving MOT services under TCA § 33-6-602 and one was receiving services under TCA § 33-7-303(b). Of the remaining 31 consumers whose MOT was terminated, 34 were receiving MOT services under TCA § 33-6-602 and two under TCA § 33-7-303(b).

The most common reason for a MOT to be terminated was that the person had successfully adjusted to the community and no longer needed MOT. Seventeen individuals were doing well on their MOT and no longer needed a legal obligation under MOT to remain compliant. Five individuals moved out of the service area of their MOT agency. Three individuals had their MOT terminated subsequent to being incarcerated on new legal charges. Three consumers entered nursing homes. One of the consumers was not compliant even with a MOT obligation, so the agency chose to terminate his contract based on his lack of compliance. One MOT was terminated by court order, and one MOT was terminated after the consumer eloped and could not be located. As mentioned earlier, five individuals were deceased.

**Table 11: FY 2020 MOT Terminations  
By Reason**

MOT no longer necessary for compliance	Moved out of state or out of service area	Incarcerated with new legal charges	Entered nursing home	Not compliant even with a legal obligation	Terminated by court order	Terminated following elopement of consumer	Deceased
17 (47%)	5 (14%)	3(8%)	3 (8%)	1 (3%)	1 (3%)	1 (3%)	5 (14%)

Only 11 of the 29 MOT agencies that were active in FY 2020 elected to terminate MOT services to a consumer.

**Table 12: FY 2020 MOT Terminations  
By Community MOT Agency**

<b>Agency Name</b>	<b>Number of Terminations</b>	<b>Total Number of Consumers in MOT Service June 30, 2020</b>
Alliance Health Services	13	103
CMI Healthcare Services	3	34
Extended Family Care	2	2
Generations	2	37
Helen Ross McNabb	1	15
LifeCare	4	10
Mental Health Coop	3	20
Dr. Hugh Moore (private provider)	1	0
Pathways Community Mental Health	2	14
Professional Care Services of West TN	2	7
Volunteer	3	29
A Plus Care Solutions	0	2
Absolute Care	0	3
Centerstone	0	26
Cherokee	0	2
Elam Mental Health Center	0	2
Frontier	0	1
Harbert Hills Nursing Home	0	1
Hometown Medical Services (private provider)	0	10
Loving Arms	0	1
Memphis Health Care	0	1
MidSouth Supportive Living	0	1
Pine Meadows Healthcare & Rehabilitation	0	2
Pleasant View Health Care	0	1
Project Transition	0	1
Quinco	0	7
Ridgeview	0	11
Support Solutions	0	3
Veterans Administration (Memphis)	0	8
<b>Total</b>	<b>36</b>	<b>354</b>

## MOT Agencies

Twenty-nine separate community agencies or private providers provided MOT services during FY 2020. Twenty agencies are traditional community mental health centers. Three providers are nursing homes. Three agencies are contracted to provide services through the Department of Intellectual and Developmental Disabilities, which only accepts consumers with intellectual disabilities. Two providers are individuals in private practice. The final provider is the Memphis Veterans Administration Medical Center, which only accepts veterans with specific qualifications.

