

## PROGRAM INFORMATION:

<b>Program Title:</b>	Cultural Specific Services - Living Well Program	<b>Provider:</b>	The Fresno Center, formerly known as The Fresno Center for New Americans
<b>Program Description:</b>	<p>The Living Well Program (LWP) provides two distinct services under this Agreement. Services are provided in traditional Southeast Asian (SEA) languages and therapeutic methods are adapted appropriately to respond to the diverse mental health needs of SEA individuals.</p> <p><u>Outpatient Mental Health Services:</u> The goals of the Outpatient component are primarily to provide culturally and linguistically competent outpatient mental health services to 120 adult (minimum) SEA community members in Fresno County and to link individuals to community resources such as Medi-Cal, Supplemental Security Income, General Relief, housing and food.</p> <p><u>Clinical Training Services:</u> The Clinical Training component serves as a training/practicum site for SEA graduate and post-graduate SEA students (post-Master or post-Doctorate Degrees) to work toward completing requirements necessary to take the licensure exams to become licensed mental health clinicians. This serves to achieve diversification in the mental health workforce, and to provide cross-cultural training for health care professionals.</p>	<b>MHP Work Plan:</b>	3-Culturally and community defined practices Choose an item. Choose an item.

## FRESNO COUNTY MENTAL HEALTH PLAN

## OUTCOMES REPORT- Attachment A

Age Group Served 1:	ADULT	Dates Of Operation:	07/01/2009 - present
Age Group Served 2:	OLDER ADULT	Reporting Period:	July 1, 2017 - June 30, 2018
Funding Source 1:	Com Services & Supports (MHSA)	Funding Source 3:	Other, please specify below
Funding Source 2:	Medical FFP	Other Funding:	California Reducing Disparity Project (Office of Health Equity)

### FISCAL INFORMATION:

Program Budget Amount:	\$695,121	Program Actual Amount:	\$694,423.57
Number of Unique Clients Served During Time Period:	139		
Number of Services Rendered During Time Period:	4,039		
Actual Cost Per Client:	\$4,955.85		

### CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Outpatient
Contract Term:	July 1, 2013 – June 30, 2018	For Other:	Clinical Training Services
		Renewal Date:	July 1, 2018
Level of Care Information Age 18 & Over:	Traditional Outpatient Treatment (caseload 1:80)		
Level of Care Information Age 0- 17:	Choose an item.		

### TARGET POPULATION INFORMATION:

Target Population: Southeast Asian Adults and Older Adults

### 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)*

## Cultural Competency

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

**Please describe how the selected concept (s) embedded :**

LWP's program structure, staffing, service delivery values and work reflect the cultural values and orientation of targeted Southeast Asian population.

The staff and student interns are all unique because of their language capability, background experiences, knowledge, training, and skills in working with the SEA community. We have staff providing psychotherapy and psychoeducation in Hmong, Lao, and Cambodian languages.

Furthermore, to help individuals to adapt and cope with their mental health problems, LWP utilizes a SEA Cross Cultural Counseling Model to provide mental health services.

The LWP, its bilingual and bicultural staff, training program, and cultural and linguistic mental health services were a result of inputs and feedback from individuals and family members from the SEA community through stakeholder meetings. The program addresses the needs and gaps in service to this community.

Our services are not only culturally and linguistic tailored to individuals/families, they also embody the value of recovery and resiliency. This SEA Cross Cultural Counseling Model utilizes 4 approaches to have a balanced and satisfactory life: Cognitive Behavioral Therapy (CBT) Approach, Skill Building, Positive Psychology, and Cultural Strength.

- ✓ *CBT Component.* Helping individuals to identify and replace unhealthy thinking/beliefs, and for them to avoid engaging in miserable and negative thoughts and behaviors.
- ✓ *Positive Psychology Component.* Helping individuals to focus on positive emotions, thoughts, and wellness. For example:

being grateful, having hope, having happiness, having inspiration, practicing wellness, empowering self and having inner peace.

