



Pacific
Clinics

Fresno
Assertive
Community
Treatment
(ACT)
Annual Status
Report

Fiscal Year
2023

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Executive Summary

The Fresno County Assertive Community Treatment (ACT) program serves youth, ages 10-18 years who have a serious mental health condition or serious emotional disturbance (SED) and at least one diagnosis from the current Diagnostic and Statistical Manual of Mental Disorders (DSM).

Additionally, services shall be provided to customers/families as necessary, to optimize the youth's ability to reach wellness and recovery. In addition, identified customers, caregivers, and other significant support person may participate and receive specialty mental health services from this program. Examples include customers with significant functional impairments in school, work, or the community; customers with significant difficulty maintaining personal safety; customers with high use of acute psychiatric hospitals or psychiatric emergency services; customers with high risk or recent history of criminal justice involvement; customers with a coexisting substance use disorder of significant duration; and customers with intractable and severe major symptoms. A significant percentage of ACT customers are referred by Juvenile Probation or Juvenile Behavioral Health Court.

The program philosophy includes developing individualized service plans for each customer and family in order to wrap services around the family, building upon their unique strengths and needs. Access to treatment, rehabilitation, and support services are provided 24 hours a day, seven days per week, and 365 days per year in locations most convenient for the customers and family. Traditional and non-traditional support services are provided, with the ultimate goal of stabilizing customers so that they can be successful at home, in school and in their community.

This annual status report on the Pacific Clinics ACT program in Fresno County provides an overall summary of treatment results, focusing on the time period July 1, 2022 through June 30, 2023. Service delivery outcomes include improvements in customers' functioning status; customer outcomes include placement stability and reductions in juvenile justice involvement and psychiatric hospitalizations; and satisfaction outcomes include access to services, overall satisfaction with services, and family involvement.

During FY23, \$3,025,908.37 (100%) was billed for EPSDT services.

Appendices provided include detailed descriptions of outcome measures (see Appendix A), figures and tables for demographic and intake data (see Appendix B).

SECTION I: SUMMARY OF PROGRAM OUTCOMES

Goals/Objectives	Performance Measure	FY23
Improved Customers Functioning	1.1) 60% of customers will maintain or improve clinical condition and quality of life. (Source: CANS Total)*	66%
	1.2) 60% of customers will improve emotional and behavioral status. (Source: CANS BEN domain)*	41%
	1.3) 60% of customers will improve child risk behaviors. (Source: CANS RB domain)*	58%
	1.4) 70% of youth will maintain a non-impairment status or improve psychosocial impairment functioning. (Source: PSC-35)	67%
Improved Educational Functioning	2.1) 70%/10% of customers will maintain or improve Academic Performance. (Source: CANS LFD School Achievement)**	53%
	2.2) 70%/25% of customers will improve or maintain school attendance. (Source: CANS LFD School Attendance)**	66%
	2.3) 70% of customers will maintain at 0 or decrease their number of expulsions/suspensions during the last 3 months' services. (Source: CEDE Expulsion and Suspension)	85%
Placement Stability	3.1) 70%/10% of customers In-Home at Admit, will maintain or move to a less restrictive setting (not including less restrictive GH setting). (Source: CEDE Current Living Situation)	85%
Juvenile Justice Involvement	4.1) 70%/50% of customers will maintain at zero or reduced their number of probation violations. (Source: CEDE Probation Violations)	91%
	4.2) 70%/50% of customers will maintain at zero or decrease their days in custody. (Source: CEDE Days in Custody)	96%
Improve Functional Stability and Reduce Need for Crisis Care	5.1) 70%/50% of customers who decrease (or maintain at zero) their average number of hospitalizations as compared with their 12-month historical average prior to program entry. (Source: IA/IR)	78%
	5.2) 70%/50% of customers who decrease (or maintain at zero) their average number of psychiatric holds as compared with their 12-month historical average prior to program entry. (Source: IA/IR)	53%
Satisfaction	6.1) 80%/75% of customers and families will be satisfied with Assertive Community Treatment Services. (Source: YSS, YSS-F, AS; % Satisfied= Mean score of 4.0 or higher on Total Satisfaction; per agency KPI.)	YSS-F: n/a YSS: n/a AS: n/a

Notes: (1) In BLUE: per program baseline or KPI standard, in GREEN: per desired target goal, and in RED: per contract. (2) Outcomes/Goals based on FY23 program logic model. (3) *Improvement is defined as customers improving from actionable to non-actionable on at least one item. (4) ** Item level improvement is defined by change in CANS score from Actionable (2, 3) at Admit to Non-Actionable (0, 1) at Discharge.

SECTION II: DEMOGRAPHICS AND INTAKE DATA

Number of Customers Served

During the FY23 period, 183 customers were served, 83 customers were admitted, and 71 customers were discharged.

Age at Program Entry of Admitted Customers

Customers admitted into the program have ranged from customers as young as ten to adults as old as 70. The majority of customers admitted in FY23 (48%) were between the ages of 14-17. The average age of customers was 14.4, with a median age of 13.9.

Sex Assigned at Birth of Admitted Customers

The majority of customers (59%) admitted in FY23 had a gender assigned at birth of female.

Ethnicities of Admitted Customers

The majority of customers (40%) admitted in FY23 were Hispanic/Latinx followed by Caucasian (27%).

Living Situation at Program Entry for Admitted Customers

The majority of customers (83%) were living with their bio/adoptive parents at program admission in FY23.

Clinical Diagnoses for Customers Admitted

The most common mental health or clinical diagnoses of customers admitted in FY23 was Mood Disorders (49%) followed by Trauma-Stressor Related Disorders (37%).

