

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title:	Jail Psychiatric Services	Provider:	Wellpath
Program Description:	Wellpath at the Fresno County Jail provides psychiatric and mental health evaluation and assessment, crisis intervention, medication management, acute psychiatric referrals and case management services, and substance used disorder assessments and education. In addition, services include treatment for inmates housed in Lock Down housing with Treatment and Behavior Management Planning, discharge planning and representation of inmates mental health needs/services in Behavioral Health Court.	MHP Work Plan:	4-Behavioral health clinical care Choose an item. Choose an item.
Age Group Served 1:	ADULT	Dates Of Operation:	July 1, 2018-Present
Age Group Served 2:	TAY	Reporting Period:	July 1, 2018-June 30, 2019
Funding Source 1:	Realignment	Funding Source 3:	Other, please specify below
Funding Source 2:	Choose an item.	Other Funding:	Health Realignment; AB 109 Public Safety Realignment Grant funds

FISCAL INFORMATION:

Program Budget Amount:	\$4,572,552.00	Program Actual Amount:	\$4,572,552.00 (DBH MH Realignment)
Number of Unique Clients Served During Time Period:	9,214		
Number of Services Rendered During Time Period:	29,539		
Actual Cost Per Client:	\$496.26		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Other, please specify below
Contract Term:	July 1, 2018-June 30, 2021, plus two optional twelve month periods.	For Other:	Correctional Facility
		Renewal Date:	July 1, 2021

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 above do not apply. This program provides behavioral health services to adult inmates housed at the Fresno County Jail.

TARGET POPULATION INFORMATION:

Target Population: Adult inmates housed at the Fresno County Jail with acute mental illness and subacute mental health conditions requiring clinical mental health attention. Specifically targeting inmates ("Patients") with Serious Mental Illness (SMI) who are housed in the General Population, Administrative Segregation Housing and Lock Down Cells. All inmates "patients" have the potential for being part of the 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)

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

Community collaboration

Choose an item.

Choose an item.

Please describe how the selected concept (s) embedded :

Patients are identified through the Booking Intake process and appointments are populated within the patient's electronic record as a result of their input regarding mental health needs. Another manner is the patient can access services through the Health Service Request form which is a consumer generated document that intends to assist the patient in identifying their specific health needs as requested. Lastly, patients who are deemed to be in need of Mental Health services can access care through interdisciplinary referrals as well as by request of custody staff based on patients behaviors, appearance or known histories.

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

Goals

- 1) Reduce the number of acute psychiatric hospitalizations (**Effectiveness; Efficiency**)
- 2) Provide out-of-cell therapy sessions for SMI inmates in segregated housing, 3 times per week (**Access; Efficiency**)
- 3) Serve 9,214 unique inmates between July 1, 2018 and June 30, 2019 (**Access**)
 - a. Provide psychiatric staff for medication management services as well as other clinical nursing staff to successfully treat this population.
 - b. Provide psychiatric initial evaluations for an average of 221 inmates per month.
 - c. Provided SMI inmates and identified Mental Health patients/inmates in non-lockdown areas, who were specifically housed in "Open Psych" pods, group psycho-educational groups, as well, as groups for individuals with co-occurring disorders of mental illness and substance abuse.
- 4) Serve 847 unique inmates identified as having co-occurring disorders of mental illness and substance abuse (**Access**)
 - a. Jail Psychiatric Services (JPS) will continue to document the number of inmates that will receive dual diagnosis treatment.
- 5) Work with other county programs to link SMI patients/inmates to intensive case management follow up programs either through the Behavioral Health Court in Fresno County, or to treatment programs for dual diagnosis (**Access**)

In Fiscal Year (FY) 2018-2019, Wellpath began tracking admissions and length of stay of adult inmates at the Psychiatric Health Facility run by Exodus Recovery, Inc. (Exodus) . In FY 2018-19 there were less than 5 admissions to Exodus due to the facility being in

reconstruction phase and only had capacity to service half of their program's normal capacity. The timeline for the completion of Exodus's remodel is estimated for December 2019. With the lack of space at Exodus, 18 patients were sent to Community Regional Medical Center (CRMC) for inpatient psychiatric services. The number of admissions did not increase or decrease from FY 2017-18. Wellpath will continue to develop strategies to serve clients at the Jail to reduce inpatient hospitalizations.

To better facility care coordination, Wellpath's mental health staff has collaborated with Exodus this year to develop a flow chart for patient referrals and transitions. This is an attempt to reduce disruptions or delays in a individuals care between Wellpath and Exodus referrals. This mechanism has help to properly communicate patients transitions to and from Exodus or CRMC. This flow chart is now embedded in the Crisis 5150 packets used in the jail.

During FY 2018-19, behavioral health services provided in the jail included 29,539 mental health sick calls with MH therapists (a minimal decrease from 30,985 in the previous year) and 847 Substance abuse sick calls. Additionally, there were 5,958 sick calls with the psychiatrist and Psych NP (an increase from 5,049 from the previous year). Therapists also complete an exit interview with SMI patients who were housed in Administrative Segregation and to patients who are released and discuss with them, where they can go to pick up their medications. Transportation are offered by custody at release to community resources or other supports. Upon discharge, patients who needs medication receives a 14-day prescription, funded by Wellpath, followed by a 30-day prescription. The patient is also given a written guide to physical resources and is asked if there is anything they need before they are released. Data from the Sheriff's Office reported a total of 179 SMI releases required a discharge plan in FY 2018-19. Of the 179 SMI releases, 178 was released with a discharge plan (a compliance rate of 99.44%). A brief mental status exam is completed at this time where the patient is asked if they are currently suicidal or homicidal. If there was a concern about the patient being released back into society, the watch commander would be notified and steps would be taken to ensure inmate was released into a safe environment.

There continues to be a focus on seeing the SMI patients who are currently housed in the isolated housing units MJ FF, MJ A, AJ 2D, AJ3B. There are 2.8 FTE (Full-Time Equivalent) MH therapist assigned to the SMI caseloads. SMI MH therapists only focus is seeing their SMI caseload three times per week. Data from the Sheriff's Office reports an average compliance rating of 97.79% for the entire FY 2018-19. Two of the sessions are evidence-based therapeutic groups. Patients are invited to every group session, however, if they decline to attend, they are given curriculum that will be discussed that day. The goal is to engage with the patient, build a trusting relationship, and try to encourage them to come out of their cells and participate in the classrooms. Therapists see each SMI in isolation one time per week for an hour unless the patient requests to end the session earlier. Therapists are aware that if a patient is willing to talk to them at their cell that is seen as progress and not a refusal. The ultimate goal is to build that rapport with the patient and have them feel comfortable enough to come out and meet with the therapist and the psychiatrist out of the cell regularly.

There was 721 Safety Cell placements this fiscal year (a decrease from 1,105 from last year). All safety cell placements are followed up by Wellpath 24/7 crisis workers, to reinforce and ensure the safety of the patients. While in safety cells, patients are provided; Suicide Risk Assessment and Evaluations and Pre and Post safety cell checks (within 4 hours increments during they placement). Once released from the safety cell, sick calls are schedule to follow up with the patient at intervals of 24 hr, 3 day, 7 day and 30 day.

Wellpath is working closely with Behavioral Health Court and advocating for patients all of whom have been diagnosed with a mental health disorder as well as a substance abuse disorder. There is a lot of communication with the Conservators Office helping get patients removed from the jail and placed in treatment facilities with the assistance of Wellpaths Discharge Planner.

DEPARTMENT RECOMMENDATION(S):

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