PROGRAM INFORMATION:			
Program Title:	Rural Triage Crisis Co-Response – East & West	Provider:	Kings View Behavioral Health Corporation
Program Description:	Rural Mental Health Triage Services: Rural Triage staff serve as an active liaison with law enforcement in the rural communities of Fresno County to provide training, outreach, and direct field response to clients with mental illness in the community. Evaluations for 5150's and recurrent calls from law enforcement are a primary focus.	MHP Work Plan:	1–Behavioral Health Integrated Access Choose an item. Choose an item.
Age Group Served 1:	ADULT	Dates Of Operation:	SunSat. 6am to 12am
Age Group Served 2:	CHILDREN	Reporting Period:	July 1, 2016 - June 30, 2017
Funding Source 1:	Realignment	Funding Source 3:	Prevention (MHSA)
Funding Source 2:	Medical FFP	Other Funding:	Early Intervention (MHSA)
FISCAL INFORMATION:			
Program Budget Amount:	\$2,377,674	Program Actual Amou	unt: \$2,027,267
Number of Unique Clients Served During Time Period: 948			
Number of Services Rendered During Time Period: 2451			
Actual Cost Per Client: East: \$1,465; West: \$4,328 Program Budget Amount: East: \$1,288,124; West: \$1,089,550 Program Acutal Amount: East: \$1,062,021; West: \$965,246 Number of Unique Clients Served During Time Period: East: 725; West: 223 Number of Services Rendered During Time Period: East: 2040; West: 411			
CONTRACT INFORMATION:			
Program Type:	Contract-Operated	Type of Program:	Other, please specify below
Contract Term:	July 1, 2015 to June 30, 2018	For Other: Renewal Date:	Crisis Intervention- Outpatient July 1, 2018
TARGET POPULATION INFO	RMATION:		

Target Population:

Rural triage crisis co-response services may include, but are not limited to: crisis assessment, crisis intervention, preparation of 5150 holds, community referrals and linkages, and short-term/brief case management. In addition, time permitting, services shall also include community outreach, engagement, education, and prevention to those potentially in need of services for mental illness and/or co-occurring substance use disorders, the general public, Revised March 2017

emergency first responders and other community agencies. Rural triage crisis co-response services shall be provided in collaboration with first responders primarily in the field where client interaction with law enforcement and emergency services personnel (first responders) typically occurs and where triage services are most beneficial.

CORE CONCEPTS:

• Community collaboration: individuals, families, agencies, and businesses work together to accomplish a shared vision.

- Cultural competence: adopting behaviors, attitudes and policies that enable providers to work effectively in cross-cultural situations.
- Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services: adult clients and families of children and youth identify needs and preferences that result in the most effective services and supports.

Access to underserved communities: Historically unserved and underserved communities are those groups that either have documented low levels of access and/or use of mental health services, face barriers to participation in the policy making process in public mental health, have low rates of insurance coverage for mental health care, and/or have been identified as priorities for mental health services.
Integrated service experiences: services for clients and families are seamless. Clients and families do not have to negotiate with multiple agencies and funding sources to meet their needs.

Please select core concepts embedded in services/ program:

(May select more than one)

Community collaboration

Integrated service experiences

Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services

Access to underserved communities

Please describe how the selected concept (s) embedded :

Community Collaboration: Once a community member has been assessed and is determined to benefit from linkage to a local resource, we will work with the client/family (for adults with their prior permission) and community agencies. By collaborating with other agencies such as Turning Point, West Care, Valley Health Team, United Health Centers, Exodus, Housing Authority, Room and Boards, Board and Care, Social Security, local law enforcement, etc. we can work together to provide the best support and services needed for our client/families' wellness and recovery.

Integrated Services Experience: We provide wellness and recovery based co-occurring disorder integrated clinical/case management services to the community members and families of rural Fresno County. We are committed to using appropriate evidence-based approaches to meet their needs. We do not exclude anyone based on race, religion, culture, gender, their belief system or ability to pay for services. Every effort is made to engage in the community member/family's wellness and recovery at their pace, assisting them to

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manage the challenges that they identify, and to lead healthy, productive lives in their community.

Individual/Family-Driven, Welness/Recovery/Resiliency-Focused

Services: From the beginning of the client/family experience, we are committed to meeting them where they are. Knowing that resiliency is innate and cross-cultural, we assist the client/family in identifying, nurturing and building on their own resiliency. The focus is on supporting them to manage their behavioral health challenges that affect their daily living in their community. We use evidence-based models and approaches in our resiliency/recovery focused services.

Access to underserved communities: By traveling to and co-locating in the rural cities of Fresno County, we are able to provide immediate coresponse, triage, crisis assessment, descalation skills and techniques, safety planning, linkages, and follow-up in efforts to reduce the number of 5150 holds and arrests.

PROGRAM OUTCOME & GOALS

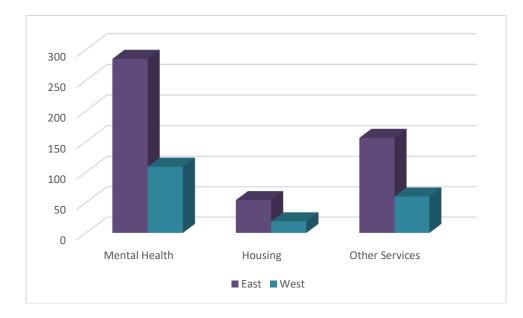
- Must include each of these areas/domains: (1) Effectiveness, (2) Efficiency, (3) Access, (4) Satisfaction & Feedback Of Persons Served & Stakeholder

- Include the following components for documenting each goal: (1) Indicator, (2) Who Applied, (3) Time of Measure, (4) Data Source, (5) Target Goal Expectancy

Overall, the following information illustrates the CARF standards listed above. However, in the years to follow, the annual fiscal outcomes report data will be adjusted to directly represent each specific CARF domain.

- The goal of this project is to provide rural crisis co-response triage staff consultation services to the rural Eastern and Western Fresno County Cities of Kingsburg, Selma, Fowler, Parlier, Sanger, Reedley, Orange Cove, Firebaugh, Mendota, Kerman, San Joaquin, Huron, and Coalinga in a means that has never been provided. These services shall be provided by interagency coordination between behavioral health and law enforcement to identify, triage, assess, and link or reconnect community members/families to behavioral health direct services and support. By doing this, we will mitigate unnecessary expenditures of law enforcement agencies' staff time, resources and funds. (Efficiency)
- Rural crisis co-response triage services staff placement and participation with local law enforcement agencies will increase available finite criminal justice system resources for response to safety and criminal behavior calls/needs by reducing patrol officer's time spent on behavioral health issues. (Efficiency and Effectiveness)

- Rural crisis co-response triage services staff will be on-site for rapid response and behavioral health triage and assessment as subject matter experts, providing timely and appropriate interventions and/or linkages with follow-up. (Effectiveness)
- Community member/families living with psychiatric and/or substance use challenges who engage with local law enforcement will have more efficient access to crisis services, will receive treatment more sensitive to their behavioral health issues, experience fewer legal concerns and costs related to encounters with law enforcement, have improved safety, and experience less discrimination/stigmatization due to their challenges. (Efficiency and Effectiveness)



Referrals to local treatment, prevention, and support services by triage staff.

Community Outreach (Access)