## Active MOTs

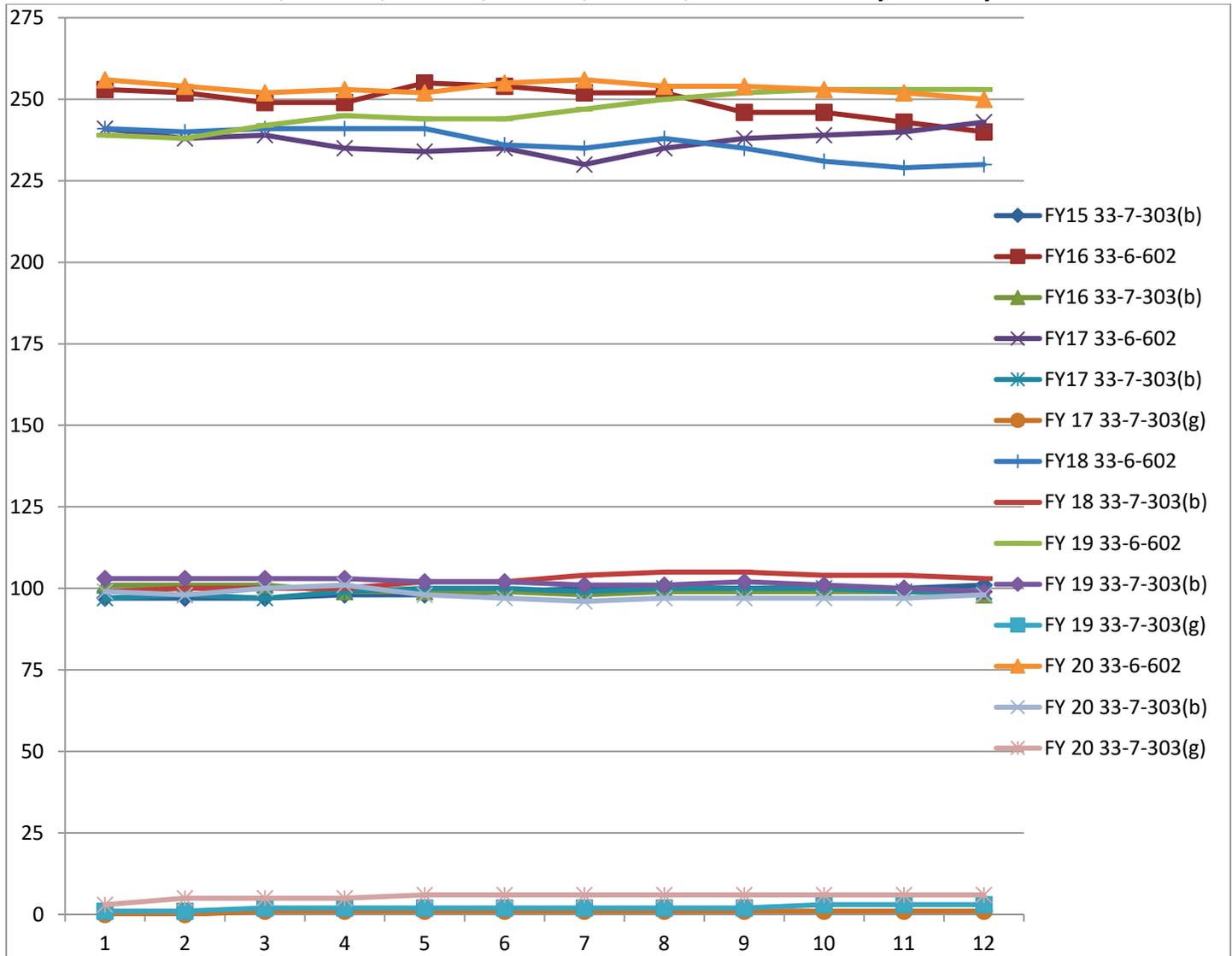
The total number of active MOTs changes monthly as new MOTs are originated and active MOTs are terminated.

**Table 13: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019, FY 2020 Monthly MOTs**

	FY 15 602	FY 15 303b	FY 16 602	FY 16 303b	FY 17 602	FY 17 303b	FY 18 602	FY 18 303b	FY 18 303g	FY 19 602	FY 19 303b	FY 19 303g	FY 20 602	FY 20 303b	FY 20 303g
<b>July</b>	245	97	253	101	241	97	241	99	0	239	103	1	256	99	3
<b>August</b>	245	97	252	101	238	98	240	100	0	238	103	1	254	98	5
<b>September</b>	247	97	249	101	239	97	241	100	1	242	103	2	252	100	5
<b>October</b>	250	98	249	99	235	99	241	100	1	245	103	2	253	101	5
<b>November</b>	248	98	255	99	234	100	241	102	1	244	102	2	252	98	6
<b>December</b>	247	99	254	99	235	100	236	102	1	244	102	2	255	97	6
<b>January</b>	248	100	252	98	230	99	235	104	1	247	101	2	256	96	6
<b>February</b>	246	100	252	99	235	100	238	105	1	250	101	2	254	97	6
<b>March</b>	245	100	246	99	238	100	235	105	1	252	102	2	254	97	6
<b>April</b>	250	100	246	99	239	100	231	104	1	253	101	3	253	97	6
<b>May</b>	257	100	243	99	240	99	229	104	1	253	100	3	252	97	6
<b>June</b>	256	101	240	98	243	99	230	103	1	253	99	3	250	98	6

In FY 20 the number of MOTs under TCA § 33-6-602 remained fairly stable as they decreased from a high of 256 in July to a low of 250 in June. MOTs under TCA § 37-3-303(b) also remained stable as they varied from a high of 101 to a low of 96. Three additional MOTs under TCA 33-7-303(g) were added this year bringing the total to six.

**Table 14: FY 2015, FY 2016, FY 2017, FY 2018, FY 2019, FY 2020 Monthly MOTs by Trend Line**



### **Affidavits of Non-Compliance**

All MOT consumers signed a contract with a supervising agency at the time his or her MOT services were initiated. These MOT contracts are occasionally modified as needed to meet the consumer’s changing treatment needs. When the recipient is not in compliance with their MOT contract the agency attempts to bring them into compliance. If they cannot be brought into satisfactory compliance the agency files an Affidavit of Non-Compliance to alert the court and/or the district attorney of the non-compliance.

