

PROGRAM INFORMATION:

Program Title:	Uplift Family Services ACT (Assertive Community Treatment) Program	Provider:	Uplift Family Services (Formerly EMQ FamiliesFirst)
Program Description:	The Fresno County Assertive Community Treatment (ACT) program serves youth ages 10 to 18 at intake, who have a serious mental health condition or serious emotional disturbance with at least one diagnosis from the DSM V. Examples include: youth with significant functional impairments in school, work, or the community; youth with significant difficulty maintaining personal safety; youth with high use of acute psychiatric hospitals or psychiatric emergency services; youth with high risk or recent history of criminal justice involvement; youth with a coexisting substance abuse disorder of significant duration; and youth with intractable and severe major symptoms. A significant percentage of ACT youth are referred by Juvenile Probation or Juvenile Court. The program philosophy includes developing individualized service plans for each youth and family in order to wrap services around the family which build 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 comfortable for the youth and family. Traditional and non-traditional support services are also provided.	MHP Work Plan:	2-Wellness, recovery, and resiliency support

Age Group Served 1:	CHILDREN	Dates Of Operation:	August 2009 - Present
Age Group Served 2:	TAY	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:	Private Insurance

FISCAL INFORMATION:

Program Budget	\$2,429,802	Program Actual	\$ 2,118,640
Amount:		Amount:	
Number of Unique Clients Served During Time Period:	148		
Number of Services Rendered During Time Period:	6,499		
Actual Cost Per Client:	\$14,315.14		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	FSP
Contract Term:	July 1, 2013 – June 30, 2018	For Other:	Click here to enter text.
		Renewal Date:	Click here to enter text.
Level of Care Information Age 18 & Over:	High Intensity Treatment/FSP (caseload 1:12)		
Level of Care Information Age 0- 17:	Outpatient Treatment		

TARGET POPULATION INFORMATION:

Target Population: Children ages 10 to 18 (at admission) who have a serious mental health condition or serious emotional disturbance with at least one diagnosis from the DSM. Specifically, Children with significant functional impairments in school, work, home, or the community; significant difficulty maintaining personal safety; high use of acute psychiatric hospitals or psychiatric emergency services; high risk or recent history of criminal justice involvement; coexisting substance use disorders of significant duration, among other co-occurring issues, and intractable severe major symptoms.

MHSA CORE CONCEPTS:**Please select MHSA core concepts embedded in services/ program:***(May select more than one)*

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

Cultural Competency

Integrated service experiences

Please describe how the selected concept (s) embedded :

A uniform, comprehensive assessment and a multi-disciplinary Individualized Services and Supports Plan (ISSP), which may include a mental health Plan of Care where appropriate, utilized by all partnering service providers ensures coordinated, integrated service delivery that meets the family's needs without duplication or conflict. Changes to the Plan of Care are driven by the family's evolving needs, desires, and achievements, and developed in the context of a multi-system team approach. An integrated financial screening process initiated during the Assessment Center intake ensures that no or limited means of payment does not exclude children and families from services.

Cultural inclusiveness and family engagement is supported by appropriately trained program staff, including qualified family members, and partnerships with community-based organizations with experience and expertise in cultural, ethnic, and linguistically sensitive services. Focus populations include Latino, Southeast Asian, African American, and Native American cultures, as well as families in specific geographic areas and/or with limited or no means of payment for services. Service goals are to reduce the adverse impact of untreated mental illness and assist families in developing and maintaining stability, safety, and recovery.

Innovative, integrated, high-quality plans are developed one child, and one family at a time, ensuring that the process is individualized and unique to the family's beliefs, language, and values. All services are respectful of the family's chosen goals and sensitive to the family's environment, cultural background, and preferences.

Underserved Communities

The co-location of specific agency staff, collaborative decision-making, and a full range of service and treatment options provide support for families historically unaware, unwilling, or unable to access mental health services in traditional settings.

