FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

Choose an item.

Choose an item.

PROGRAM INFORMATION:

Program Title: Juvenile Justice SED Dual Diagnosis Provider: Mental Health Systems Inc

Outpatient Program

Program Description: Intensive co-occurring treatment services MHP Work Plan: 4-Behavioral health clinical care

targeting adolescents, ages 13 to 18 years old, who are in-custody at Fresno County Juvenile Justice Campus and referred to the Floyd Farrow Substance Abuse Unit (SAU). Post-release services are also

provided upon completion of the in-custody program as adolescents transition back into

the community.

Age Group Served 1: CHILDREN Dates Of Operation: 2008-Present

Age Group Served 2: Choose an item. Reporting Period: July 1, 2018 – June 30, 2019

Funding Source 1: Choose an item. Funding Source 3: Choose an item.

Funding Source 2: Choose an item. Other Funding: Substance Abuse And Mental Health Services

Administration (SAMHSA) Community Mental

Health Services Block MHBG)

FISCAL INFORMATION:

Program Budget Amount: \$287,855.84

Number of Unique Clients Served During Time Period: 54
Number of Services Rendered During Time Period: 1765

Actual Cost Per Client: 5330.66 per client for 6 months of intensive in-custody treatment and 4-6 months of post-release outpatient treatment

CONTRACT INFORMATION:

Program Type: Contract-Operated Type of Program: Other, please specify below

Contract Term: November 1, 2018 – November 30, 2021 For Other: In-custody and Post-Release Outpatient

Renewal Date: November 1, 2021

Level of Care Information Age 18 & Over: Choose an item.

Level of Care Information Age 0-17: Outpatient Treatment

TARGET POPULATION INFORMATION:

Target Population:

The target population is adolescents, ages 13 to 18 years old, diagnosed as severely emotionally disturbed (SED) who have a co-occurring mental health and substance use disorder diagnosis, and are either in-custody at the Juvenile Justice Campus or are in the Post-Release Outpatient services component of the SAU. Adolescents are assessed and referred to the program through

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:

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

Integrated service experiences

Cultural Competency

Choose an item.

Please describe how the selected concept (s) embedded:

Although the program is not funded by MHSA, its core concepts are reflected in program services. Clients and family are included in treatment planning, on-going participation in the program, and transition/re-entry planning. Treatment services are centered on a multidisciplinary team of mental health, substance use, school and probation staff that coordinates the treatment plan to address the multiple needs of adolescents and their family. The curriculum is adjusted to the adolescent's developmental needs and to meet educational, cultural and gender specific requirements. MHS staff represent gender and ethnic/cultural diversity as well as receive ongoing cultural competence training.

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

I. <u>Effectivness-</u>

- (1) Indicator: Progress at discharge; The % of clients who are making successful progress at discharge.
- (2) Who Applied: The 54 clients enrolled in the program during this fiscal year
- (3) Time of Measure: FY 18/19
- (4) Data Source: Internally created tracking sheet
- (5) Target Goal Expectancy: 80% of the clients will stay enrolled for 180 days.

Outcome: 96.3% of the clients were making successful progress at discharge. Successful indicators are having made progress on all treatment plan goals, which include remaining clean and sober, attendance and progress in school, participate ng in all aspects of the treatment program including groups, Individuals, family, and complying with the rules of the JJC facility in their behavior in the program.

II. <u>Efficiency-</u>

- (1) Indicator: Dosage; The % of clients that received # units of service.
- (2) Who Applied: The 54 clients enrolled in the program during this fiscal year
- (3) Time of Measure: FY 18/19
- (4) Data Source: Internally created tracking sheet
- (5) Target Goal Expectancy: 80% of the clients will receive 120 units of service.

Outcome: 96.3% of the clients received 120 units of service.

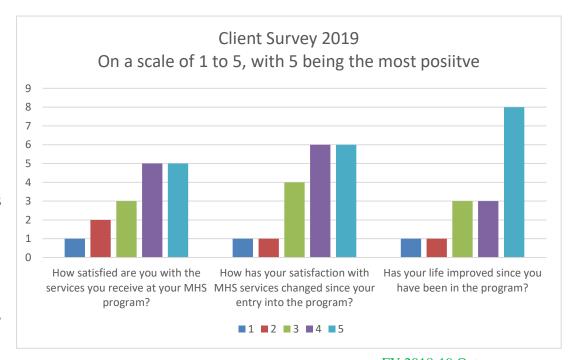
III. Access-

- (1) Indicator: Engage clients in services by the next business day after being placed in our program.
- (2) Who Applied: The 54 clients enrolled in the program during this fiscal year
- (3) Time of Measure: FY 18/19
- (4) Data Source: Internally created tracking sheet
- (5) Target Goal Expectancy: No goal has been set previously for this target.

Outcome: 100% of the clients were engaged in services by the next business day after being placed in our program,

IV. <u>Client Survey & Feedback of</u> <u>Persons Served & Stakeholders</u>

(1) Indicator: Satisfaction Survey;
All clients participating in the
Floyd Farrow Substance Abuse
Unit are asked to complete
Satisfaction Survey annually
related to their experience in
the in-custody program. Surveys
are provided to clients to
complete confidentially. The
question were; 1. How satisfied
are you with the services you
receive at your MHS program. 2.
How has your satisfaction with



MHS services changed since your entry into the program? 3. Has your life improved since you have been in the program?

- (2) Who Applied: The population in the Floyd Farrow SAU at the time of the survey.
- (3) Time of Measure: June 2019
- (4) Data Source: MHS provided the results of the confidential survey.
- (5) Target Goal Expectancy: To have the majority of the client's rate their experience as very good to fair.(It should be noted as this is a court ordered adolescent in-custody program generally newer commitments are not going to respond positively at first).

Outcome: The program was consistently rated with a majority of respondants in "very good" or "good" and "fair", with a few ratings of "poor".

DEPARTMENT RECOMMENDATION(S):

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