- ✓ *Skills Building Component.* Skills like assertiveness, effective communication, working effectively with others, problem solving, and relaxation techniques will be taught to individuals.
- ✓ *Cultural Strengths Component.* Help individuals with their own cultural values, practices, and beliefs to help them with their daily life changes and challenges. We focus on showing respect (Filial Piety!), practicing fairness (Relationship!), having compassion (i.e. exchanging knowledge/labor, having empathy & kindness, doing good deeds, and maintaining continuity with relatives and neighbors) (Happiness!), cultural identity, and celebrating their Culture (A Sense of Belonging).

Furthermore, when a person is assessed into the program and an individualized Plan of Care (POC) is created in conjunction with the person, they are given a sense of ownership and responsibility.

## Access to underserved communities

LWP services offer access to cultural and linguistic mental health services to the SEA community in Fresno County. Given their multiple barriers and challenges, high illiteracy rates, and different cultural beliefs and values system, accessibility and utilization of mental health services has been very low. Our program offers the following mental health services.

- ✓ Case management
- ✓ Collateral Services
- ✓ Referral/Linkages
- ✓ Outpatient Mental Health Services (individual and group psychotherapy; individual and group rehabilitation; assessments).

## Integrated service experiences

We understand the experiences and challenges individuals have encountered in utilizing mainstream services. It is our goal that our services for the SEA adults and their families are seamless. Our integrated services include a team of bilingual and bicultural peer

specialists, case managers, rehabilitation counselors, clinicians, and other professionals and traditional healers, as needed.

Our peer specialists work closely to help individuals in our program to minimize their barriers and challenges, while our case managers work to help educate and navigate with them through various systems to make sure they receive the necessary resources and services they need. Our counselors then work with the individuals on educating them about their mental health problems and teaching them various coping skills and practicing various strategies to overcome their mental health problems. Finally, our clinicians work with each individual to develop a plan of care (POC) that is specific to their mental health needs.

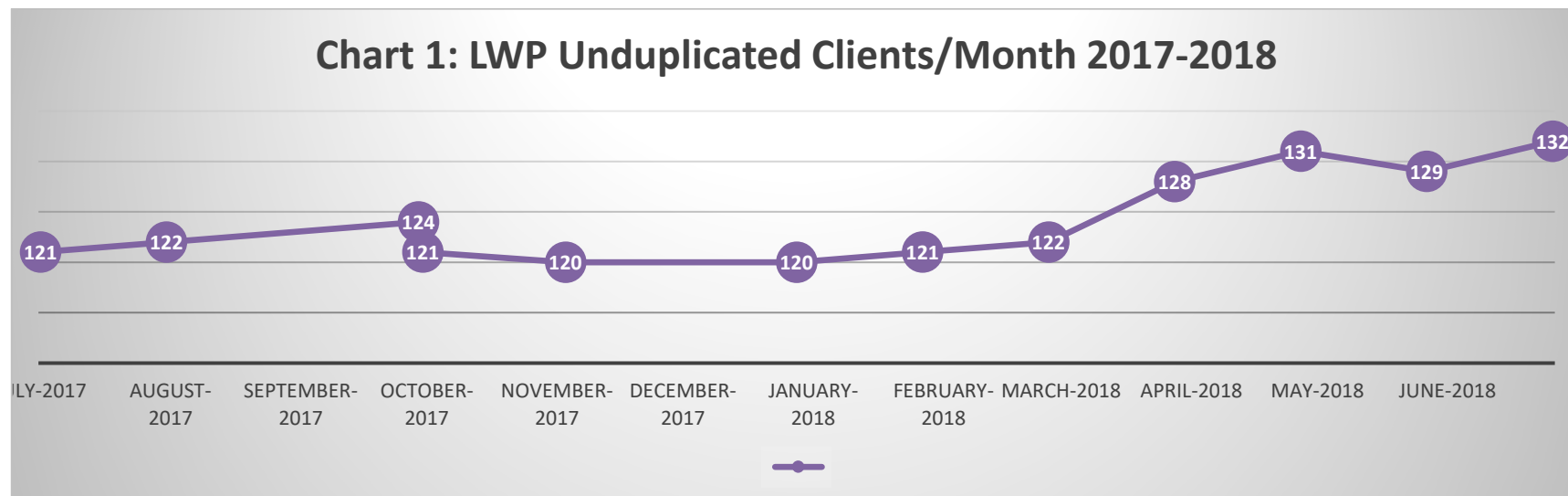
Every SEA person, that is referred or walks in seeking our services, has the opportunity to experience our integrated services through front line staff, case managers, and various mental health professions.