Community Collaboration

Holistic service planning addresses the full scope and complexity of the family's needs to maintain health and stability. Facilitators, clinicians and other clinical staff, Social Workers, and Care Managers work with families to ensure that they have complete ownership of the service plan and are invested in its success. Services are provided to the individual and family with community support and access to local resources in mind.

PROGRAM OUTCOME GOALS:

Improved Youth Functioning, Improved Educational Functioning, Placement Stability, Decrease Juvenile Justice Involvement, Improve Functional Stability and Reduce Need for Crisis Care, Increase Satisfaction, Improved Family Search and Engagement Outcomes

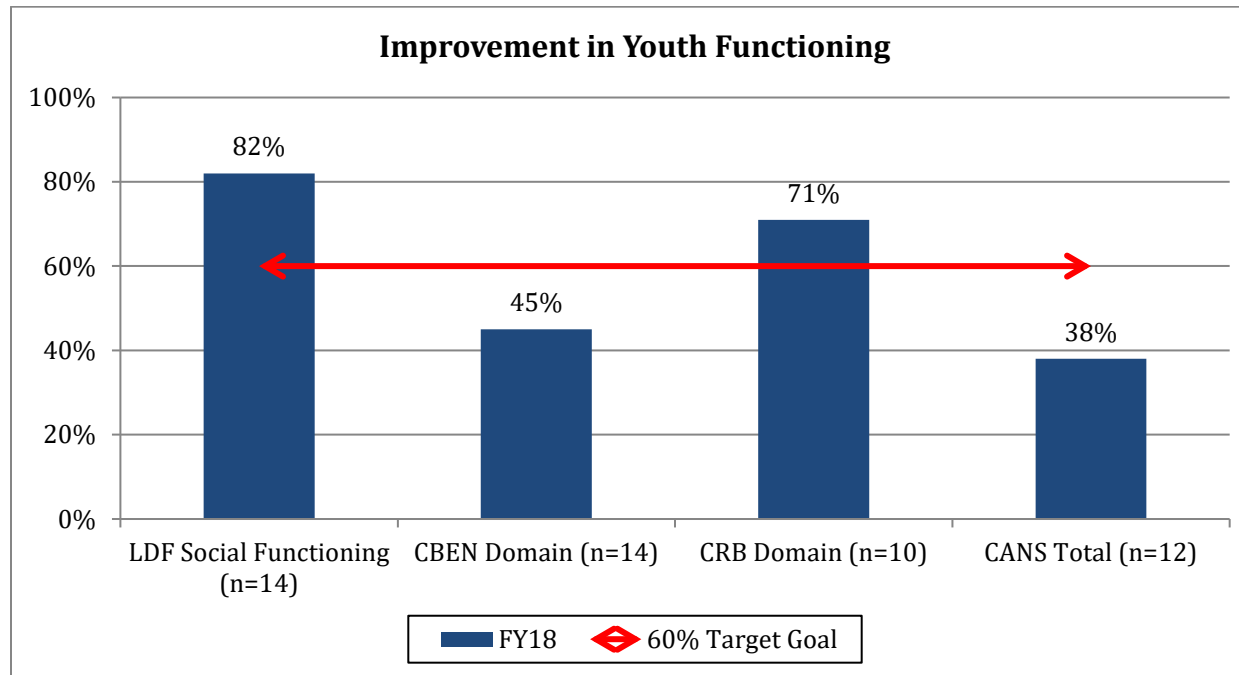
PROGRAM OUTCOME DATA/INDICATORS:

Goals/Objectives	Performance Measure	FY18
Improved Customers Functioning	1.1) 60% of customers will improve clinical condition and quality of life.(Source: CANS Total)*	38%
	1.2) 60% of customers will improve social functioning skills.(Source: CANS LDF: Social Functioning) **	82%
	1.3) 60% of customers will improve emotional and behavioral status.(Source: CANS CBEN domain)*	45%
	1.4) 60% of customers will improve child risk behaviors.* (Source: CANS CRB domain)*	71%

