

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title:	Metro Crisis Intervention Team [CIT]	Provider:	Kings View Behavioral Health
Program Description:	Mental Health Crisis Intervention services are provided to individuals within the Fresno Metropolitan Area (Metro), in collaboration with Law Enforcement Agencies (which includes City of Fresno Police Department, City of Clovis Police Department, and the Fresno County Sheriff's Office) and other first responders. These services are provided out in the field where client interaction with law enforcement and emergency services personnel typically occurs, and where crisis intervention services are most beneficial. Crisis intervention services are community-based and incorporate stigma reduction and prevention as produce of the placement staff in first responder scenarios.	MHP Work Plan:	1-Behavioral Health Integrated Access
Age Group Served 1:	ALL AGES	Dates Of Operation:	March 18, 2019 - Present
Age Group Served 2:		Reporting Period:	July 1, 2019 - June 30, 2020
Funding Source 1:	Prevention (MHSA)	Funding Source 3:	Early Intervention (MHSA)
Funding Source 2:	Medical FFP	Other Funding:	

FISCAL INFORMATION:

Program Budget	\$2,359,609.00	Program Actual	\$1,734,696.54
Amount:		Amount:	
Number of Unique Clients Served During Time Period:	2,240		
Number of Services Rendered During Time Period:	3,099		
Actual Cost Per Client:	\$774.42		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Other, please specify below
Contract Term:	12/11/18 – 6/30/21 with 2 additional optional 12-month extensions	For Other:	Crisis Intervention Mental Health Services
		Renewal Date:	June 30, 2023

Level of Care Information Age 18 & Over:**Level of Care Information Age 0- 17:**

The levels of care shown above do not apply. This program provides crisis intervention services along with short-term case management in order to link individuals to appropriate and effective mental health treatment services.

TARGET POPULATION INFORMATION:

Target Population: The target population consists of individuals within the Fresno metropolitan (metro) area as served by law enforcement agencies, including the City of Fresno Police Department, City of Clovis Police Department and Fresno County's Sheriff's Office, and other first responders. These services are provided out in the field where client interaction with law enforcement and other first responders typically occurs, and where crisis intervention services are most beneficial.

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 :

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

Cultural Competency

Community collaboration

Access to underserved communities

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

Kings View strives to work in collaboration with persons served to assure their safety at the appropriate level of psychosocial and physical support (i.e., continue living on the street, have the family provide support, voluntary admission to a crisis stabilization facility for further observation and evaluation, etc.). Kings View intends to assist persons served in achieving their definition of a happy, meaningful and productive life. If persons served describe a service or resource that Kings View can render or provide linkage to, then the clinician will advise persons served that we can assist if they would like after the clinician assures the person served is safe. If the person served or a family member invites Kings View staff to participate in their efforts to achieve their happy, meaningful and productive life, we do so in ways that build on what is already working for the individual. We are looking for and expecting to find the resiliency that is innate in everyone. We strive to amplify these characteristics or traits that occur in them during the crisis event and afterwards, whenever possible.

Community Collaboration

Continuing from above, Kings View will either provide requested services directly or link the person served to other persons or agencies that provide the support they are asking for. Community members and families are not turned away during or after a crisis event. Rather, Kings View considers ourselves the “right door for them to come to” bringing them to appropriate services that will assist them in achieving their goals. Kings View also works in collaboration with other agencies to identify and find community members and families who may be in crisis, ensure their safety and provide linkage to the appropriate services. Community collaborative partners include, but are not limited to: other Fresno County contracted providers, local law

enforcement agencies, private practice mental health providers, psychiatry services, and substance use disorder programs.

Cultural Competency

Cultural competency and diversity is an integral part of the Metro CIT Program as we ensure non-discriminatory and respectful services to clients we serve. Kings View cultural competency and diversity practices include: events targeting culturally diverse populations, providing language line and interpretation services, educating and training staff on various cultural diverse topics, and continuously recruiting staff members who represent a variety of cultural backgrounds and can communicate in cross-cultural situations.