## 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

- A. Increase access to outpatient specialty mental health services from 95 SEA individuals to 120 individuals monthly during the term of this Agreement and in the preferred language of the individual. This shall be measured by the number of individuals per month that are treated by The Fresno Center and by tracking the preferred languages of the mental health services that are provided to each SEA client.**



(Source: LWP Monthly STAT Report, 2017-2018)

In Year 1 (2013-14) to Year 3 (2015-16), LWP was contracted to serve 95 SEA individuals. In Year 4 (2016-2017) and Year 5 (2017-2018), the LWP contract was amended and the number of individuals to be served was increased to 120. Chart 1 above shows unduplicated # of individuals served per month for 2017-2018 (Yr 5). LWP has been able to maintain this goal with an average of 124 active unduplicated individuals. Our lowest number of individuals in any given month is 120 and highest is 132.

The following were the preferred languages for our mental health services: Hmong, Lao, and Cambodia.

**B. Increase number of mental health professionals of SEA descent qualified for licensure through hours earned within The Fresno Center's clinical training/supervision program. During each of the five (5) annual terms of this Agreement, a minimum of four (4) student interns shall enter and complete, or show satisfactory progress towards completion of, required clinical hours or completion of the intern program. This shall be measured by the number of hours accumulated by students and by the number of students that obtain valid California licensure in their respective field that have completed the required hours within the clinical training/supervision program.**

**1. A minimum of four (4) student interns shall enter and complete**

1. Bao Yang BSW trainee—500 hours of 450 total hours
2. Natalie Moua MSW – year 1 trainee—430 hours of 400 total hours

3. Xang Yang MFT trainee – 600 hours of 600 total hours
4. Wesley Yang MFT trainee – 600 hours of 600 total hours

**2. OR show satisfactory progress towards completion of required clinical hours or completion of the intern program**

1. *Lang Fang, MSW ASW*
  - a. Completed her hours (3,000 hours of 3,000 total hours)
  - b. Passed ethical portion of the licensure testing on 12/2016
  - c. Pending licensure testing
2. *Maynong Lee, MS PCCI*
  - a. Completed 2,800 hours of 3,000 total hours
  - b. Pending ethical portion of the licensure
  - c. Pending licensure testing
3. *Mary Vang, MS MFTI*
  - a. Total Hours to Date\*: Aprx. 960 of 3000 total hours
  - b. Year 2017-2018\*: Aprx. 480
  - c. Passed ethical portion of the licensure on 12/2017
4. *Choeun Giusti, MSW ASW*
  - a. Completed her hours for licensure (3,000 hours of 3,000 total hours)
  - b. Passed the ethical portion of the licensure on 11/2017
  - c. Pending licensure testing
5. *Arick Xiong, MS MFTI*
  - a. Total Hours to Date: Aprx. 480 of 3000 total hours

**C. Evidence of improved access of services for all individuals engaged in program.**

Count of Unique Clients:	<b>139</b>
Sum of Units:	<b>188,979</b>
Count of Services:	<b>4,027</b>
Sum of Cost of Service:	<b>\$491,443.40</b>
Count of Unique Provider:	<b>9</b>

From July 1, 2017 to June 30, 2018, our Unit of Services goal was 187, 298 and with an estimated Medi-Cal Billing total of \$481,831 for 120 unduplicated individuals.