Improved Educational Functioning	2.1) 60% of customers will improve Academic Performance. (Source: CANS LDF School Achievement)**	53%
	2.2) 80% of customers will improve or maintain school attendance to a minimum attendance average of 3 out of 5 school days.(Source: CANS LDF School Attendance)**	58%
	2.3) 80% of customers will maintain at 0 or decrease their number of expulsions/suspensions during the last 3 months services. (Source: CEDE Expulsion and Suspension)	78%
Placement Stability	3.1) 80% of customers In-Home at Admit, will maintain or move to a less restrictive setting (not including less restrictive GH setting).* (Source: CEDE Predominant Living Situation)	83%
Juvenile Justice Involvement	4.1) 80% of customers will maintain at zero or reduced their number of probation violations.* (Source: CEDE Probation Violations)	90%
	4.2) 80% of customers will maintain at zero or decrease their days in custody.* (Source: CEDE Days in Custody)	88%
Improve Functional Stability and Reduce Need for Crisis Care	3.1) 80% 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: OMS/IA/IR)	91%
	3.2) 80% 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: OMS/IA/IR)	94%
Satisfaction	6.1) 80% 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: 79% YSS: 56% AS: 56%

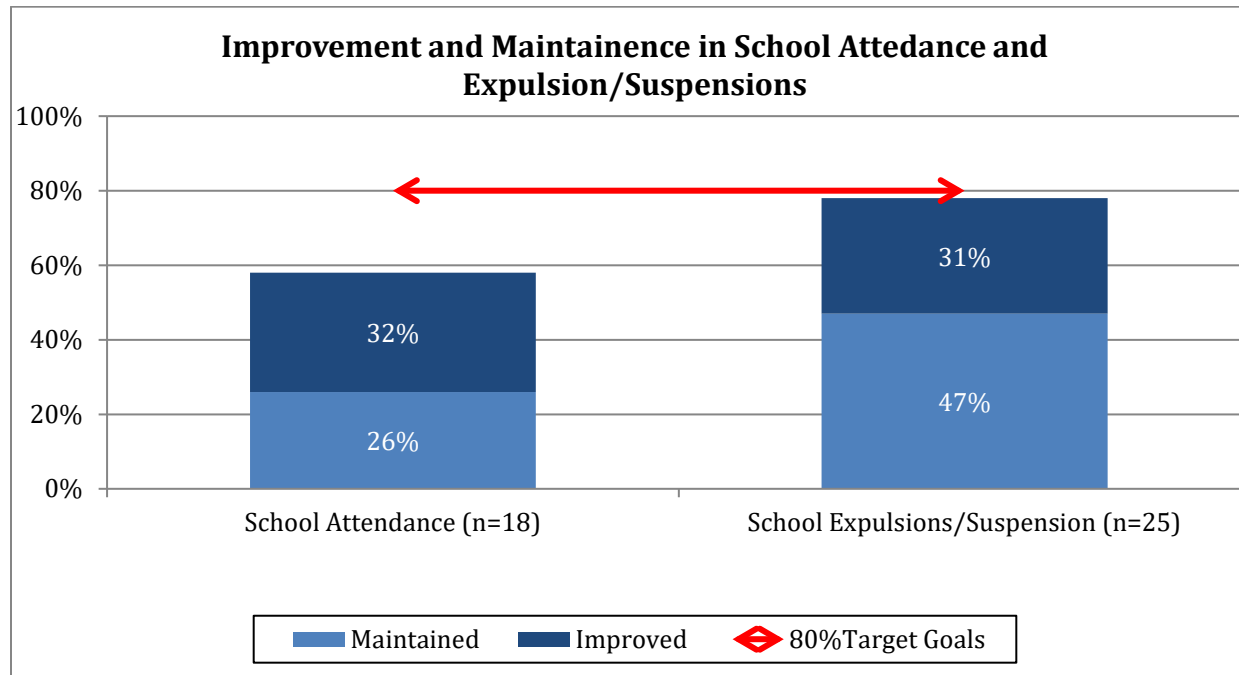
Notes: (1) In BLUE: per program baseline or KPI standard, in GREEN: per desired target goal, and in RED: per contract. (2) Outcomes/Goals based on FY18 program logic model. (3) *Improvement is defined as customers improving at least 60% of Total CANS actionable items to non-actionable. (4) ** Item level improvement is defined by change in CANS score from Actionable (2, 3) at Admit to Non-Actionable (0, 1) at Discharge.