SECTION III: OUTCOMES FOR DISCHARGED CUSTOMERS

This status report includes outcome data on customers with a length of stay (LOS) greater than 60 days, who were discharged during FY23. This criterion for a minimum length of stay is based on the notion that services do not have a measurable effect until at least 60 days have passed since services began. In FY23, 71 total customers were discharged, and 70 (99%) customers met the LOS criterion. In FY23, customers discharged with a mean LOS of 16.1 months (median 13.4 months).

Outcomes data in this section includes outcomes from measures such as the Child and Adolescent Needs and Strengths Questionnaire (CANS), Core Evaluation Data Elements (CEDE), and Customer Services Survey series on customer satisfaction. See Appendix C for additional CANS outcomes.

Improved Customer Functioning

Improvement in customer functioning is noted as effecting an overall improvement of their clinical condition and quality of life, development of pro-social skills, and their emotional and behavioral functioning. These components are assessed utilizing the Child and Adolescent Needs and Strengths (CANS), including the total CANS, Behavioral and Emotional Needs (BEN) and Risk Behavior (RB) domains, and the Life Functioning Domain (LFD) Social Functioning item (Figure 1), For the CANS Total, BEN and RB domains, improvement is defined as reducing from “actionable” (2, 3) at Admit to “not actionable” (0, 1) at Discharge for at least one actionable item at Admit. In July 2018, Pacific Clinics updated their Agency CANS Comprehensive to incorporate the State CANS 50

as well as additional items per our agency standards and Council of Accreditation (COA) requirements.

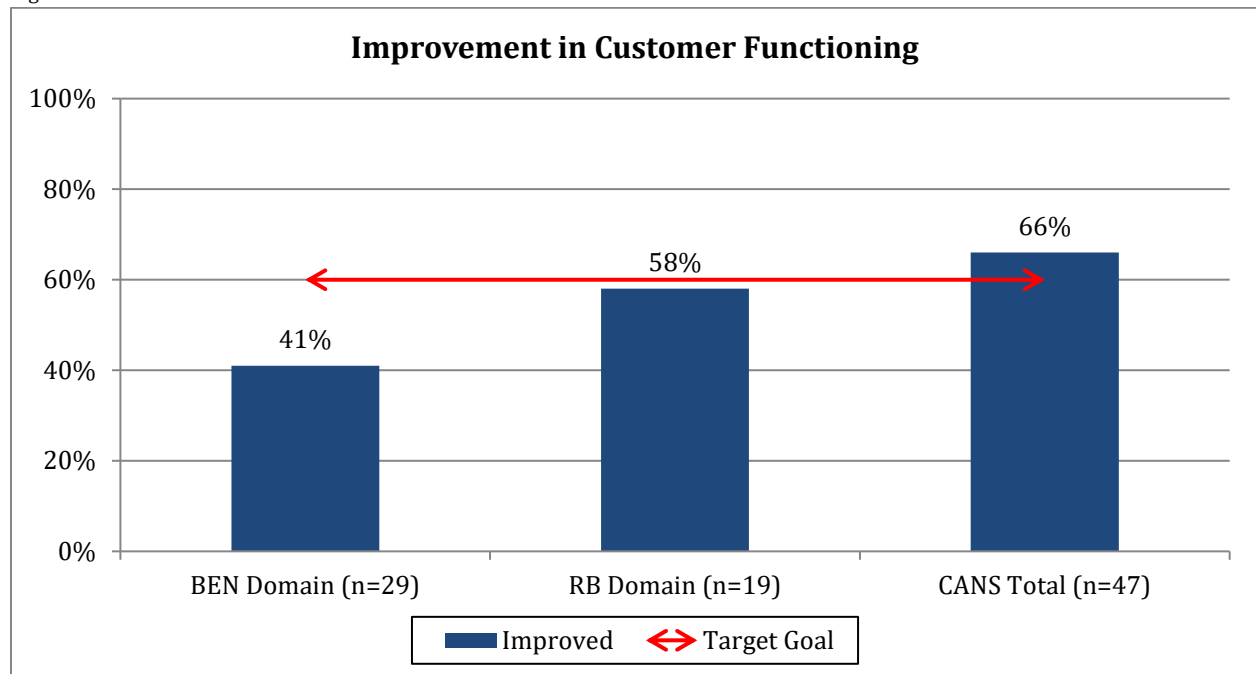
Customer Social and Emotional Well-Being

Fresno ACT works to improve customer social and emotional well-being between admit and discharge. Improvements are assessed utilizing the CANS, specifically the BEN domain and LDF Social Functioning item. Due to the intensity of co-occurring, intractable, and severe major symptoms experienced by customers, it is an agency target that 60% of customers will improve in their emotional and behavioral status.

Child Risk Behaviors

Fresno ACT works to reduce customer risk behaviors. In FY23, 58% of discharged customers that had an actionable rating at admit reduced their risk behaviors to non-actionable at discharge.

Figure 1



Source: Agency Standard CANS (07/10/2023). Notes: (1) FY23 BEN domain (N=71), RB domain (N=33), Total CANS (N=71). (2) * CANS Item: N=Number of customers with an actionable rating at Admit. n=number of customers improved to non-actionable at Discharge. (3) CANS domain and total: N=Number of customers with paired data with an actionable rating at Admit, n= number of customers improving on at least one actionable item at discharge

Educational Functioning

Improvement in customer’s educational functioning encompasses improvement in school areas such as school attendance, suspensions and expulsions, and school achievement.

