

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title:	Adult Crisis Residential Treatment	Provider:	Central Star
Program Description:	Comprehensive treatment resources and interventions in a 24/7/365 residential setting, with a focus on supporting psychiatric stabilization and transition to community placements/housing.	MHP Work Plan:	1-Behavioral Health Integrated Access Choose an item. Choose an item.
Age Group Served 1:	ADULT	Dates Of Operation:	Program Started February 2019
Age Group Served 2:	Choose an item.	Reporting Period:	Jul 2018 thru Jun 2019
Funding Source 1:	Choose an item.	Funding Source 3:	Choose an item.
Funding Source 2:	Choose an item.	Other Funding:	Click here to enter text.

FISCAL INFORMATION:

Program Budget Amount:	\$2,065,068	Program Actual Amount:	\$1,321,085
Number of Unique Clients Served During Time Period:	55		
Number of Services Rendered During Time Period:	1,382 Bed Days		
Actual Cost Per Client:	\$24,019.73 (<\$1,000 per bed day)		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Crisis Stabilization
Contract Term:	Click here to enter text.	For Other:	Click here to enter text.
		Renewal Date:	Click here to enter text.
Level of Care Information Age 18 & Over:	Choose an item.		
Level of Care Information Age 0- 17:	Choose an item.		

The levels of care shown in the menu do not apply. The program provides crisis residential treatment.

TARGET POPULATION INFORMATION:

Target Population:

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 :

Integrated Service Experience

Community collaboration

Cultural Competency

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

Access to underserved
communities

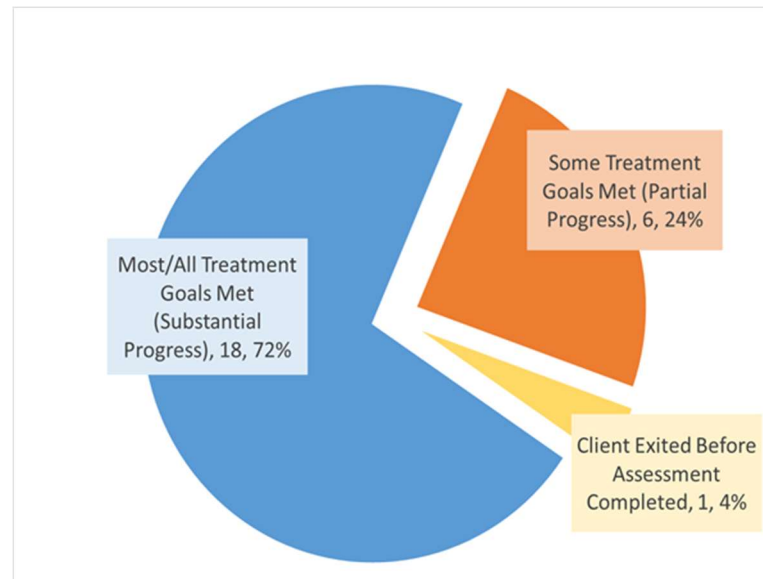
All core concepts are reflected in the operation of the CRT. Community collaboration and service integration are both increasingly critical foci to assure adult clients and their family members are connected into community services and supports post discharge. All Stars Behavioral Health Group (SBHG) programs build and implement a bi-annual Cultural Attunement Plan which addresses multi-cultural staff hiring, training and retention; programming, policies and procedures; and, elective initiatives carried out by teams to enhance cultural attunement to their service population(s). Each client's and family's issues and needs prompting crisis treatment are assessed and addressed through an individualized plan of care, and the client's own WRAP, with assertive attention to stabilizing the person while in the setting and connecting them into post discharge treatment services and resources. CS's CRT in Fresno County helps the county to meet the community need for crisis services and offers an important gateway for those not prior linked to community-based mental health services.

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
- Details regarding key performance indicators, tools/measurements, available data and analyses are on Form C. Data highlights below:

EFFECTIVENESS:

- Too few discharges to date to fully assess using the standardized outcome measurement tools of the program. The tools are implemented and the team is working on boosting completion rates. A baseline profile of the clients using the Behavioral and Symptom Identification Scale (BASIS-24) and Recovery Assessment Scale (RAS) is provided in Form C.
- By discharge, 85% of residents are guided to write a WRAP or are introduced to WRAP concepts during groups and/or individual rehab supports. Additionally, good numbers (76%) participate in the EBPs that are integrated into CRT programming with at least a minimum number of sessions delivered to provide a sufficient dose of the practice for the client to benefit from the EBP.
- Almost all clients are meeting all, most or at least some of their treatment goals and majorities (80%) are being linked to one or more aftercare services and supports (both behavioral health related, and for other needs).



EFFICIENCY:

- The Central Star Training Department reports many details regarding trainings delivered and provided to each staff, which was an important focus during the program's launch. All staffs are on track to meet their full set of topics and requirements which are anchored to their position and date of hire. Details are provided in Form C.
- The average length of a client's stay so far is 24 days; median 27 days (range 1 to 67 days).

ACCESS:

- The program is building capacity to track the new state timeliness of care standards, along with 6 key indicators in the contract related to access. They also commenced required Network Adequacy Certification Tool (NACT) data log submissions.
- Since the program began in February to the end of the FY, there were 58 enrollments of 55 individuals; at the end of the year, 50 closed episodes and 8 active clients at the CRT. Initial participants were 69% male and 31% female; with diverse ethnocultural heritages that include 35% Latinx, 22% Caucasian, 20% African American, 13% Other/Mixed Heritages, and 2% each Asian American and Native American. At the time of enrollment, they were all over age 18 with an average age of 38 yrs.
- Their clinical pathways (areas in need of treatment) were predominately internalizing conditions (70%) and major mental illnesses (26%); however, we note many internalizing diagnoses (29%) were specified with psychotic features. The most common internalizing condition was major depression; and, the most common major mental illness was schizoaffective disorder. Having a place to reside and a clean, safe, structured milieu program with well trained staff, and a positive wellness and recovery culture is very important for persons experiencing a crisis related to behavioral health conditions.

SATISFACTION:

- No data to report at this time. Surveys conducted at discharge, 2 wks. and one month post discharge are currently being implemented.

DEPARTMENT RECOMMENDATION(S):

Click here to enter text.