Figure 1



Source: CANS 5+ (07/16/2018). Notes: (1) FY18 CBEN domain (N=31), CRB domain (N=14), and CANS total (N=32), LDF Social Functioning (N=17). (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 60% of actionable items. (4) Data unavailable for 6 clients due to CANS 5 and ANSA-T pairs.

Figure 2



Source: CANS (07/16/2018) & CEDE (07/16/2018). 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: School Attendance=31, School Expulsions/Suspension =32. (3) n= number of Customers improved and Maintained non-actionable. (4) Data unavailable for 6 clients due to CANS 5 and ANSA-T pairs.

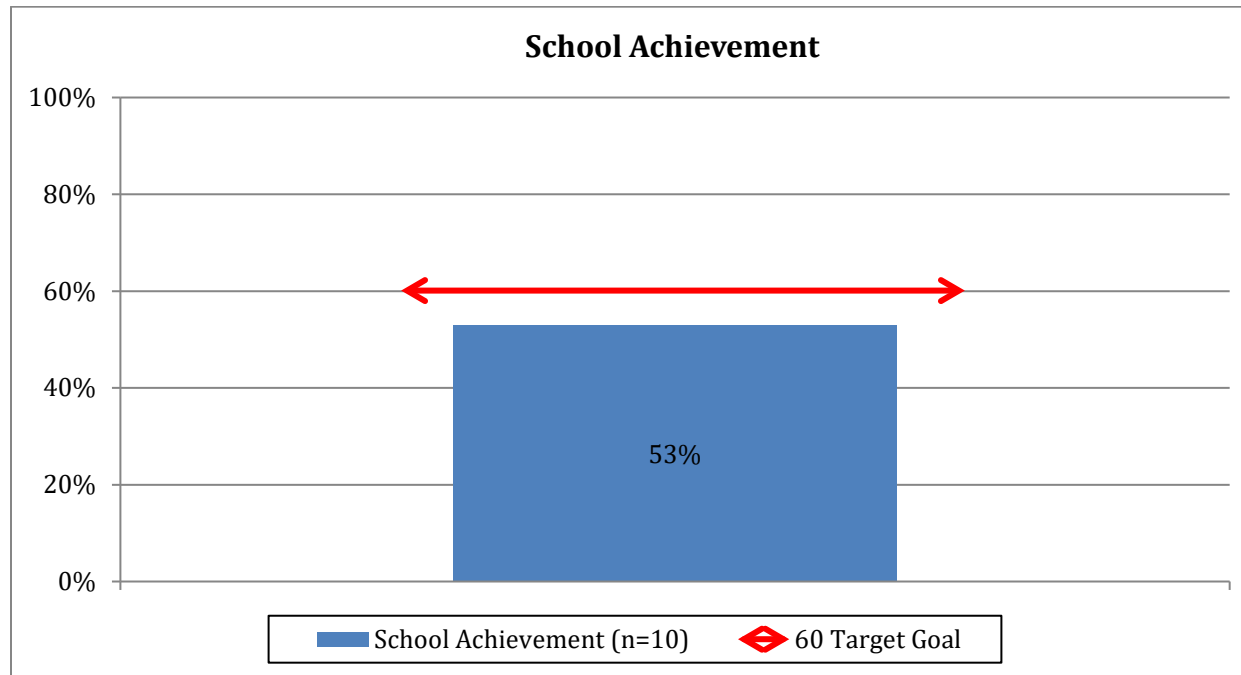
Figure 3

Uplift Family Services

Fresno County Assertive Community Treatment

External Report: FY18 Annual Status Report – Attachment A

2018-09-01



Source: CANS 5+ (07/16/2018). Notes: (1) LDF School Achievement (N=19). (2) CANS Item: N=Number of customers with an actionable rating at Admit. n=number of customers improved to non-actionable at Discharge. (3) Data unavailable for 6 clients due to CANS 5 and ANSA-T pairs.

