FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title: Cultural-Based Access Navigation and

Peer/Family Support Services (CBANS)

Provider: Centro La Familia Advocacy Services (CLFA),

Fresno American Indian Health Project (FAIHP), Fresno Interdenominational Refugee Ministries (FIRM), Sarbat Bhala, Inc., and West Fresno

3-Culturally and community defined practices

Family Resource Center (WFFRC)

Program Description: Prevention and early intervention program

ALL AGES

aimed at reducing risk factors and stressors, building protective factors and skills, and increasing social supports across all age groups, through individual and peer support, community awareness,

and education provided in culturally sensitive formats and contexts.

Dates Of Operation: CLFAS, FAIHP, FIRM and WFFRC: October 11,

2011 - present;

Choose an item.

Choose an item.

Sarbat Bhala: April 24, 2013 – present

Age Group Served 2: Choose an item. Reporting Period: July 1, 2017 – June 30, 2018
Funding Source 1: Prevention (MHSA) Funding Source 3: Choose an item.

Funding Source 2: Early Intervention (MHSA) Other Funding: Click here to enter text.

FISCAL INFORMATION:

Age Group Served 1:

Program Budget Amount: \$551,633.00 Program Actual Amount: \$509,425.16

Number of Unique Clients Served During Time Period: approx. 5,886

Number of Services Rendered During Time Period: approx. 8,965

Actual Cost Per Client: approx. \$86.54

CONTRACT INFORMATION:

Program Type: Contract-Operated Type of Program: Other, please specify below

Contract Term: July 1, 2016 – June 30, 2021 For Other: Prevention and Early Intervention (PEI)

Renewal Date: June 30, 2021

MHP Work Plan:

Level of Care Information Age 18 & Over: Choose an item.

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Level of Care Information Age 0-17: Choose an item.

The Level of Care information above does not apply to this contracted program.

TARGET POPULATION INFORMATION:

Target Population: Unserved or underserved cultural populations. Each provider specializes in specific cultures, however, is available to

serve members from any culture including Lesbian/Gay/Bisexual/Transgender/Questioning (LGBTQ), and Homeless,

Veterans and destitute communities.

CLFAS: Latino FAIHP: American Indian

FIRM: Southeast Asian SBI: Punjabi

WFFRC: African American; Latino

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)

Please describe how the selected concept (s) embedded :

Cultural Competency

Culturally appropriate services are provided by culturally competent providers out in the community where clients frequent.

Community collaboration

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

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Access to underserved communities

Integrated service experiences

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

Access

Goals: Increasing awareness of mental health; by increasing access and linkages to community resources for mental health treatment and services.

Outcomes: Providers conduct outreach events, educational trainings, support groups, workshops, and media advertising to increase mental health prevention and early intervention awareness to the community. The efforts reported are as follows;

Provider, CLFA and FAIHP reported outreach efforts in 15 Fresno County events which included rural and metro cities. Twenty (20) educational trainings and workshops were also provided. Mental health stigma reduction campaigns or messaging were conducted on media sources such as television and radio. The outreach efforts were able to provide the CBANS program with referrals from multiple outside agencies/programs (i.e. Victim Services Department, Health and Wellness). Fifty (50) referrals were made from CLFA's own internal programs and 126 referrals were from outside telephone communications. Community Health Workers and Peer Support Specialist are pivotal in completeing warm hand offs in linking participants to resources such as counseling services and rehabilitation services.

Provider, WFFRC reported conducting 124 workshops/support groups (81 workshops for adults and 43 workshops/support groups for youths) and over 33 outreach events in the community during the fiscal year.

Provider, FIRM reported that outreach efforts and workshops services were surveyed and results report 97% of persons served felt that they are more knowledgeable about mental health symptoms and more willing to take preventative measures to address their own, their family, or their friend's mental health symptoms.

Effectiveness

Goal: Reducing needs and stress factors of the individuals served.

Outcomes: Providers conducted Wellness and Needs Surveys at initial intake, crisis walk-in, follow-up interview, and at exit to identify needs and stressor of the individuals served. Thoroughout the engagements, Community Health workers and Peer Support staff worked to reduce the individuals needs and stressors to increase mental health wellness.

Provider, CLFA report 68% of participants report during a Needs/Stressor survey, having a decreased in the number of stressors or having resolved initial stressors. To continue to decrease client needs and increase wellness stabilization, CLFA linked 72% of individuals served to mental health resources (i.e. Alpha Behavioral Health Counseling, Central Valley Regional Center, Clinica Sierra Vista, Urgent Care Wellness) and 29% of individuals served were linked to other community resources (i.e. Victim Services Department, Immigration, etc).

Provider, FAIHP report 71% of participants reported in a Wellness Survey as having decreased their stress or having minimal stress between a rating scale of one to six (one meaning not at all stress and six meaning extremely stressed). The 71% rated their stress level between one and three.

Satisfaction & Feedback

Goals: Increasing community participation and satisfaction with CBAN services.

Outcomes: Providers continually poll individuals served with satisfaction surveys after activities, support groups, or workshops to better serve the community.

Provider, FAIHP report that 98.6% of respondants report having received satisfactory to excellent service based on annual client satisfaction survey.

Provider, FIRM report via their satisfaction survey report 86% of persons served rated the services they received as satisfactory. Any displeasures were later addressed and followed up with services.

Efficiency

Goals: Increase mental health wellness by reducing mental health symptoms of stress, depression, and anxiety. Outcomes: Providers conducted various needs assessments and surveys to poll participants satisfaction levels.

Provider, FIRM reports 93% of persons served reduced their mental health symptoms due to CBANS linkages and referrals to community resources and services. Also, in follow up Wellness Surveys, 95% of surveys rated that they were satisfied with their current overall wellness, rating a maximum rating of six.

Provider, WFFRC reported 60.38% reported higher mental health wellness in a Wellness Survey (with a rating scale of 0 to 37, with higher scores as having the best wellness). These individuals had a scale rating in the 21 to 37 range.

Cost per Client:

These costs do not include the many thousands reached and/or impacted through community, media and training events.

Provider	Unique Clients Served	Services Provided	Program Actual Amount	Actual Cost Per Client
CLFA	1,322	1,322	\$86,744.69	\$65.62
FAIHP	525	3,604	\$73,884.27	\$140.73
FIRM	3,337	3,337	\$205,082.18	\$61.46
Sarbat	150	2,767	\$59,253.63	\$395.02
WFFRC	552	552	\$84,460.09	\$153.01
TOTALS	5,886	8,965	\$509,425.16	avg \$163.14

The Department will continue working with the providers to develop outcomes as well as target goal expectancies in the next reporting cycle.

DEPARTMENT RECOMMENDATION(S):

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