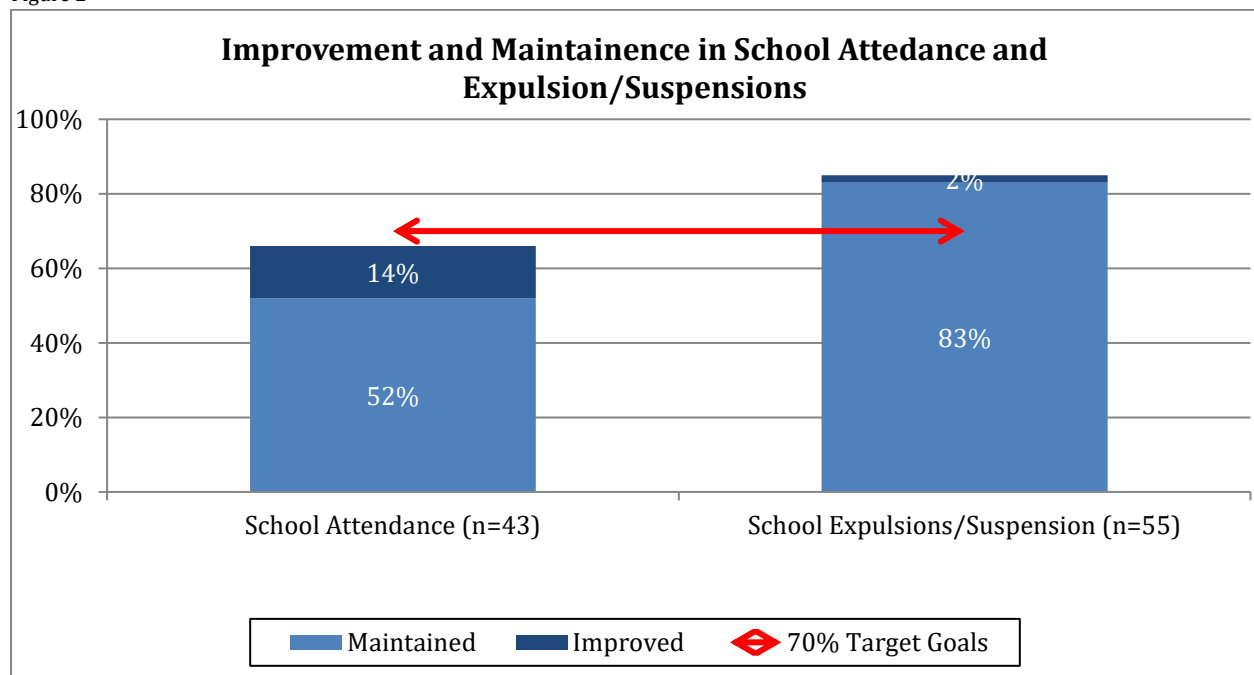
School Attendance

Fresno ACT customers are expected to maintain or improve their attendance at school between admit and discharge. For this component, Fresno ACT uses the CANS item School Attendance. It is an agency target that 80% of customers will attend school. During FY23, 34 of 66 customers (52%) maintained their school attendance, and 9 of 66 customers (14%) improved their school attendance. Overall, 66% of customers maintained or improved their school attendance.

Suspensions and Expulsions

Fresno ACT customers are expected to reduce or maintain zero suspensions and expulsions from school between admit and discharge. For this component, Fresno ACT uses the CEDE item assessing Suspensions and Expulsions. Each customer is assessed at admit for the number of suspensions and expulsions experienced during the three-month period prior to program entry. At discharge, customers are assessed on the number of suspensions and expulsions they had during the final three months of program participation. It is an agency target that 70% of customers will maintain at zero, or reduce to zero, their number of suspensions and expulsions. In FY23, 55 (of 65) customers (85%) reduced or maintained at 0 expulsions and suspensions.

Figure 2

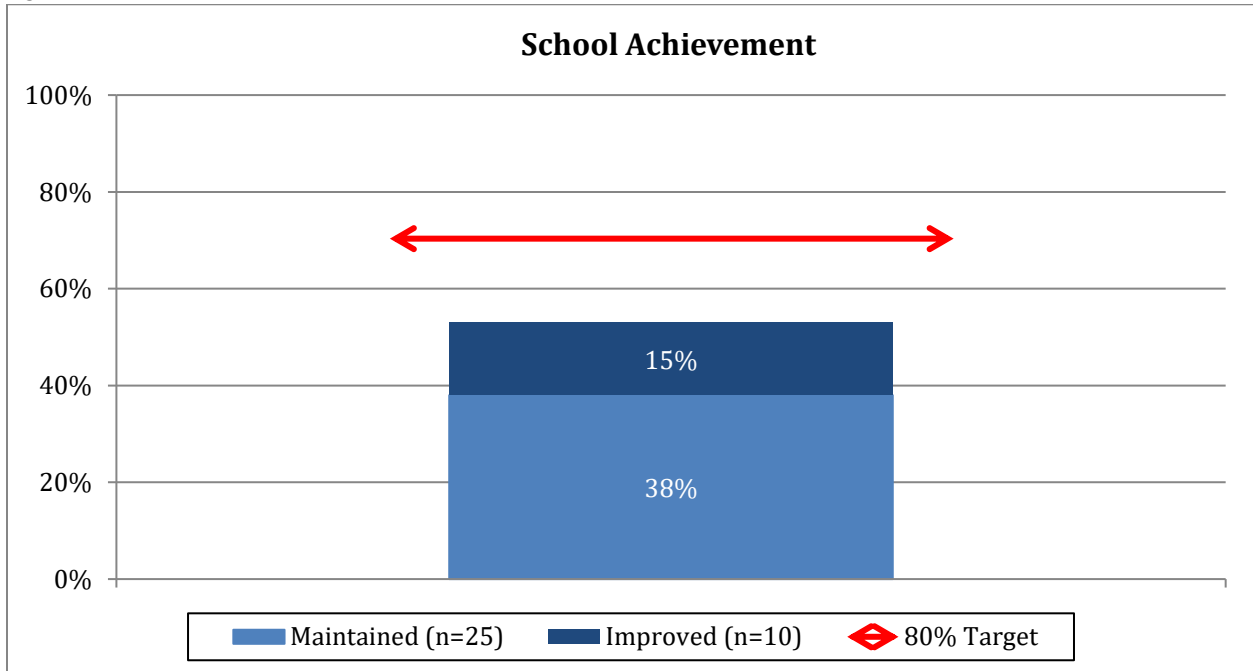


Source: CANS (07/10/2023) & CEDE (07/13/2023). Notes: (1) Paired CANS & CEDE (Admit and Discharge), includes customers with a LOS greater than 60 days. (2) N=total number of customers with paired data: School Attendance=66; School Expulsions/Suspension=65. (3) n= number of Customers improved and Maintained non-actionable.