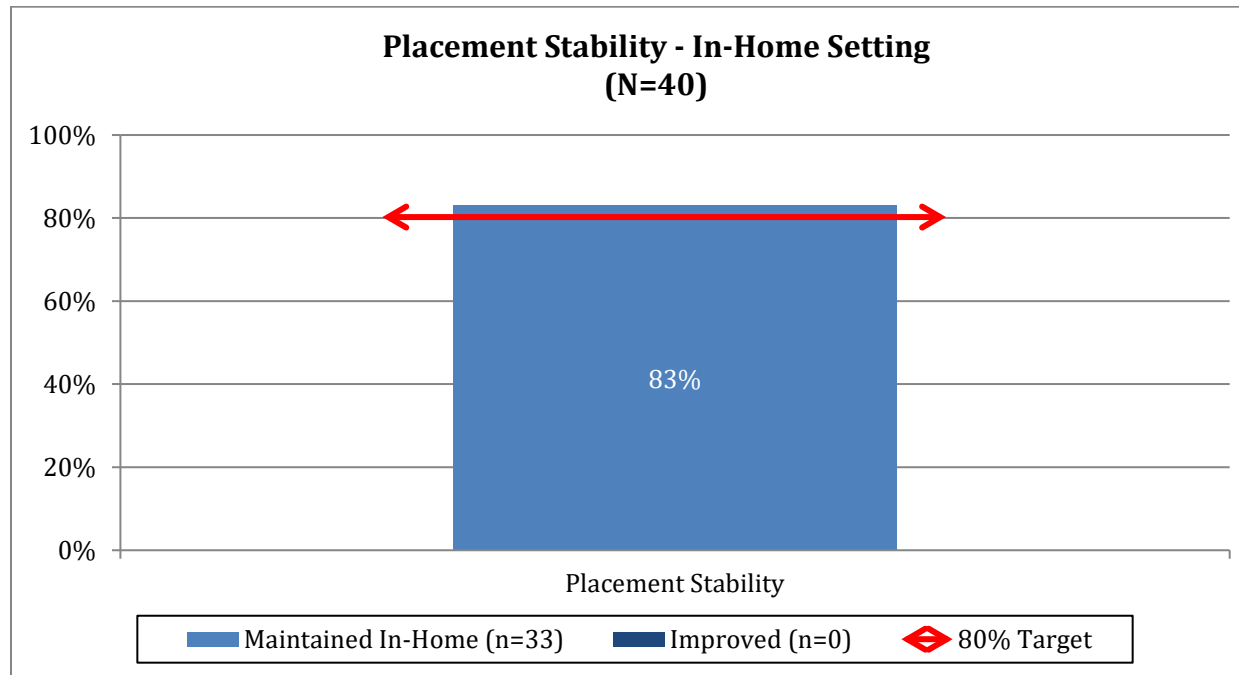
Figure 4

Uplift Family Services

Fresno County Assertive Community Treatment

External Report: FY18 Annual Status Report – Attachment A

2018-09-01



Source: CEDE (07/16/2018). 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 (3) n= number of Customers improved and maintained.