This fiscal year period, we had 188,979 Unit of Services and generated an estimated Medical Billing of \$491,443.40 for  
Performance Outcomes FY 17-18

139 unduplicated individuals.

D. Timeliness of access to mental health services (assessments) and psychiatric services

Who Applied: New clients requesting services

Time of Measure: FY 17-18

Data Source: Referral and Assessment Log

Target Goal Expectancy: 10 days from referral to first assessment and 15 days from referral to psychiatric services

Outcome:

Psychiatric services: Not applicable

Assessment: Total new individuals seen in FY 17-18: 37

- 22 individuals were seen in less than 5 days
- 10 individuals were seen in less 5-10 days
- 7 individuals exceeded the 10 days due to cancellation and re-establishing of the assessments with the individuals.

## EFFECTIVENESS

**D. Within 30 days of an individual's enrollment in program, provide evidence of a plan of care developed in the individual's preferred language, approved, authorized and signed by the individual.**

We reviewed our internal individual log from when individuals were enrolled into the program or from when they were re-assessed and compared those to when individuals signed their plan of care (POC), 100% of POCs were authorized and signed by the individuals and our bilingual and bicultural clinicians within 30 days.

**E. Within 90 days of being enrolled in the program, 100% of individuals who did not have SSI will have completed applications to receive SSI. LWP will provide this data to DBH on a monthly basis by the 10<sup>th</sup> of each month regarding SSI status.**

At the end of June 30, 2018, of the 139 unduplicated persons served, in reviewing our Medi-Cal eligibility monthly list, 48% (n=64) of them are SSI recipients, 18% (n=21) of them have their application initiated or are in the process, and 37% (n=49) have their application declined or denied.

For our SSI application processing, we informed individuals of the pros and cons of applying within the 3-month period. We educated them on the need to establish a pattern of psychological illnesses and treatments for a period of 6 months or longer before applying. We referred them to consult with an attorney regarding the strength of their case as needed. If they wanted to continue with the application processing within or before the 3-month period, we were also willing to help



with the application.

Overall, some individuals had already filed prior to entering our program, or they were willing to wait beyond the 6 months before applying. This outcome goal was not met due to this waiting period. We will continue to discuss how we can modify this outcome goal so it is more realistic.

**F. Within 6 months of being enrolled in the program, 100% of individuals will have documented linkages to a Primary Care Physician.**

According to our internal client log, 100% of individuals have a documented primary care physician. All individuals when coming into our program already had a primary care doctor. If not, after 6 months all were linked to one.

**G. Those individuals engaged in services shall have zero (0) days of homelessness after being enrolled in the program, unless the individual declined housing assistance. The Fresno Center will notify DBH or designee of individual's decline and document accordingly. The Fresno Center must have clear documentation of efforts to house individuals in appropriate setting.**

According to our internal client log, none of the individuals in our program reported they were homeless while they were still in or after enrolling into the LWP program.

**H. 90% of those engaged in services will not access higher level of care.**

Our internal client log indicated that no individuals engaged in higher level of care (such as Emergency Room, Crisis Intervention, 5150, or hospitalization for their mental health).

### **EFFICIENCY**

Our contracted outcomes and goals did not specifically address this domain. We will work closely with the County to identify goals and outcomes that are specific to this domain. We can look at indicators like service delivery cost per service unit, length of stay in the program, and direct service hours of clinical and medical staff.

### **SATISFACTION & FEEDBACK OF PERSONS SERVED & STAKEHOLDERS**

Individuals from our LWP participate annually in the Consumer Perception Survey conducted by the County. This fiscal year was completed in May 2018. In addition, we have individuals participate in the County's stakeholder meetings.

We will include an individual feedback survey to be administered along with the Consumer Perception Survey with every active individual receiving our services.

**DEPARTMENT RECOMMENDATION(S):**

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