Access to Underserved Communities

Individuals in lower socioeconomic status have been historically unserved and underserved with documented low levels of access and/or use of behavioral health services. Most often, these individuals are placed on a mental health hold, transported to a crisis stabilization facility, and released with a discharge plan that refers the person served to behavioral health services without providing a warm handoff. This creates multiple barriers for the person served, including provider selection, transportation, managing symptoms while awaiting the first appointment, overcoming the stigma of mental health treatment, insurance coverage, and being identified as a priority for services. These barriers have led to service delivery that has been coercive, traumatizing, demanding the person served to become asymptomatic of their substance use disorder (SUD) challenges before they can receive services or housing, removing them from their housing for having symptoms of their SUD and/or co-occurring issues, and being blamed for system deficiencies. Knowing this, Kings View Metro CIT staff work to

introduce, engage and to build ongoing participation of the persons served and their families in their own social/culturally-based wellness and recovery process and perspective. This occurs over time, it is episodic long-term and person centered. The dignity and respect of the person served and their family is valued, upheld and affirmed by Metro CIT staff. We use recovery-oriented COD focused crisis services that recognize functioning with symptoms is what everyone does and that is what we expect them to do also. This is separate from whether they are able to remain safe at this level of psychosocial and physical support. The person served will continue to evolve and tell us what they need and want in managing all their challenges.

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

To provide crisis staff evaluation and consultation services to law enforcement agencies in the Fresno/Clovis metropolitan areas, including Fresno County islands. These services shall be provided by interagency coordination between behavioral health and law enforcement to identify, triage, assess, and link or reconnect community members/families to behavioral health direct services and support. By doing this, we will mitigate unnecessary expenditures of law enforcement agencies' staff time, resources and funds. The Fiscal Year 19-20 Quality Workplan Summary was developed to track and report progress towards goals met and to assess performance for the identified indicators. Please see QWP attached.

DEPARTMENT RECOMMENDATION(S):

Kings View Metro CIT Program

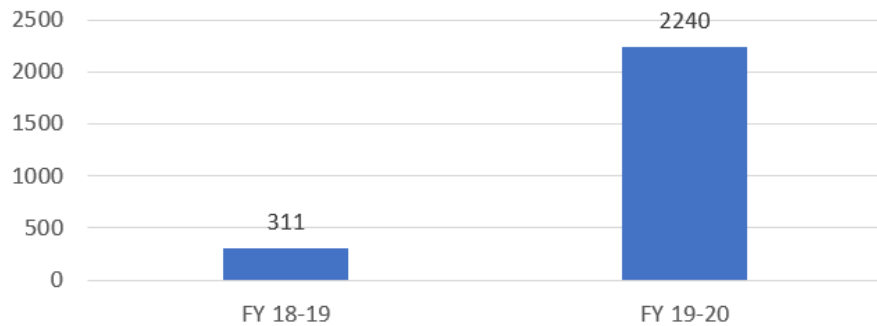
Quality Improvement (QI) Workplan Summary

FY 19-20 (July 2019 – June 2020)

I. Key Performance Indicators

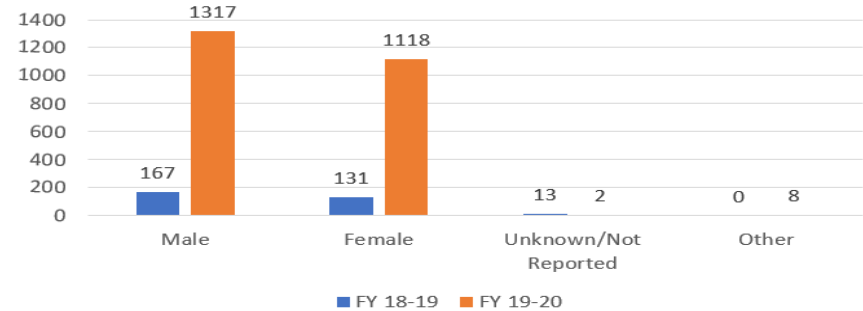
Key Performance Indicators & Demographics