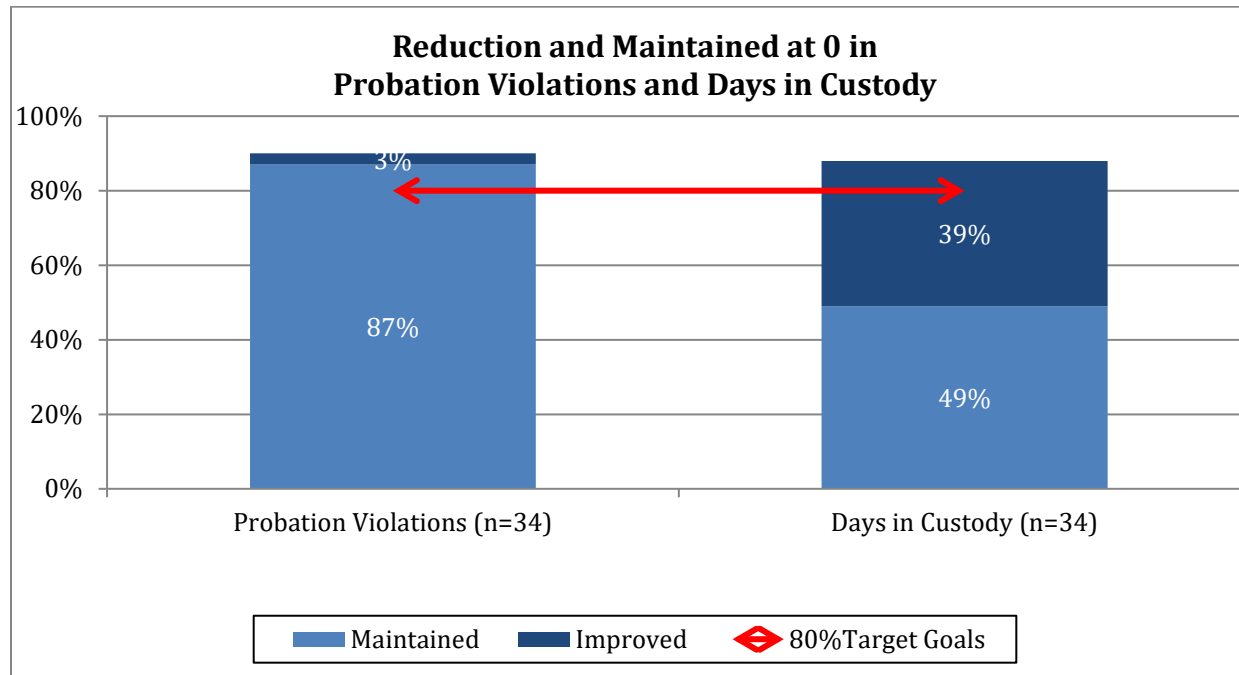
Figure 5

Uplift Family Services

Fresno County Assertive Community Treatment

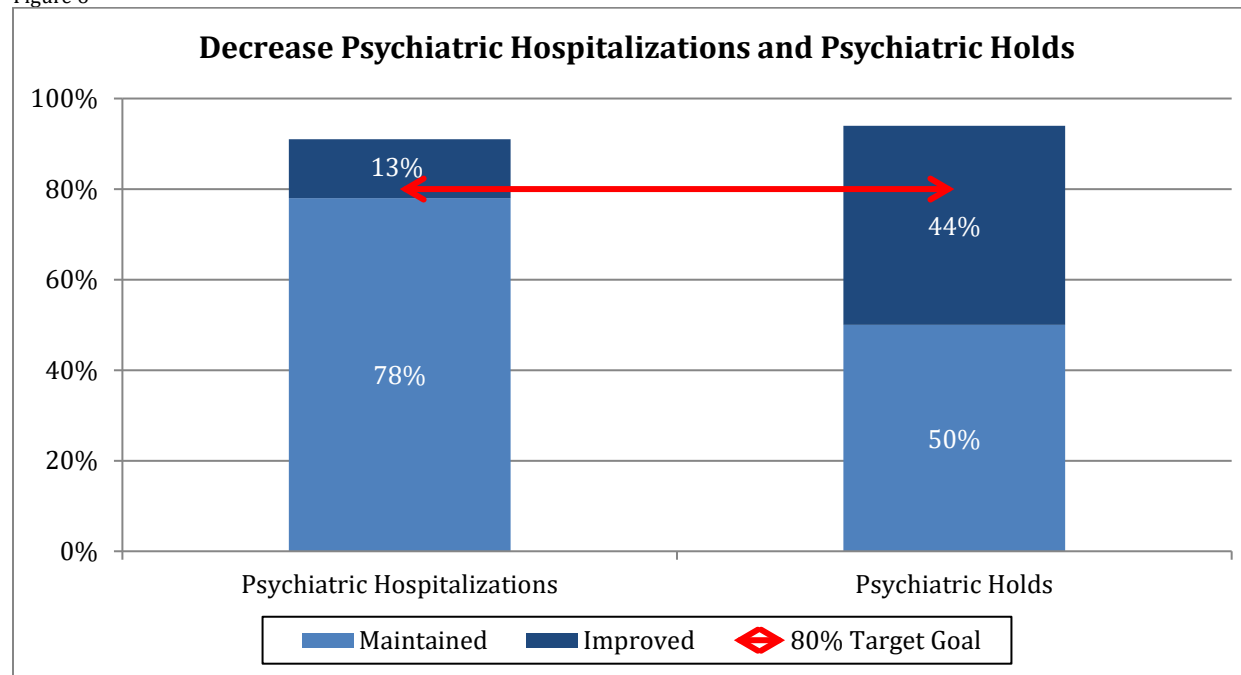
External Report: FY18 Annual Status Report – Attachment A

