

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title:	Primary Care Integration	Provider:	Clinica Sierra Vista (CSV)
Program Description:	The Primary Care Integration program consists of four service modalities: Prevention/Early Intervention (PEI), Adult Specialty Mental Health (SMI), Children Specialty Mental Health (SED), and Substance Use Disorder (SUD) services. The PEI service component fully integrates medical primary care with mild to moderate mental health concerns, illnesses, and prevention services above and beyond the primary care clinic's regulatory responsibilities for mental health. The SMI/SED service components aim to provide services to clients with SMI/SED diagnoses with evidence-based practices and outcome-informed therapy targeted to address and treat mental health concerns and diagnoses on a case by case basis.	MHP Work Plan:	1-Behavioral Health Integrated Access 2-Wellness, recovery, and resiliency support 3-Culturally and community defined practices
Age Group Served 1:	CHILDREN	Dates Of Operation:	November 14, 2017 – Present
Age Group Served 2:	ADULT	Reporting Period:	July 1, 2018 – June 30, 2019
Funding Source 1:	Prevention (MHSA)	Funding Source 3:	Com Services & Supports (MHSA)
Funding Source 2:	Early Intervention (MHSA)	Other Funding:	Click here to enter text.

FISCAL INFORMATION:

Program Budget Amount:	\$79,199 (PEI) \$2,117,118 (SED/SMI)	Program Actual Amount:	\$2,196,317
Number of Unique Clients Served During Time Period:	PEI 180; SMI/SED: 980; TOTAL: 1,160		
Number of Services Rendered During Time Period:	PEI: 680; SMI/SED: 4720; TOTAL: 5,400		
Actual Cost Per Client:	PEI: \$440, SMI/SEI: \$2,160; TOTAL: \$1,893		

CONTRACT INFORMATION:

Program Type: Contract-Operated
Contract Term: July 1 2018-June 30,2019

Type of Program: Outpatient
For Other: Click here to enter text.
Renewal Date: Click here to enter text.

Level of Care Information Age 18 & Over: Traditional Outpatient Treatment (caseload 1:80)

Level of Care Information Age 0- 17: Outpatient Treatment

TARGET POPULATION INFORMATION:

Target Population: The target population includes children, youth, adolescents, adults, perinatal women, and older adults living in Fresno County. Additionally, the target population includes individuals/families who are indigent, uninsured, and underserved.

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)

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

Please describe how the selected concept (s) embedded :

CSV provides each client with a Joint Commission-accredited assessment and an individualized plan of care to meet the client's needs. The plan outlines the client's present mental health concerns as well as coordinates resources to meet client's needs. Changes to the plan of care may be developed throughout the year based on the

family and client's needs, achievement of goals, and the treatment team's coordinated approach.

Cultural Competency

Cultural Competency is addressed within each site by ensuring each staff member completes the required cultural competency training (7.5 hrs). Families' cultural expectations and inclusiveness is supported by ensuring families receive services in their language of preference. Staff is trained to partner with the appropriate community-based organizations that support the families' needs. Focus populations include Latino, Southeast Asian, African American, and Native American cultures, as well as serving the families that that limited means for payment. CSV's goals are to support the needs for any individual/family regardless of race, color, or culture background.

Access to Underserved Communities

Each site has been strategically incorporated within the community. Each site provides a full range of services to families that may have reservations of beginning services due to limited means. CSV also strives to offer care and support to individuals and families with low, moderate and fixed incomes and families from an array of cultural and linguistic backgrounds. CSV strives to serve clients from underserved and uninsured populations that typically experience disproportionately higher rates of untreated mental health concerns and illnesses due to a number of factors, including stigma, cultural and linguistic barriers to services, poverty, distrust, geographic isolation, and transportation.

Integrated Service Experiences

Treatment teams collaborate to develop an individualized plan of care for every client that requests services. Families are encouraged to participate and partnerships within the community assist to develop supportive networks for each client. The goal for every client is to develop their supportive network within the community as well develop their own personal skills based on their beliefs, languages, and

values with the ultimate goal to support the client into improved mental health.

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

At this time, the program is developing a more comprehensive tracking program in order to be able to identify effectiveness of program, efficiency within program, access to care, and a database to track past and present services for each client. CSV is also developing a satisfaction survey that will be administered during each face to face service with client in order to track satisfaction and feedback of clients served. Tools to be utilized to track effectiveness and efficiency of program will be CANS, PSC-35 for children and PHQ-9, GAD-7, and Reaching Recovery for adults. The goals for the upcoming year will be to improve child functioning by tracking CANS and PSC-35 scores as well as increased family interactions with regular family treatment sessions. The goals for adults will be to reduce symptomology by tracking PHQ-9, GAD-7, and Reaching Recovery in reduction in scores.

DEPARTMENT RECOMMENDATION(S):

Click here to enter text.