Unique Client Contacts, N= 2240

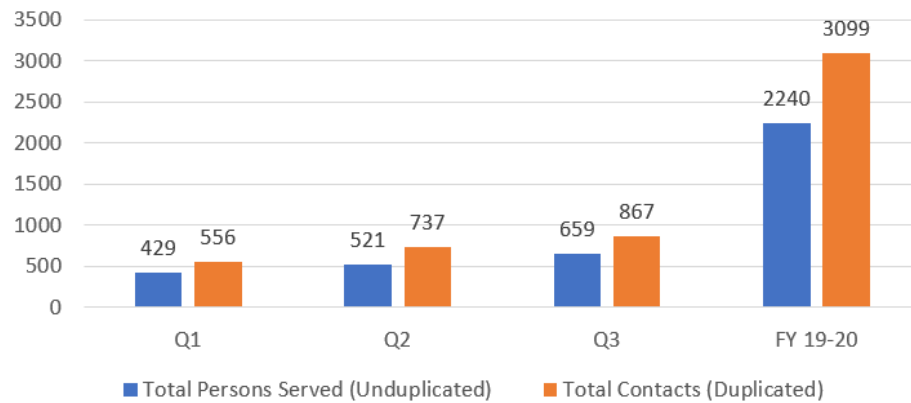


Number of Men Served, N = 1317

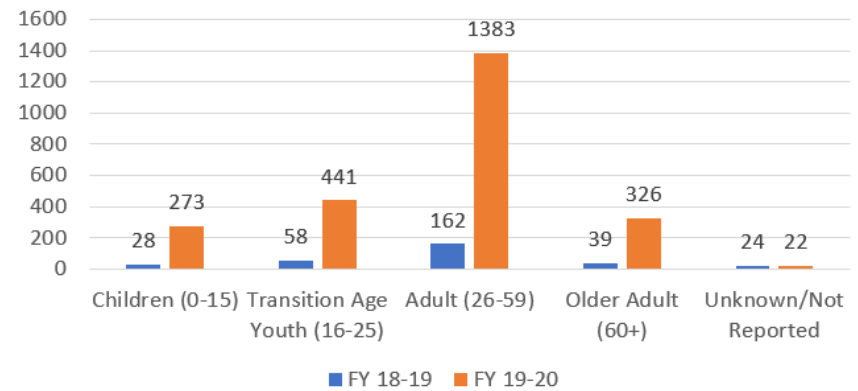
Women Served, N = 1118



Total Client Contacts, N = 3099



Age Group

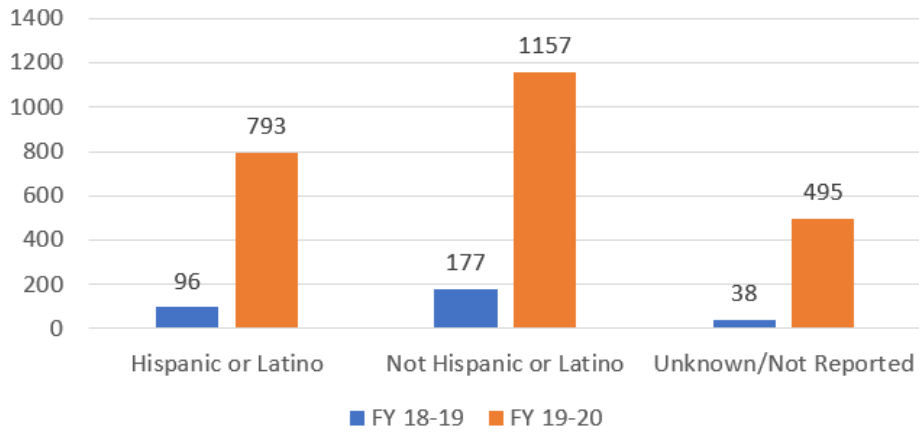


Data Source: CIT Metro Client Tracking Log

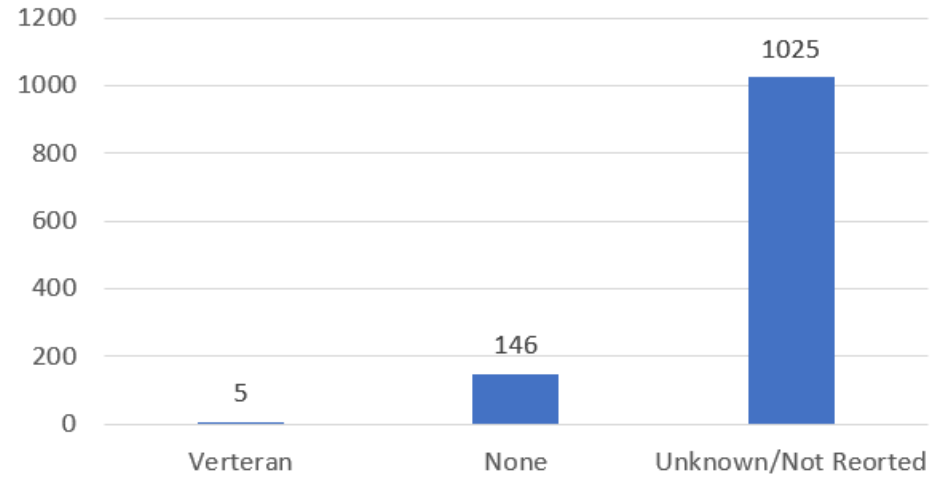
Data Source: CIT Metro Client Tracking Log