School Achievement

Fresno ACT customers are expected to improve in their academic performance between admit and discharge. For this component, Fresno ACT uses the CANS item LDF School Achievement. Improvement in School Achievement is defined as reducing from “actionable” (2, 3) to “not actionable” (0, 1), between Admit and Discharge. It is an agency target that 80% of customers will improve or maintain their school achievement. In FY23, 53% of customers improved or maintained their school achievement from admit to discharge.

Figure 3

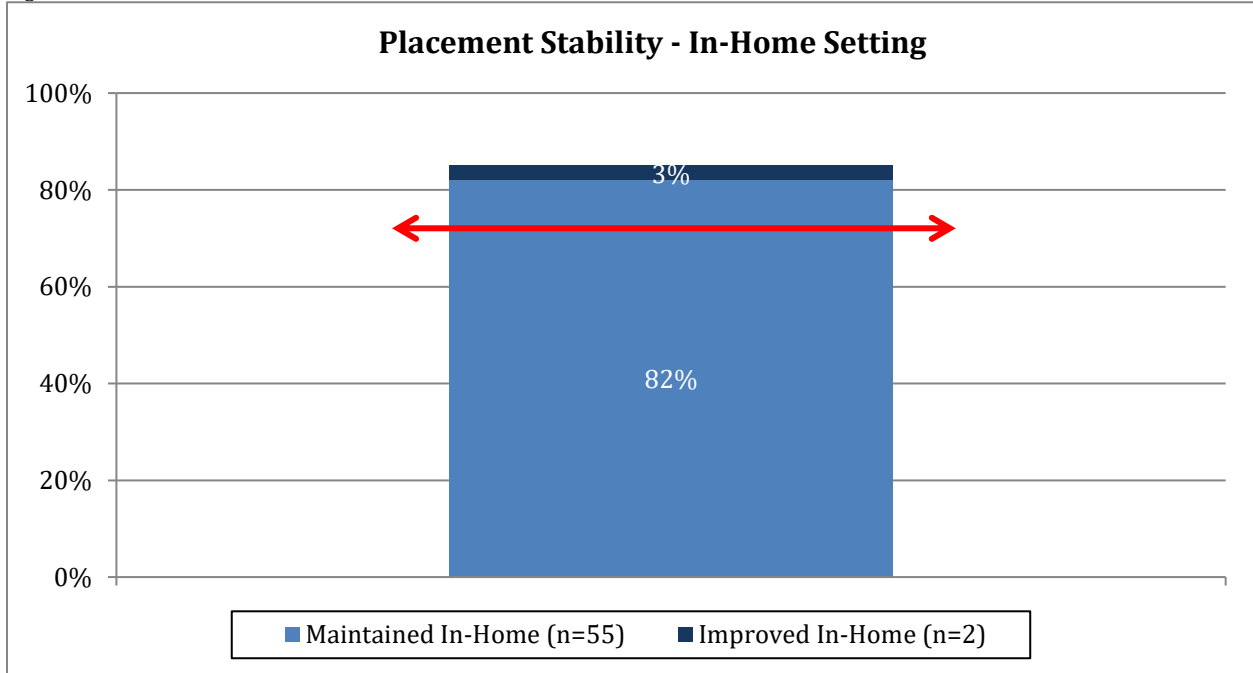


Source: Agency Standard CANS (07/10/2023). Notes: (1) LDF School Achievement (N=66). (2) CANS Item: N=Number of customers with an actionable rating at Admit. n=number of customers improved to non-actionable at Discharge.

Stable Home Setting

Fresno ACT customers are expected to maintain a stable home setting between admit and discharge. For this component, Fresno ACT uses the CEDE item Predominant Living Situation. It is an agency target that 70% of customers will remain in an in-home setting or move to a less restrictive setting (not including less restrictive group home setting). An in-home setting includes customers living with biological/adoptive parents, kinship, independent living, foster care, mentor, family friend, or guardianship. Of the customers discharged in FY23, fifty-seven (85%) customers maintained or improved on the Current Living Situation item from Admit to Discharge.