2018-09-01



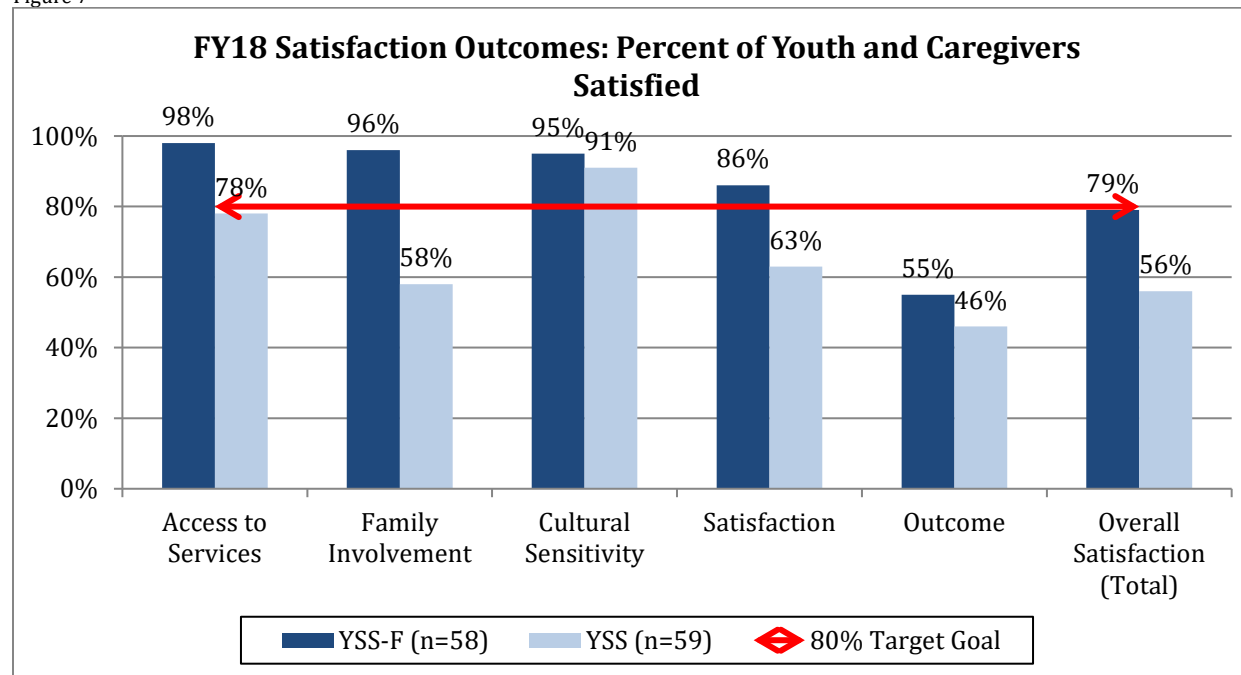
Source: CEDE (07/16/2018). Notes: (1) Paired CEDE (Admit and Discharge), includes customers with a LOS greater than 60 days. (2) n=number of customers improved and maintained. (3) N=total number of customers with paired data: Probation Violations=38, Days in Custody=39.