Key Performance Indicators & Demographics

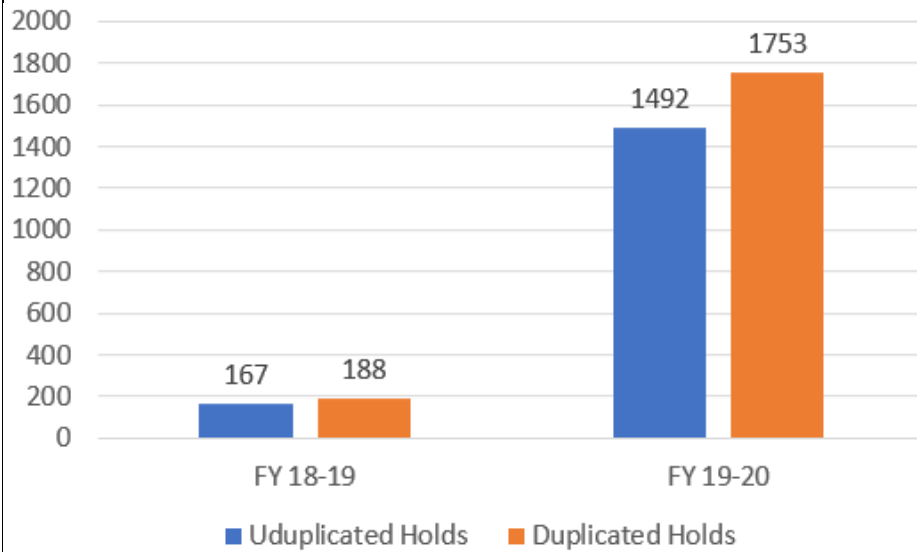
Ethnicity



Veteran Status

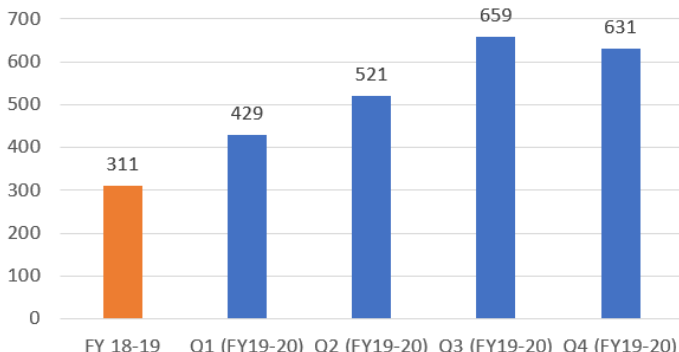
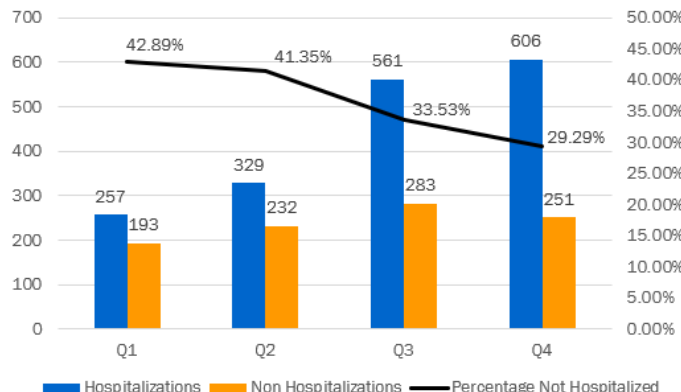


