FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title: MHS Fresno IMPACT Provider: Mental Health Systems

Program Description: Fresno IMPACT is a Mental Health Services MHP Work Plan: 1–Behavioral Health Integrated Access

ACT (MHSA) Co-occuring Disorders, Full

Service Partnership (FSP). The contract goals
are to reduce incidents of inpatient psychiatric
hospitalizations and incarcerations. This is

2-Wellness, recovery, and resiliency support
4-Behavioral health clinical care

achieved by providing a welcoming, recovery oriented, integrated, co-occuring disorder capable service delivery to adults and older adults with serious mental illness and

substance abuse disorders.

Age Group Served 1: ADULT

Age Group Served 2: OLDER ADULT Reporting Period: July 1, 2018 – June 30, 2019

Funding Source 1: Com Services & Supports (MHSA) Funding Source 3: Other, please specify below

Funding Source 2: Medical FFP Other Funding:

FISCAL INFORMATION:

Program Budget Amount: 2,134,965 Program Actual \$2,002,603.27 (Net invoice amount, after rent

Amount: revenue), Gross costs equal \$2,104, 336.26 (before

rent revenue).

June 1, 2014 - Present

N/A

Number of Unique Clients Served During Time 158

Period:

Number of Services Rendered During Time Period: 8,056 services rendered totaling 359,492 minutes of billable services, 1,043,212.02

reimbursement for service delivery

Actual Cost Per Client: \$12.675

CONTRACT INFORMATION:

Program Type: Contract-Operated **Type of Program:** FSP Contract Term: June 1, 2014 through June 30, 2017 with 2 **For Other:** N/A

extensions for 1 year.

Renewal Date: N/A

Dates Of Operation:

Level of Care Information Age 18 & Over: High Intensity Treatment/FSP (caseload 1:12)

Level of Care Information Age 0-17: Choose an item.

TARGET POPULATION INFORMATION:

Target Population:

The targeted population that is served at the MHS Fresno IMPACT program is adult and older adult consumers with cooccurring DSM V mental health and substance abuse disorders who are frequent users of crisis services, emergency rooms, detoxification services, jails and hospitals.

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)

Community collaboration

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

Access to underserved communities

Integrated service experiences

Please describe how the selected concept (s) embedded:

Community Collaboration: MHS Fresno IMPACT has made efforts to leverage community partnerships such as Department of Veteran Affairs, Social Services Agencies, Probation, Community Regional Medical Centers, Central valley Regional Center, Public Guardian, Board and Cares, HUD-funded housing programs to ensure access to the resources necessary for consumer wellness. During the 2018 – 2019 program year, 83.2% of consumers admitted to services received subsidized housing through MHSA funding to eliminate homelessness as a barrier to engagement and recovery. Subsidized residential treatment beds were provided to 15 clients associated with MHS Fresno IMPACT through MHSA funding in addition to those consumers who were linked to residential treatment through alternative

FY 2018-19 Outcomes

funding sources by case managers. MHS Fresno IMPACT continues to work with the Behavioral Health court to leverage clinical mental health services to actively assist in the reduction of recidivism for inmates with an SMI diagnosis. During the 2018-2019 year, 28 behavioral health court consumers were served through MHS Fresno IMPACT.

Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services: MHS Fresno IMPACT provides continuous training and staff development in evidenced-based recovery models including Motivational Interviewing, WRAP, Trauma Informed Care and Assertive Community Treatment. MHS Core Values (integrity, dignity, hope, excellence, innovation and action) also reviewed weekly by the IMPACT program manager to assist with encouraging the mental wellness and recovery of the Fresno IMPACT staff members. The use of cross-training, case conceptualization, daily consultation consultation and community collaboration interdisciplinary teamwork is facilitated amongst the staff. In collaboration with the individuals that we serve, MHS Fresno IMPACT, provides an individualized treatment plan that is completed with a DBH credentialed Clinician (licensed and registered). The multidisciplinary services available to the individuals we serve are outlined based on their identified behavioral goals. Collateral information is encouraged from family members, when appropriate, during the assessment process to assist with providing relevant information for services. In an effort to increased evidenced based services provided, MHS Fresno IMPACT has 2 certified two staff members as facilitators in Wellness and Recovery Plan (WRAP). A WRAP rehabilitation group is provided to the individuals we serve where they receive workbooks to work on individually or with clinical support. Clinical support can be fostered to assist with development of a strategic crisis plan for each of the individuals we serve participating in the WRAP rehabilitation group. Fresno IMPACT staff work collaboratively with the individuals we serve to develop a safety/crisis management plan to assist with fostering resiliency skills by utilizing current medications, support systems, and action planning for crises. Clinical staff provide regular assessments and plan of care review with the individuals we serve as behavioral goals are met or have been identified as ineffective by the individuals we serve.