Figure 4

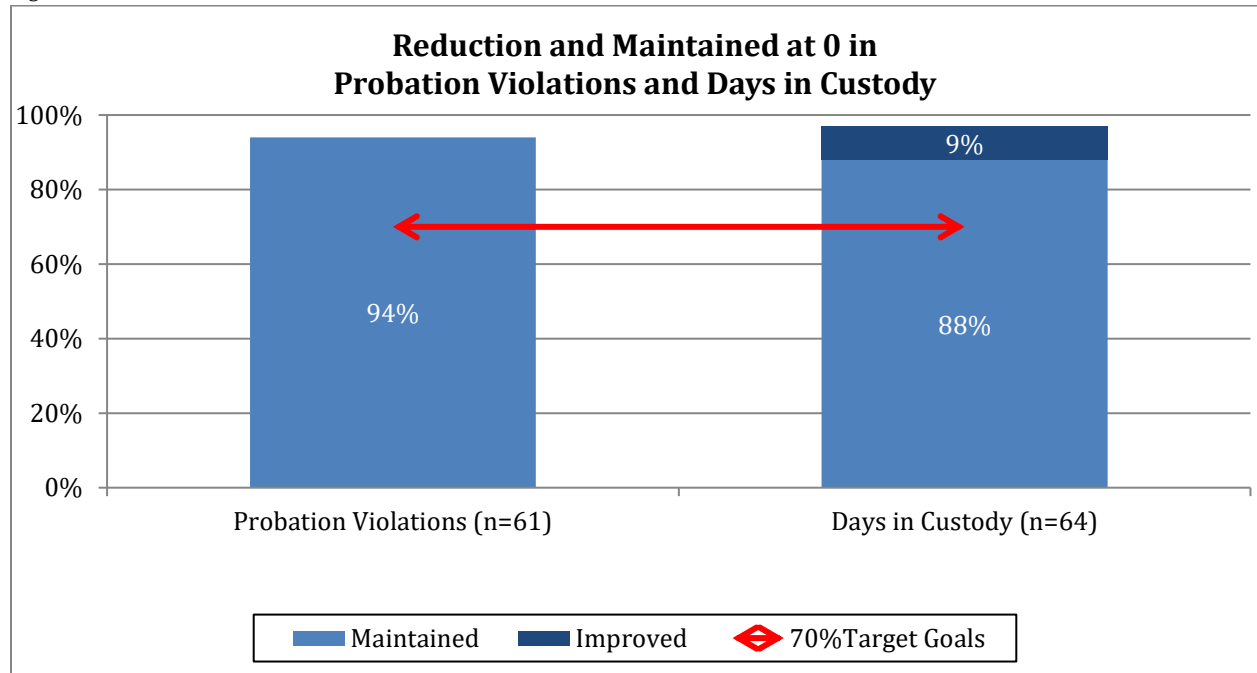


Source: CEDE (07/13/2023). Notes: (1) Paired CEDE (Admit and Discharge), includes customers with a LOS greater than 60 days. (2) N=total number of customers with paired data: N=67. (3) n= number of Customers improved and maintained.

Juvenile Justice Outcomes

Fresno ACT customers are expected to reduce or maintain zero Juvenile Justice System interactions between admit and discharge. For this component, Fresno ACT uses the CEDE items Probation Violations and Days in Custody. Each customer is asked the number of days they spent in custody and any probation violations they experienced during the three-month period prior to program entry, and during the final three months of program participation. It is an agency target that 80% of customers will maintain at zero, or reduce their number of days in custody and probation violations. In FY23, 97% of customers discharged reduced or maintained zero days in custody. In addition, 94% of customers maintained at 0 or reduced their probation violations.

Figure 5



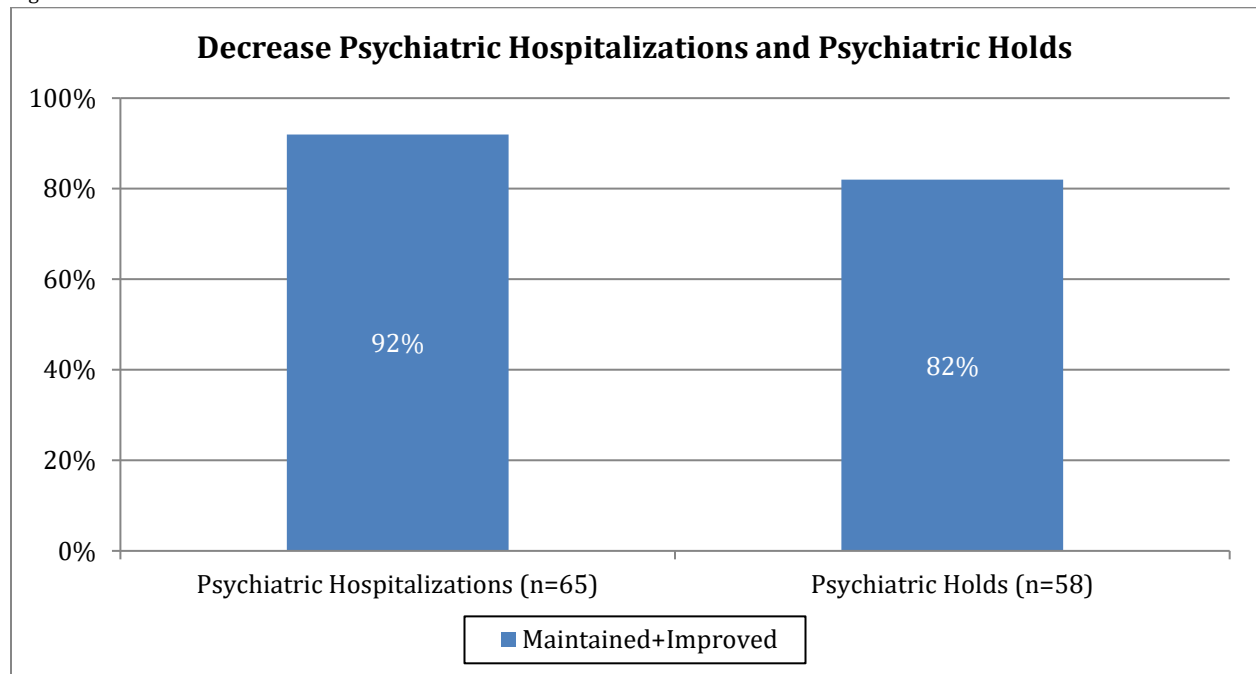
Source: CEDE (07/13/2023). Notes: (1) Paired CEDE (Admit and Discharge), includes customers with a LOS greater than 60 days. (2) n=number of customers improved and maintained. (3) N=total number of customers with paired data: Probation Violations=65, Days in Custody=66.

Improve Functional Stability and Reduce Need for Critical Care

Fresno ACT customers are assessed for the number of psychiatric holds and hospitalizations they have experienced during the six-month period prior to program entry and the six-month period before discharge. It is expected that customers will either maintain their number of psychiatric holds and hospitalizations at zero or decrease their occurrence to zero between admit and discharge.