A wide range of differing outcomes can result following the filing of an Affidavit of Non-Compliance. A previously non-compliant consumer may become compliant upon learning of the potential court hearing. If they meet commitment criteria they may be admitted on an emergency basis to a private or a state hospital. If they are receiving MOT services under the auspices of T.C.A. § 33-6-602 or under the auspices of T.C.A. § 33-7-303(g) (and they were discharged from a mental health hospital following a judicial commitment), then at the non-compliance court hearing they may be returned to the hospital from which they were released. If they are receiving MOT services under the auspices of T.C.A. 33-7-303(b) or were placed on MOT under the auspices of T.C.A. § 33-7-303(g) while in the community (without having been committed to a hospital) then the court may order civil or criminal contempt charges. They may only be hospitalized through a new involuntary commitment procedure.

During FY 2020, a total of 42 new Affidavits of Non-Compliance were filed, however one individual had affidavits filed twice, so 41 individuals were involved. There was an average of 357 individuals on MOT at any one point during FY 20; 41 individuals with non-compliance affidavits is 12% of the total. The majority of the non-compliant MOT consumers had legal charges that originated in Shelby County, which also had 54% of the total number of MOTs.

**Table 15: FY 20 County of Original Legal Charge, Non-Compliant MOTs**

<b>Originating County</b>	<b>Number</b>
Shelby	22
Davidson	8
Madison	4
Knox	2
Scott	2
Sumner	2
Henry	1
Monroe	1
<b>Total</b>	<b>42</b>

Of the forty-one non-compliant consumers, 31 (74%) had MOT under the auspices of T.C.A. § 33-6-602, nine (21%) under the auspices of T.C.A. § 33-7-303(b), and two (5%) under the auspices of T.C.A. § 33-7-303(g). That distribution closely matches the overall distribution of MOTs under 33-6-602 (71%) and 33-7-303(b) & (g) (29%), suggesting that a consumer is no more likely to be considered non-compliant simply because of the type of MOT.

**Table 16: FY 20 Type of Non-Compliant MOT Consumers**

<b>Type of MOT</b>	<b>Number</b>
T.C.A. § 33-6-602	31
T.C.A. § 33-7-303(b)	9
T.C.A. § 33-7-303(g)	2
<b>Total</b>	<b>42</b>

The majority of non-compliant consumers had been committed to an RMHI as a pre-trial criminal defendant but had their charges dismissed and remained committed as a civil involuntary patient until release on MOT (criminal charges dropped with civil commitment). The second largest category of non-compliant consumers is those who were committed to a RMHI following an adjudication of NGRI on at least one felony charge.

**Table 17: FY 20 Discharge Legal Status Code  
Non-Compliant Consumers**

<b>Discharge Legal Status Code</b>	<b>Number</b>
Criminal Charges Dropped With Civil Commitment	15
303(b) after Inpatient Evaluation (before 7/1/2009)	1
303(b) after Outpatient Evaluation (since 7/1/2009)	8
Involuntary Civil Commitment	5
303(g) after Outpatient Evaluation, from the Community (and not a RMHI discharge)	1
Commitment after NGRI; Includes at Least One Felony Charge	12
<b>Total</b>	<b>42</b>

After an Affidavit of Non-Compliance was filed fifteen of the non-compliant MOT consumers were subsequently hospitalized either by court order (eleven) or by emergency status (four).

Ten consumers are awaiting their MOT non-compliance hearing. This is a higher number than usual, but courts have had abbreviated schedules March-June of 2020 due to COVID-19.

Eight of the non-compliant MOT consumers had their contracts terminated either by court order during their non-compliance hearing (three) or by the MOT agency (five). The reason given by the courts for terminating the MOT was the length of time the consumer had served on MOT compared to the severity of their original legal charge(s). The most common reason given by the MOT agency for terminating the MOT was their belief that the consumer would not remain compliant with their contracts even with a MOT obligation.

Three of the non-compliant consumers were later discovered by their case managers to have died. In all three cases family members, when they were contacted for a current address for the non-compliance hearings, informed the case managers of the deaths.

Two consumers did not appear at their non-compliance hearings, and warrants were issued by the court. For two others, at the non-compliance hearings the courts ordered forensic evaluations under T.C.A. § 33-7-301(a).

Two consumers became compliant during the non-compliance procedures and their court hearings were cancelled.

**Table 18: FY 20 Outcome of Non-Compliance Affidavit**

Hospitalized for non-compliance or as emergency	15
Awaiting non-compliance hearing	10
MOT terminated by court or by agency	8
Deceased	3
Consumer became compliant prior to court hearing	2
Warrant issued when consumer did not appear for hearing	2
Referred for forensic evaluation under T.C.A. § 33-7-301(a)	2
<b>Total</b>	<b>42</b>

**Compliance Ratings**

Agencies were asked to provide compliance ratings for each consumer using a scoring system ranging from “0” to “2”. The number “0” was used for **never** compliant with any items on the MOT Contract, “1” was used for **sometimes** compliant with items on the MOT Contract, and “2” was used for **always** compliant with items on the MOT Contract.