Hospitalizations



Data Source: Rural Triage Client Tracking Log

II. Program Outcome Measures & Goals

Indicators	Goals	Domain	Activities	Performance Measures																				
2.1 Service Access- Increase in Services Provided	Increase in Total number of Services Provided to Clients Year 1 = 60% Increase Year 2 = 25% Increase Year 3 = 15% Increase	Access	Collaborating and co-locating with additional police departments to include Fresno PD, Clovis PD; providing additional training to staff on linkages and case management. Additional staff will be hired to support program growth and high call volume.	Increase in access to services for Clients; FY 19-20, N= (560 - 311)/311, 80.06%. Target Goal Meet  <table><caption>Access to Services Data</caption><thead><tr><th>Period</th><th>Value</th></tr></thead><tbody><tr><td>FY 18-19</td><td>311</td></tr><tr><td>Q1 (FY19-20)</td><td>429</td></tr><tr><td>Q2 (FY19-20)</td><td>521</td></tr><tr><td>Q3 (FY19-20)</td><td>659</td></tr><tr><td>Q4 (FY19-20)</td><td>631</td></tr></tbody></table> Data Source: Metro Inventory Client Assessment List Log + Avatar	Period	Value	FY 18-19	311	Q1 (FY19-20)	429	Q2 (FY19-20)	521	Q3 (FY19-20)	659	Q4 (FY19-20)	631								
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2.2 Psychiatric Holds (5150) – Reduction in Hospitalizations	40% of Crisis assessments will result in a safety plan/ non-hospitalization	Effectiveness	Crisis co-responders received training in Safety Planning and Self Harm Reduction. Crisis co-responders will intervene and deescalate in order to safety plan with the clients.	Percentage of Crisis Assessments that resulted in a Safety Plan/ Non-Hospitalization; FY19-20, N= 959/2712, 35.36%. Target Goal Not Met.  <table><caption>Crisis Assessment Results Data</caption><thead><tr><th>Quarter</th><th>Hospitalizations</th><th>Non Hospitalizations</th><th>Percentage Not Hospitalized</th></tr></thead><tbody><tr><td>Q1</td><td>257</td><td>193</td><td>42.89%</td></tr><tr><td>Q2</td><td>329</td><td>232</td><td>41.35%</td></tr><tr><td>Q3</td><td>561</td><td>283</td><td>33.53%</td></tr><tr><td>Q4</td><td>606</td><td>251</td><td>29.29%</td></tr></tbody></table>	Quarter	Hospitalizations	Non Hospitalizations	Percentage Not Hospitalized	Q1	257	193	42.89%	Q2	329	232	41.35%	Q3	561	283	33.53%	Q4	606	251	29.29%
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Indicators	Goals	Domain	Activities	Performance Measures												
				Data Source: Metro Inventory Client Assessment List Log												
2.3 Stakeholder Satisfaction – Services Provided	80% of Stakeholders (Law Enforcement) reported a positive score (Strongly Agree + Agree) that services provided were useful, reliable and of high quality	Satisfaction and Feedback	Distribute and Collect Stakeholder Satisfaction Surveys. Analyze data to assess performance and identify areas for program improvement.	<p>Percentage of stakeholders who responded “Agree” or “Strongly Agree” that services were useful, reliable, and of high quality.</p> <p>N= 85/91, 93.41% Target Met</p> <table><thead><tr><th>Response Category</th><th>Percentage</th></tr></thead><tbody><tr><td>Strongly agree</td><td>89.01%</td></tr><tr><td>Agree</td><td>4.40%</td></tr><tr><td>Neither agree nor disagree</td><td>2.20%</td></tr><tr><td>Disagree</td><td>2.20%</td></tr><tr><td>Strongly disagree</td><td>2.20%</td></tr></tbody></table> <p>Data Source: Stakeholder Survey</p>	Response Category	Percentage	Strongly agree	89.01%	Agree	4.40%	Neither agree nor disagree	2.20%	Disagree	2.20%	Strongly disagree	2.20%
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Agree	4.40%															
