PROGRAM INFORMATION:

Program Title: Program Description:

The Department of Behavioral Health Adult Intensive Outpatient Team is a field-based program that focuses on wellness and recovery for each individual. We utilize a strength-based and person/family centered approach to treatment with trauma informed awareness. The IOT team is staffed with clinicians and case managers that assist each individual where they are in their treatment journey. The staff will provide services in the field or office depending on the individual's preference and need. Services offered are individual therapy, rehabilitation, and linkage and consultation. Individuals will partner with their case manager or clinician to develop goals that are relevant to their life and what they want to achieve in their treatment. Both clinicians and case managers have been trained in Cognitive Behavioral Therapy for Psychosis and Motivational Interviewing to assist the person in gaining skills and investing in their own treatment. Other evidence based treatments offered are Eve Movement Desensitization and Reprocessing (EMDR) and Dialectical Behavioral Therapy (DBT). The desired impact of our work is to reduce the need for psychiatric hospitalizations, and to experience a higher quality of life as defined by the person. The Intensive Outpatient Program requires the staff to collaborate with family and caregivers, psychiatrists and nursing staff, and other community agencies and Medical

Intensive Outpatient Team (IOT)

Provider: MHP Work Plan:

Department of Behavioral Health 4-Behavioral health clinical care

1

	facilities assisting in the individual's psychiatric care. It is our desire to provide an uplifting experience at DBH that supports them in their "Wellness and Recovery".			
	The allocated positions for the program consists of 5 Mental Health Clinicians, 6 Community Mental Health Specialists and 1 Peer Support Specialist. The program operated at an average vacancy rate of 57% throughout FY 17-18.			
Age Group Served 1:	ADULT	Dates Of Operation:	October 2017-Current	
Age Group Served 2:		Reporting Period:	July 1, 2017-June 30, 2018	
Funding Source 1:	Realignment	Funding Source 3:	Choose an item.	
Funding Source 2:	Medical FFP	Other Funding:		
FISCAL INFORMATION:				
Program Actual Amount:	\$449,447			

Number of Unique Persons Served During Time Period:192Number of Services Rendered During Time Period:1,125Actual Cost Per Client:\$2,341

TARGET POPULATION INFORMATION:

Target Population:Services are provided to adult individuals (18-59) diagnosed with a serious mental illness (SMI).

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:

Community collaboration

Cultural Competency

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

Please describe how the selected concept (s) embedded :

The IOT team is a community-based program that meets the needs of the individuals in their own environment, which requires us to build and maintain relationships with the people we serve and their support systems they have in the community. This includes, but is not limited to; DBH partnering agencies, family and caregivers, board and cares, room and boards, medical staff, educators, clergy, employers, residential facilities and animal rescue groups. We strive to provide a continuum of care with multiple service delivery systems that requires consistent communication, planning, and execution of services to support the persons we serve and in their wellness and recovery.

IOT team works deligently to support the culture and social practices of the persons we serve. Each individual that works with the IOT team will be met with cultural humility to assist us in learning about the person, their world view, and their cultural traditions and social practices. Staff continues to attend cultural trainings, research, and consult and collaborate with partners and cultural brokers to best serve the individual. The goal is to provide an authentic treatment environment that resonates with their life experience.

IOT's goal is to provide support through a strength-based approach that identifies hope, motivation, and what they see for their wellness and recovery. Empowerment and resilency can be built through this process, which can assist them in their overall wellness. Family and social support is valued for the individual. We will collaborate and assist those supporting the individual in their treatment to provide a recovery focused environment. IOT utilizes a harm reduction approach to individuals experiencing SMI and substance use. We will support the person where they are at in the Stages of Change that promotes a person centered environment that increases the likelihood that they will engage in services and work towards reaching their goals. Reaching recovery tools are used to help the individual see where they are at in their recovery, areas that have strengthened, and setbacks they may have experienced. This assists the person in identifying strengths and

supports, as well as, triggers or areas of in their treatment that need more support. The Reaching Recovery Tools provides involvement of the person to become invested in their own wellness and recovery.

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

1. Effectiveness-

a. Hospitalizations

Hospitalization data for all adult programs is reported in aggregate in the report titled, Outcomes Report-Adult System of Care.

b. Inpatient Crisis Stabilization Services

Data on inpatient crisis stabilization services is reported in aggregate in the report titled, Outcomes Report-Adult System of Care.

c. Hospitalizations and Crisis Services by Follow-Up Status

Data on follow up for hospitalizations and crisis services is reported in aggregate in the report titled, Outcomes Report-Adult System of Care.

d. Reaching Recovery: Consumer Recovery Measure and Recovery Marker Inventory

The Department implemented Reaching Recovery in July 2016 for county operated programs. Reaching Recovery is a tool that was developed by Mental Health Center of Denver; its major focus is tracking change across multiple domains of wellness. With Reaching Recovery in place, the Department began to utilize several tools designed to measure recovery for individuals: the Recovery Needs Level Marker, Consumer Recovery Measure and Recovery Marker Inventory.

Recovery Needs Level (RNL): Assigns the right level of service intensity to a person at the right time.

Consumer Recovery Measure (CRM): A quarterly person rating of his/her perception of recovery. It is a 16-question tool explores the person's perception of their recovery across 5 dimensions:

- 1. Hope
- 2. Symptom Management
- 3. Personal Sense of Safety
- 4. Active Growth Orientation
- 5. Satisfaction with Social Networks

Recovery Marker Inventory (RMI): A quarterly practitioner rating of person's progress in recovery in areas that tend to correlate with an individual's recovery. It provides practitioner's rating of the person's on 8 objective factors associate with recovery:

- 1. Employment
- 2. Education
- 3. Active/Growth
- 4. Level of Symptom Management
- 5. Participation of Services
- 6. Housing
- 7. Substance Abuse
- 8. Stage of Change

Together the tools measure recovery from multiple perspectives. These tools measure changes in recovery across multiple domains and provide a structure for holistic care. The Department has begun to gather and analyze preliminary data from the CRM and RMI. The goal is to continue to gather data, establish baseline measurements and standards of measure.

2. Efficiency

a. Cost per Person

Costs include all staffing and overhead costs associated with operation of the program.

- i. <u>Objective:</u> To maximize resources allocated to the program.
- ii. <u>Indicator</u>: Total program costs compared to number of unique persons served.
- iii. <u>Who Applied:</u> Persons served by the program. Persons served represents persons who received any specialty mental health services in FY 17-18.
- iv. Time of Measure: FY 17-18
- v. Data Source: Avatar and Financial Records
- vi. <u>Target Goal Expectancy</u>: To keep within departmental budgeted costs for the program.
- vii. <u>Outcome</u>: As IOT was created in October of 2017, there is no previous data to compare with. Unique persons, program actual amount and cost per person should be expected to change for the following FY 18-19.

Cost per Person

	FY 16-17	FY 17-18
Unique Persons		192
Program Actual Amount		\$449,447
Cost per Person		\$2,341

3. Access:

a. Urgent and Non-Urgent Timeliness

Data for timeliness of access was collected and combined for all programs within the Adult System of Care and can be found on the Outcomes Report-Adult System of Care.