For this component, Fresno ACT uses the Mental Health Assessment and Incident Reports. It is an agency target that 70% of customers will maintain at zero, or reduce to zero, their need for crisis care. During FY23, 82% of the discharge customers with paired data maintained at zero or decreased from their pre-treatment psychiatric holds to zero. Also, 92% of the discharge customers with paired data maintained at zero or decreased their psychiatric hospitalizations to zero.

Figure 6



Source: Mental Health Assessment/IR (08/08/2023) Notes: (1) n=number of customers with Paired IA/IR data. (2) FY23 Psychiatric Hospitalizations (N=71). (3) FY23 Psychiatric Holds (N=71).

Satisfaction Outcomes

Insufficient data for YSS, YSSF, and adult satisfaction in FY23 (N=3).

SECTION IV: CONCLUSIONS

Based on the outcomes of the customers discharged to date, many customers (85%) served in the Fresno County Assertive Community Treatment (ACT) Program are able to live in a stable home setting at discharge from the program. The majority of customers maintained or improved their school attendance (66%) and achievement (53%), reducing their suspension/expulsions (85%), and staying out of trouble (92%). These triumphs are accentuated by a marked reduction in risk behaviors (58%), as measured by the CANS Risk Behavior domain. These results indicate that the Fresno ACT program has been highly effective in helping customers and families to achieve their goals, while maintaining high levels of satisfaction across customers and families.

While the majority of Fresno ACT outcomes met or exceeded target goals, behavior and emotional needs (41%) remains an area for growth. Pacific Clinics will continue to closely monitor these areas to ensure success across all services provided.

The program has been able to meet the access requirements and provide access to care in a timely manner.

Pacific Clinics will use the data from this report to determine if there are any quality improvement opportunities to the service provision, in an effort to address outcomes that can be improved for this delicate population.

Target Goals

CANS Total and Domain improvements will continue to be assessed by the number of children who improve at least one item identified as actionable at Admit. CANS items that are assessed for improvement only will be of the number of children who had the item identified as actionable at Admit (Item score of 2 or 3). Target goals for FY24 will be reassessed, based on baselines from FY23.

Satisfaction Outcomes

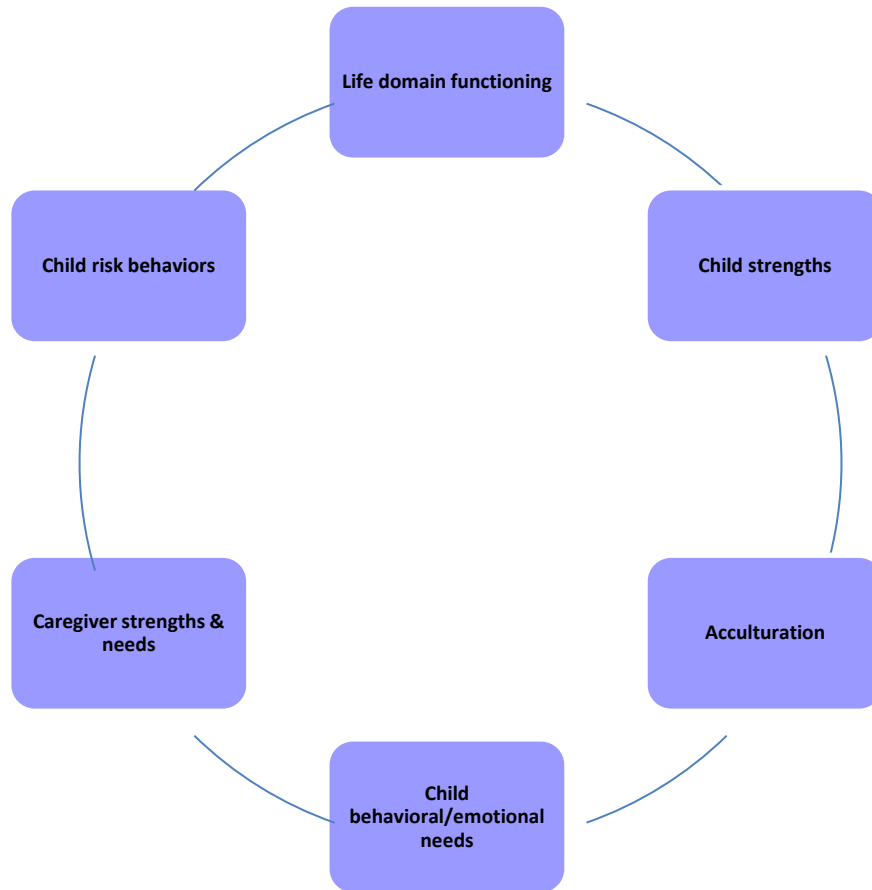
The YSS-Series of Satisfaction surveys (YSS, YSS-F, AS) have been implemented at program discharge. For reporting purposes, satisfaction collected at program discharge will be combined with the Consumer Perception Survey State Satisfaction survey. Pacific Clinics Fresno Assertive Community Treatment program will also assess satisfaction with a target goal of satisfaction scores at 4.0 or higher, representing 80% percent of customers and caregiver responses across all domains and satisfaction total.

APPENDIX A: OUTCOME MEASURES

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Child and Adolescent Needs and Strengths (CANS)

Pacific Clinics implemented the Child and Adolescent Needs and Strengths (CANS) measure in 2011. In July 2018, Pacific Clinics updated their Agency CANS Comprehensive to incorporate the State CANS 50 as well as additional items per our agency standards and COA requirements. The CANS organizes clinical information collected during a behavioral health assessment in a consistent manner to improve communication among those involved in planning care for a child or adolescent. Each CANS item suggests different pathways for service planning. The CANS is administered and completed by the youth and family at program entry and program discharge, in addition to six-month intervals in order to assess changes in needs while youth is enrolled in the program.



