

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title:	AB109 Outpatient Mental Health and Substance Use Disorder Services (First Street Center Outpatient)	Provider:	Turning Point of Central California, Inc.
Program Description:	The First Street Center Outpatient program provides outpatient based substance use disorder (SUD) treatment services and treatment for mild to moderate co-occurring mental health needs. These services are provided in collaboration with the Fresno County Probation Department. Services attempt to focus on individual strengths and abilities to successfully re-enter and gain healthy independence in the community. The programs goals are to reduce recidivism, to reduce substance abuse, to reduce psychiatric hospitalizations, to reduce homelessness, to increase level of community functioning, and to increase education and employment participation.	MHP Work Plan:	4-Behavioral health clinical care
Age Group Served 1:	ADULT	Dates Of Operation:	May 2012 - Current
Age Group Served 2:		Reporting Period:	July 1, 2019 - June 30, 2020
Funding Source 1:	Realignment	Funding Source 3:	Com Services & Supports (MHSA)
Funding Source 2:	Medical FFP	Other Funding:	AB 109 Realignment

FISCAL INFORMATION:

Program Budget Amount:	\$2,427,204.00	Program Actual Amount:	\$1,791,227.35
Number of Unique Individuals Served During Time Period:	Total=945 (SUD= 635, MH= 310)		
Number of Services Rendered During Time Period:	Total= 11,942 (SUD=7,674, MH=4,268)		
Actual Cost Per Individual:	SUD=\$1,893.87, MH=\$1,898.77		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Outpatient
Contract Term:	7/1/2017 – 6/30/20, plus 2 optional 12-month extensions	For Other:	
		Renewal Date:	June 30, 2022

Level of Care Information Age 18 & Over: Enhanced Outpatient Treatment (caseload 1:40)

Level of Care Information Age 0- 17:

TARGET POPULATION INFORMATION:

Target Population: The First Street Center Outpatient program provides substance use and mental health treatment services to adults on Post Release Community Probation Supervision (AB 109). The program serves adults living with substance use disorders and/or mild to moderate mental health symptoms referred by the Probation Department.

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 individuals 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 individuals and families are seamless. Individuals 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

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

Please describe how the selected concept (s) embedded :

Each participant is treated individually with a focus on person- centered goals and strengths. A treatment plan is developed in collaboration with each participant and always includes personal goals in their voice. Participants are given the option to include support persons or family members in the development of the treatment plan. First Street Center staff encourage and promote the inclusion of family and support persons as part of the treatment

Access to underserved communities

Integrated service experiences

team to enhance treatment interventions and outcomes. The treatment team attempts to offer a variety of options for treatment, rehabilitation, and support. Services are flexible and are provided with the individual needs of participants in mind. The program provides advocacy and helps develop connections with community partners. Collaborative relationships have been developed and maintained with several community agencies, treatment providers, law enforcement, probation, and local governments with the goal of continuity of care and optimal individual outcomes. Program services focus on meeting the needs of the whole-person and ensure physical health, mental health, and substance abuse is considered and integrated into the treatment plan. Additionally, program nursing staff provide routine monitoring of vitals, medication side effects, and health education.

PROGRAM OUTCOME & GOALS

- Must include each of these areas/domains: (1) Effectiveness, (2) Efficiency, (3) Access, (4) Satisfaction & Feedback Of Persons Served & Stakeholder

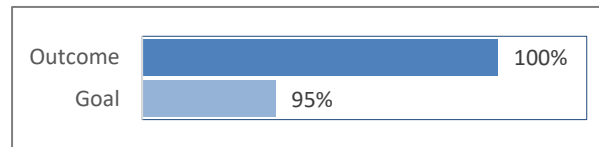
- Include the following components for documenting each goal: (1) Indicator, (2) Who Applied, (3) Time of Measure, (4) Data Source, (5) Target Goal Expectancy

1. Effectiveness-

a. Treatment Objectives/Achievements

- i. Objective: Individuals who complete substance use disorder treatment will complete a minimum of 75% of treatment plan goals.
- ii. Indicator: Percentage of individuals that completed treatment and completed 75% or more of their treatment plan goals.
- iii. Who Applied: A sample of FSC-OP individuals served by the program.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar/Accucare EHR
- vi. Target Goal Expectancy: A minimum of 95% of individuals who complete treatment will complete at least 75% of treatment plan goals.
- vii. Outcome: Individuals who completed treatment completed an average of 88% of treatment plan goals. 100% of individuals that completed treatment, completed at least 75% of their treatment plan goals.