Figure 6



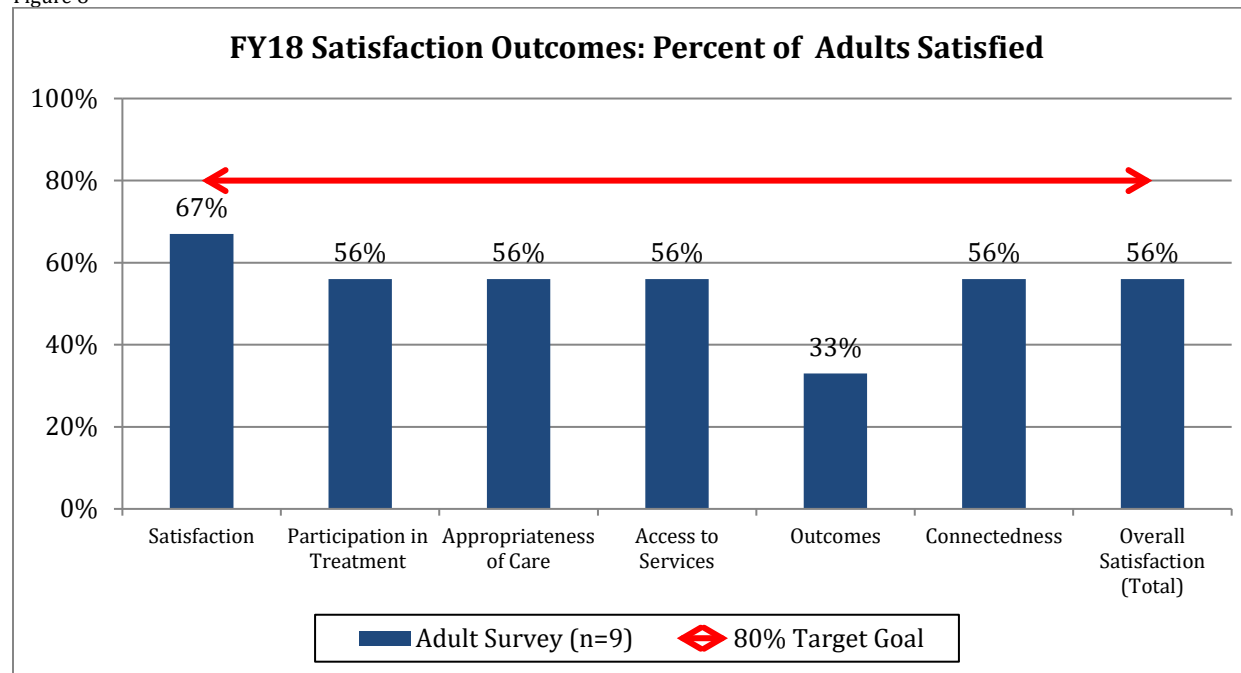
Source: OMS/IA/IR 08/07/2018. Notes: (1) n=number of customers with Paired OMS/IA/IR data. (2) FY18 Psychiatric Hospitalizations (n=46). (3) FY18 Psychiatric Holds (n=18). (4) Data unavailable for 28 clients for Psychiatric Holds, data collection began 06/2018.

Figure 7



Source: Consumer Perception Survey and Satisfaction at Discharge 07/16/2018.

Figure 8



Source: Consumer Perception Survey and Satisfaction at Discharge 07/16/2018.

DEPARTMENT RECOMMENDATION(S):

[Click here to enter text.](#)