Access to underserved communities: MHS Fresno IMPACT acknowledges the barriers faced by the individuals we serve that often interferes with their ability to seek out services in multiple locations. These barriers interfere with their ability to maintain basic functioning, stable living conditions as well as a reduction in psychiatric hospitalizations and incarcerations. Fresno IMPACT continues to work diligently to promote services within the communities of Fresno County who serve individuas who demonstrate the need for access to mental health services through a variety of outreach methods and partnerships. IMPACT maintains connections within the community on a monthly basis through outreach to Adult Services, Juvenile Justice, Behavioral health board, Committee for Promotion of Wellness, Fresno Madera Continum of Care Suicide Prevention meetings, surrounding universities to facilitate internships, community housing resources including private vendors and residential programs, and behavioral health court. All of the individuals we serve are accepted to the Fresno IMPACT Program are assessed through the Urgent Care Wellness Center access team to ensure that the consumers with the lowest access, high acuity and/or utilization of mental health services such as frequent psychiatric hospitalizations are given priority access to the Co-Occuring FSP services. Historically, Fresno IMPACT continues to have a low denial rate for referrals to ensure that all of the individuals served within Fresno County are provided access to services regardless of previous history including low engagement in services, frequent hospital admissions, substane use and behavioral barriers. During the 2018-2019 program year there were no client's denied services. During the 2018-2019 program year, 83.4% of referrals admitted to the program came from other mental health agencies and 16.6% of consumers admitted were referred through other county agencies.

Integrated Service Experiences: MHS Fresno IMPACT continues to provide services to families and consumers by utilizing Assertive Community Treatment principles including a multidisciplinary team of highly trained individuals in areas such as substance use, Peer Support, Psychiatry, Case Management, Dual Recovery, Housing, and Vocational Skill-building. To ensure that consumers have access to staff and individualized treatment the program maintains a consumer to staff ratio of 1:13. The staff works to lessen barriers to access and engagement in services and facilitate social integration by providing primarily field-based services. The program continues to make efforts to facilitate family engagement and inclusion through the use of

collateral psychoeducation and training to families through collateral services. During the 2018-2019 Program year 2,646 billable minutes of collateral services were provided to the primary support persons to encourage strengths-based treatment and an alliance to support the needs and recovery of the consumer's served.

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

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DEPARTMENT RECOMMENDATION(S):

OUTCOME GOAL

(1). Effectiveness & (2) Efficiency:

Target goal Expectancy: 75% reduction in hospitalizations, incarcerations, homelessness, and crisis episodes.

OUTCOME DATA

Indicator:

85.7% of consumers experienced a reduction in psychiatric hospitalizations.

98% of consumers experienced a reduction in medical hospitalizations.

98 % of consumers experienced a reduction in arrests.

73% of consumers experienced a reduction in incarcerations.

(variable based on 18% of population referred while

incarcerated, and 5% of population remaining active consumers

while incarcerated to prevent service gaps).

90.4% of consumers experienced a reduction in homelessness. 87% of consumers experienced a reduction in utilization of

emergency shelters.

Who Applied: 126/158 unique consumers who engaged in service 90 days or longer.

Time of Measure: July 1, 2018- June 30, 2019

Data Source: DCR/ITWS State System

(3). <u>Access:</u>

Target goal Expectancy: Program will provide service to 140 unique consumers.

Indicator:

MHS Fresno IMPACT engaged and provided services to 158 unique consumers.

85% of referred consumers remained engaged in services for 6 months or more.

Who Applied: 158 unique consumers.

Time of Measure: July 1, 2018- June 30, 2019

Data Source: AVATAR

(4). <u>Satisfaction & Feedback Of Persons Served & Stake holders:</u>

Reaching Recovery: MHS Fresno IMPACT utilized the Fresno County Reaching Recovery database to create an individual recovery profile and to track consumer improvement and satisfaction of needs at intake and 6 months,

Indicator: 82% of consumers self-reported an increase in

functioning.

Who Applied: 126/154 unique consumers who were engaged

in service 6 months or longer.

Time of Measure: 6 month periods between July 1, 2018-June

30, 2019.

Data Source: Reaching Recovery

Target goal Expectancy: A significant increase in consumer functioning.

DEPARTMENT RECOMMENDATION(S):

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