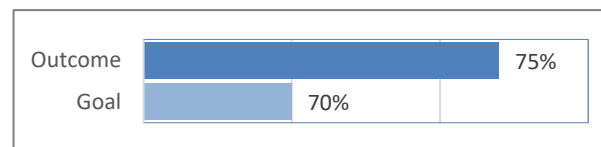
Period	# of Individuals	Average % of Tx plan goals completed	% of individuals that completed 75% of Tx plan goals
18-19	25	87%	100%
19-20	25	88%	100%



b. Successful Completion

- i. Objective: To have the majority of individuals successfully complete treatment or leave with satisfactory progress.
- ii. Indicator: Percentage of individuals that complete treatment or leave with satisfactory progress.
- iii. Who Applied: FSC-OP individuals that participated in outpatient substance use disorder services provided by the program.
- iv. Time of Measure: FY 19-20
- v. Data Source: Accucare EHR/Discharge Summaries and Post treatment surveys
- vi. Target Goal Expectancy: A minimum of 70% of individuals served will successfully complete treatment or leave before completion with satisfactory progress.
- vii. Outcome: 75% of individuals served successfully completed treatment or left before completion with satisfactory progress.

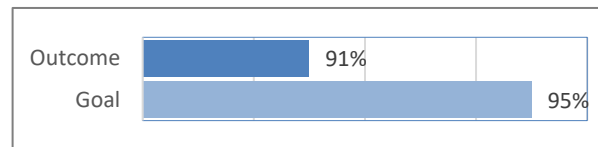
Period	# of Individuals	% of Satisfactory Progress	% Successful Completion	Combined Percentage
18-19	638	18%	59%	77%
19-20	486	54%	21%	75%



c. Psychiatric Hospitalizations/Incarcerations

- i. Objective: Individuals receiving mental health treatment will evidence no psychiatric hospitalizations or incarcerations.
- ii. Indicator: Percentage of individuals that experience zero psychiatric hospitalizations or incarcerations.
- iii. Who Applied: FSC-OP individuals that received mental health treatment services.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar EHR/Accucare EHR
- vi. Target Goal Expectancy: 95% of individuals receiving mental health and co-occurring treatment will experience zero psychiatric hospitalizations or incarcerations.
- vii. Outcome: 91% of individuals receiving mental health treatment experienced no episodes of psychiatric hospitalizations or incarcerations during this evaluation period.

Period	Individual Sample	Episodes of Hospitalizations or Incarcerations	Percentage
18-19	26	6	98%
19-20	28	3	91%

**d. Reaching Recovery: Consumer Recovery Measure and Recovery Marker Inventory**

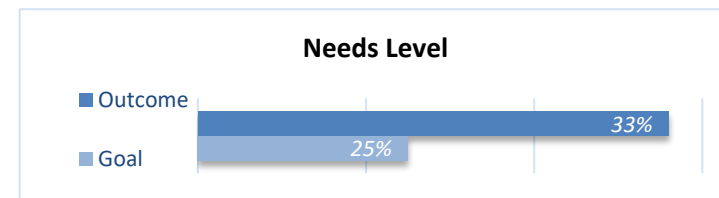
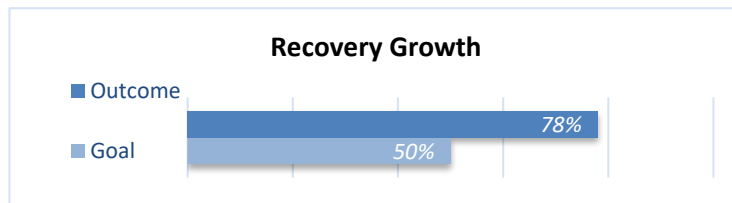
The program implemented the use of Reaching and Recovery tools in October of 2017. Reaching Recovery is a tool that was developed by the Mental Health Center of Denver; its major focus is tracking change across multiple domains of wellness. With Reaching Recovery in place, the program began to utilize several tools designed to measure recovery individuals receiving mental health services: the Recovery Needs Level Marker, Consumer Recovery Measure, and Recovery Marker Inventory.