About half (14 of 29) MOT agencies or independent practitioners providing compliance ratings used the numeric scoring system. Some of these fourteen agencies only provided compliance ratings from certain qualified mental health professionals (QMHP), and other QMHPs at the agency did not participate in compliance rating. Some QMHPs used whole numbers, and others used fractions of numbers to express variance in compliance. Renewals/reviews were due every six months, so each consumer who was rated would have been rated twice yearly.

**Table 19: FY 2020 Numeric Compliance Ratings**

<b>FY 2019 Compliance Ratings</b>	<b>July to December 2018</b>	<b>January to June 2019</b>	<b>July to December 2020</b>	<b>January to June 2020</b>
<b>0*</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>0</b>
<b>1</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>
<b>1.1 to 1.69</b>	<b>14</b>	<b>17</b>	<b>16</b>	<b>17</b>
<b>1.70 to 1.99</b>	<b>9</b>	<b>9</b>	<b>4</b>	<b>3</b>
<b>2</b>	<b>90</b>	<b>86</b>	<b>81</b>	<b>69</b>
<b>Total Rated</b>	<b>130</b>	<b>127</b>	<b>115</b>	<b>101</b>
<b>Total Not Rated</b>	<b>225</b>	<b>228</b>	<b>191</b>	<b>196</b>

\*Scores of 0 are followed up by agency attempts to bring the consumers back into compliance, and if these efforts are not successful, then Affidavits of Non-Compliance are filed.

### **Types of Original Legal Charges by Frequency**

Table 20 shows the different types of criminal offenses that MOT consumers were charged with associated with the process that led to them being placed on MOT. As described above, patients committed to an RMHI under Title 33, Chapter 6, Part 5 may not have had any criminal charges associated with the hospitalization prior to their release on MOT under T.C.A. § 33-6-602. Those consumers are categorized in Table 20 as “none.” That includes only patients who never had a criminal charge during this hospitalization. Patients who had their charges retired prior to release on MOT are counted in the category of the charge that was retired. Patients with multiple charges are only counted once under the most serious charge.

**Table 20: FY 2020 Types of Original Legal Charges by Frequency**

<b>Charge(s)</b>	<b>Number of Occurrences</b>
Aggravated Assault (felony)	97
None	64
Simple Assault (misdemeanor)	48
Vandalism/Trespassing/Nuisance	28
Theft	28
Murder	19
Attempted Murder	17
Sex Offense	15
Arson	9
Weapons Offenses	9
Escape/Failure to Comply/Obstruction of Justice	6
Robbery	5
Obstruction of Justice	5
Kidnapping	4
<b>Total</b>	<b>354</b>

**MOT for Intellectually Disabled Persons**

Mandatory Outpatient Treatment may be ordered for persons with an intellectual disability who are incompetent to stand trial on felony criminal charges or have been found not guilty by reason of insanity on a capital offense (e.g. first degree murder) due to intellectual disability. This process begins with a court-ordered evaluation under TCA § 33-7-301 conducted by an evaluator certified by the TDMHSAS Office of Forensic and Juvenile Court Services. Services in these circumstances are provided by the Tennessee Department of Intellectual and Developmental Disabilities (TDIDD) either directly or through contracted providers. The circumstances under which a court may order MOT for an intellectually disabled person with criminal charges are defined by statute in Title 33, Chapter 5, Parts 4 and 5.

There were 34 defendants with a developmental disability ordered to participate in MOT for incompetent defendants in FY 20. Nine have completed their competency training, and four defendants had their charges dropped. TDMHSAS is awaiting notification of completion for the 21 others who were still receiving training at the end of FY 20.

## **MOT for Persons Found NGRI of First Degree Murder or Certain Other Class A Felonies**

Effective 7/1/2017 legislation took effect which requires persons found not guilty by reason of insanity (NGRI) of a charge of first degree murder or a Class A felony under Title 39, Chapter 13, to participate in mandatory outpatient treatment (MOT) when discharged from the hospital or released by the court following the outpatient evaluation under T.C.A. § 33-7-303(a) who are not committable to a hospital. This legislation mandates that any person ordered by the trial court to participate in outpatient treatment must do so for an initial period of six months. The court may continue the MOT beyond the initial six month period. After the initial six month period the court shall review the person's need for continued MOT on an annual basis.

The Legislature appropriated some funds for FY 20 to pay for MOT services for persons on MOT under the new law who do not have insurance or income to meet their treatment or housing needs. During FY 20 three consumers were discharged under the new law, bringing the total number of persons on MOT under the auspices of T.C.A. § 33-7-303(g) to six. At this point other resources have been available to meet the treatment and housing needs of these consumers.