Neither agree nor disagree	2.20%															
Disagree	2.20%															
Strongly disagree	2.20%															
2.4 Stakeholder Satisfaction – Recommend Crisis Intervention Team Clinician	80% of stakeholders who reported a positive score (Strongly Agree + Agree) they would recommend Kings View Crisis Intervention Team Clinician for future MH related calls.	Satisfaction and Feedback	Distribute and Collect Stakeholder Satisfaction Surveys. Analyze data to assess performance and identify areas for program improvement.	<p>Percentage of stakeholders who responded “Agree” or “Strongly Agree” they would recommend Kings View Crisis Intervention Team Clinician for future MH related calls.</p> <p>N= 84/91, 92.31%, Target Met</p> <table><thead><tr><th>Response Category</th><th>Percentage</th></tr></thead><tbody><tr><td>Strongly agree</td><td>90.11%</td></tr><tr><td>Agree</td><td>2.20%</td></tr><tr><td>Neither agree nor disagree</td><td>2.20%</td></tr><tr><td>Disagree</td><td>3.30%</td></tr><tr><td>Strongly disagree</td><td>2.20%</td></tr></tbody></table>	Response Category	Percentage	Strongly agree	90.11%	Agree	2.20%	Neither agree nor disagree	2.20%	Disagree	3.30%	Strongly disagree	2.20%
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2.5 Timely Service Delivery	Ensure crisis intervention calls are provided timely by staff not to exceed an average of 20 minutes.	Efficiency	Track and report number of services provided and response times.	<p>Crisis Intervention Team Staff Average Response Times: N = 3,131 Responses, Average Response Time = 19.05 Minutes. Target Goal Met</p>  <table><thead><tr><th>Month</th><th>Average of Minutes</th><th>Number of Responses</th></tr></thead><tbody><tr><td>Jul</td><td>18.93</td><td>122</td></tr><tr><td>Aug</td><td>18.99</td><td>161</td></tr><tr><td>Sep</td><td>18.62</td><td>158</td></tr><tr><td>Oct</td><td>18.56</td><td>189</td></tr><tr><td>Nov</td><td>19.95</td><td>194</td></tr><tr><td>Dec</td><td>19.94</td><td>293</td></tr><tr><td>Jan</td><td>20.25</td><td>332</td></tr><tr><td>Feb</td><td>18.80</td><td>370</td></tr><tr><td>Mar</td><td>20.39</td><td>317</td></tr><tr><td>Apr</td><td>18.78</td><td>325</td></tr><tr><td>May</td><td>17.20</td><td>371</td></tr><tr><td>Jun</td><td>18.32</td><td>299</td></tr></tbody></table> <p>Data Source: Fresno Police Department Dispatch Log</p>	Month	Average of Minutes	Number of Responses	Jul	18.93	122	Aug	18.99	161	Sep	18.62	158	Oct	18.56	189	Nov	19.95	194	Dec	19.94	293	Jan	20.25	332	Feb	18.80	370	Mar	20.39	317	Apr	18.78	325	May	17.20	371	Jun	18.32	299
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2.6 Linkages-Linkage Consultation for Non-Hospitalizations	Provide Linkage information and consultation services to 90% of clients that are non-hospitalized	Access	<p>All clients receive Linkage Consultation and information from the Metro Crisis Intervention Team Clinician.</p> <p>Information provided includes the Kings View Metro Program, Suicide Prevention Hotline and Department of</p>	<p>Number of Non-Hospitalized Clients provided Consultation and Linkage to Services: Q2, Q3, N: 520/534 = 97.38% Target Goal Met Note: (Already Linked +Yes + Declined +NA)/Total Non-Hospitalizations</p>  <table><thead><tr><th>Category</th><th>Count</th></tr></thead><tbody><tr><td>Already Linked</td><td>181</td></tr><tr><td>Yes</td><td>99</td></tr><tr><td>Declined</td><td>189</td></tr><tr><td>NA</td><td>51</td></tr></tbody></table>	Category	Count	Already Linked	181	Yes	99	Declined	189	NA	51																													
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Kings View Metro CIT

