Monthly Statistical Report

_____ COUNTY FAMILY CARE UNIT

		July ___	Aug ___	Sept ___	Oct ___	Nov ___	Dec ___	Jan ___	Feb ___	Mar ___	Apr ___	May ___	June ___
Number of individuals referred to Family Care Unit this month	Under 18												
	Age 18+												
	Total												
Number of assessments completed this month	Under 18												
	Age 18+												
	Total												
Number of referrals to substance abuse services this month	Under 18												
	Age 18+												
	Total												
Number of referrals to mental health services this month	Under 18												
	Age 18+												
	Total												