APPENDIX A: OUTCOME MEASURES

Each item is scored on a four-level scale. The scale definitions are designed to translate into the following action levels:

For needs:

- 0 No evidence
- 1 Watchful waiting/prevention
- 2 Action
- 3 Immediate/Intensive Action

For strengths:

- 0 Centerpiece strength
- 1 Strength that you can use in planning
- 2 Strength has been identified-must be built
- 3 No strength identified

Items on our Agency Standard CANS Comprehensive are grouped into six core domains:

- **Life Domain Functioning** - Life domains are the different arenas of social interaction found in the lives of youth and their families. This domain rates how they are functioning in the individual, family, peer, school, and community realms.
- **Strengths** - This domain describes the assets of the customer that can be used to advance healthy development.
- **Cultural Factors** - Items in this domain describe difficulties that children and youth may experience or encounter as a result of their membership in any cultural group, and/or because of the relationship between members of that group and members of the dominant society.
- **Caregiver Resources and Needs** - This section focuses on the resources and needs of the caregiver.
- **Behavioral/Emotional Needs** - This section identifies the behavioral health needs of the customer.
- **Risk Behaviors** - This section focuses on behaviors that can get customers in trouble or put them in danger of harming themselves or others.

The CANS is analyzed in the following manner:

- Using paired CANS (Time 1 and Time 2 with 60 days between timeframes) the mean number of actionable items (rating of 2,3), as well as the standard deviations by domain and CANS overall total overall. Pacific Clinics provides statistical significance on these paired data to strengthen our clinical significance in a decrease of actionable items at Time 1 and Time 2. Secondly, improvement is shown for those youth who had actionable items (rating of 2 or 3) identified at Time 1 to non-actionable at Time 2 (rating of 0, 1). CANS improvement is shown by item, by domain, and by total.
- Mean CANS scores by domain and total.
- Improvement on CANS actionable items.

APPENDIX A: OUTCOME MEASURES

Core Evaluation Data Elements (CEDE)

Beginning in January 2011, Pacific Clinics implemented a new internal evaluation tool called the Core Evaluation Data Elements (CEDE). The CEDE is completed at the time of program entry, six month intervals, and at the time of discharge from the program. It provides information on key outcomes for customers, including living situation placement, expulsions and suspensions, and juvenile justice data.

Indicators:

In Home: Customer's predominant living situation placement is in a community setting (home, family friend, foster care, guardianship, independent living, or kinship).

Out of Trouble: Customers has 0 probation violations.

Customers Satisfaction Survey (YSS)

To measure customers and caregiver satisfaction Pacific Clinics utilizes the Customers Services Survey for Families (YSS-F), the Customers Services Survey (YSS) and Adult Survey (AS). Satisfaction surveys are administered at the time of program discharge. In addition to discharge timeframe, satisfaction is collected during the POQI State-Wide administration period. The surveys ask caregivers and customers to rate to what extent they disagree or agree with statements on a 5-point Likert-type scale, ranging from "Strongly Disagree" (1) to "Strongly Agree" (5), with a score of 5 indicating the highest level of satisfaction. Pacific Clinics has defined a positive response as a rating of 4.0. The percent satisfied is defined by the percentage of customers and caregivers with a mean score of 4.0 or higher by domain and satisfaction total.

The initial 15 items in the YSS-F and YSS are grouped into five domains:

- Access to Services
- Family Involvement
- Cultural Sensitivity
- Satisfaction
- Outcome

APPENDIX B: DEMOGRAPHIC AND INTAKE DATA

Table 1: Number of Customers Served

Number of Customers Served	FY23
Active Customers as of 06/30/23	112
Customers Admitted in FY23	83
Customers Discharged in FY23	71
Customers Discharged in FY23 with LOS greater than 60 days*	70
Total Customers Served Unduplicated	182
Total Customers Served	183

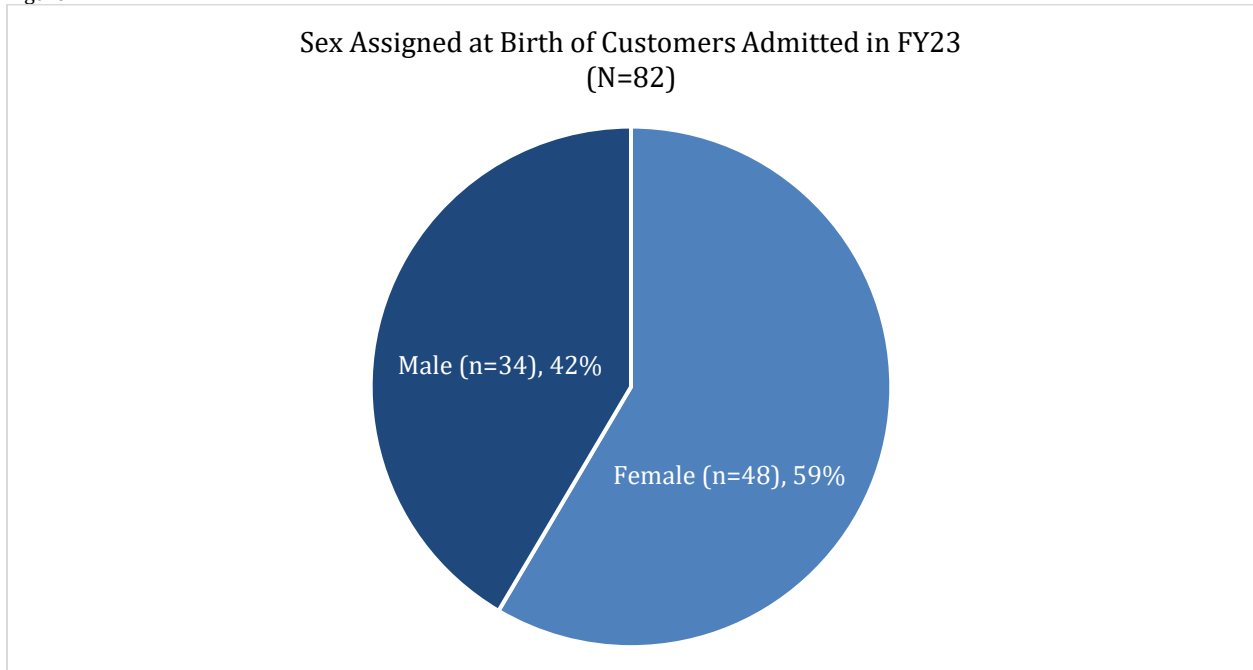
Source: DWH Masterclient Extract 07/12/2023. Note(s): (1) *Outcomes only include customers discharged with a LOS greater than 60 days.