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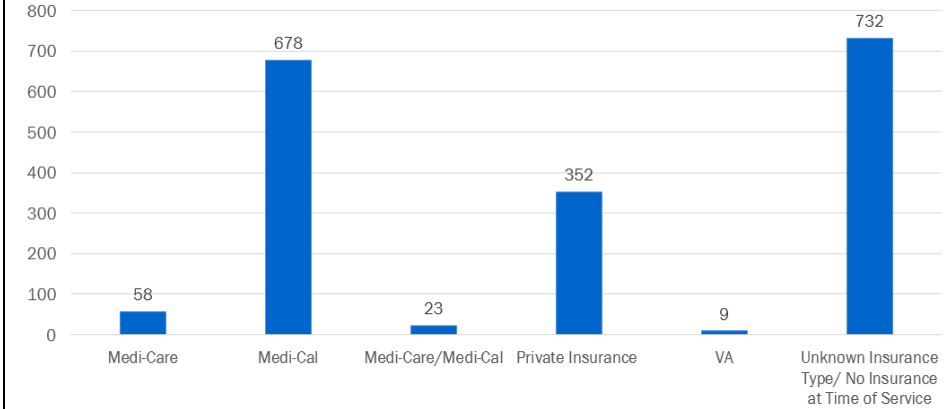
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Indicators	Goals	Domain	Activities	Performance Measures														
			Behavioral Health Care services.															
2.7 Crisis Services are accessible regardless of clients ability to pay	Ensure Crisis Services are available and provided to clients regardless of ability to pay.	Access to Services	Report Payor Source and number of clients enrolled in Medi-Cal as a results of our service and Linkage. Clinicians are documenting billing and entering data into Avatar.	<div><div>Data Source: Metro CIT Engagement Referral Log</div><div>Number of Crisis Services Provided by to client with unknown payer source at time of service; N: 732/1852 = 39.52%. Target Goal Met</div><div><div>Services Provided by Payer</div><table><thead><tr><th>Payer Type</th><th>Number of Services</th></tr></thead><tbody><tr><td>Medi-Care</td><td>58</td></tr><tr><td>Medi-Cal</td><td>678</td></tr><tr><td>Medi-Care/Medi-Cal</td><td>23</td></tr><tr><td>Private Insurance</td><td>352</td></tr><tr><td>VA</td><td>9</td></tr><tr><td>Unknown Insurance Type/ No Insurance at Time of Service</td><td>732</td></tr></tbody></table></div><div>Data Source: Metro CIT Engagement Referral Log</div></div>	Payer Type	Number of Services	Medi-Care	58	Medi-Cal	678	Medi-Care/Medi-Cal	23	Private Insurance	352	VA	9	Unknown Insurance Type/ No Insurance at Time of Service	732
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