Table 2: Age at Program Entry of Customers Admitted in FY23

	FY23 (N=82)
Age 10	11 (13%)
11 to 13	31 (38%)
14 to 17	39 (48%)
26+	1 (1%)
Range	10.17-63.67
Mean	14.4
Median	13.9

Source: DWH Masterclient Extract 07/12/2023.

Figure 7



Source: DWH Masterclient Extract 07/12/2023. N is unduplicated.

APPENDIX B: DEMOGRAPHIC AND INTAKE DATA

Table 3: Ethnicity of Customers Admitted in FY23

	FY23 (N=79)
African American	6 (8%)
Asian	2 (3%)
Caucasian	22 (28%)
Hispanic/Latinx	32 (41%)
Multi-Ethnic	16 (20%)
Other	1 (1%)

Source: DWH Masterclient Extract 07/12/2023. N is unduplicated. Missing ethnicity: n=3.

Table 4: Living Situation at Program Admit of Customers Admitted in FY23

	FY23 (N=81)
Adoptive Parents	5 (6%)
Biological Family	62 (77%)
Justice Related	1 (1%)
Living With Biological Or Adoptive Family, Relatives, Friends, Or Others In A Home Setting	4 (5%)
Resource Family	8 (10%)
Living Independently	1 (1%)

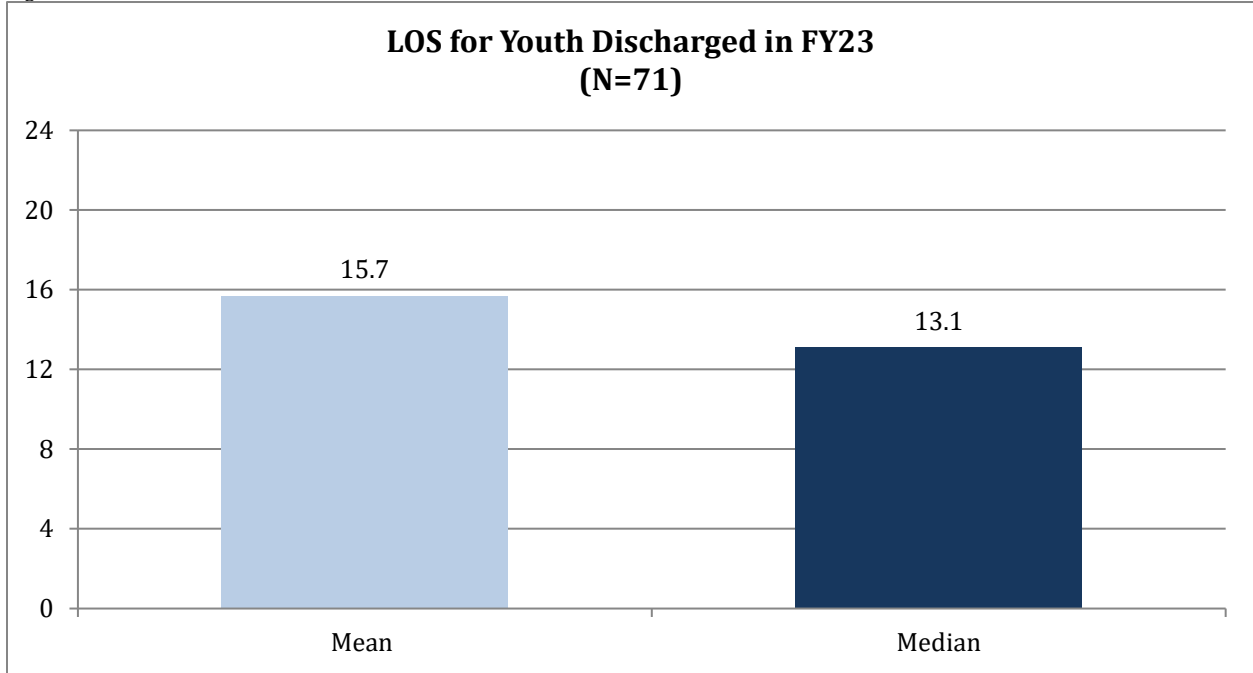
Source: DWH Masterclient Extract 07/12/2023. N is unduplicated. Notes: (1) Missing data on 1 customer.

Table 5: Clinical Diagnosis at Program Admit of Customers Admitted in FY23

	FY23 (N=82)
Anxiety	4 (5%)
Depression	36 (49%)
Disruptive Disorders	10 (12%)
Neurodevelopmental: ASD	1 (1%)
Trauma-Stressor Related Disorders	31 (38%)

Source: DWH Master Extract 07/12/2023. N is unduplicated. Notes: (1) Diagnoses source: DSM-5, ICD-10.

Figure 8



Source: DWH Masterclient Extract 07/12/2023. Note: LOS is shown in months.