Recovery Needs Level (RNL)

- i. Objective: To ensure the appropriate level of service intensity at a individual's stage of recovery; to move individual's towards increased levels of functioning; and to transition individual's to the least restrictive level of care.

- ii. Indicator: Recovery Needs Level (RNL) records the status of observed needs across 17 domains. RNL scores are compared at 6 month intervals to show trends of recovery through time. Reduced scores indicate positive recovery growth and movement towards reduced levels of service.
- iii. Who Applied: A sample of FSC-OP individuals that received mental health services for a minimum of one year.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar Electronic Health Record
- vi. Target Goal Expectancy: To have a minimum of 50% of individuals that participated in services achieve positive recovery growth and a minimum of 25% transition to lower levels of service.
- vii. Outcome: 78% of the program population trended towards positive recovery growth and 33% transitioned towards reduced levels of care.

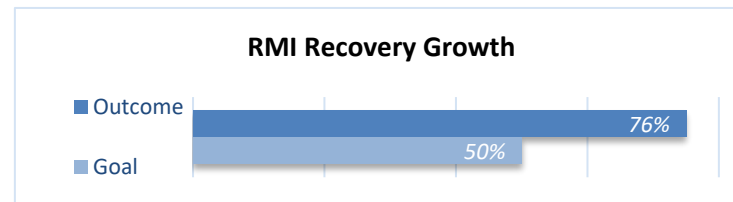
Period	Individuals Scored	Positive Recovery Growth	Needs Level Reduced
18-19	16	56%	56%
19-20	18	78%	33%



Recovery Marker Inventory (RMI)

- i. Objective: To provide a quarterly practitioner rating of a individual's progress in recovery areas that tend to correlate with an individual's recovery.
- ii. Indicator: Recovery Marker Inventory (RMI) A practitioner's rating of the individual's recovery on 8 objective factors associated with recovery: employment, education, active growth, level of symptom management, participation in services, housing. RMI scores are compared at quarterly intervals to show trends of recovery through time. Increased scores indicate positive recovery growth.
- iii. Who Applied: A sample of FSC-OP individuals that received mental health services for a minimum of one year.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar Electronic Health Record
- vi. Target Goal Expectancy: To have a minimum of 50% of individuals that participated in services achieve positive RMI recovery growth trends.
- vii. Outcome: 76% of the program population trended towards positive recovery growth.

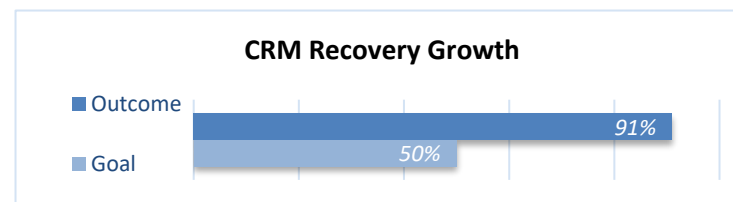
Period	Individuals Scored	Positive Recovery Growth
18-19	16	75%
19-20	21	76%



Consumer Recovery Measure (CRM)

- i. **Objective:** To measure the individual's perception of their recovery.
- ii. **Indicator:** Consumer Recovery Measure (CRM) A quarterly rating of a individual's perception of recovery across 5 dimensions: hope, symptom management, personal sense of safety, active growth orientation, satisfaction with social networks. Increased scores indicate positive recovery growth from the individual's perspective.
- iii. **Who Applied:** A sample of FSC-OP individuals that received mental health services for a minimum of one year.
- iv. **Time of Measure:** FY 19-20
- v. **Data Source:** Avatar Electronic Health Record
- vi. **Target Goal Expectancy:** To have a minimum of 50% of the individuals participating in services perceive positive recovery growth trends.
- vii. **Outcome:** 91% of individuals perceived having positive recovery growth.

Period	Individuals Scored	Perceived Recovery Growth
18-19	16	68%
19-20	11	91%



2. Efficiency-**a. Cost per Individual**

Costs include all staffing and overhead costs associated with operation of the program.

- i. **Objective:** To efficiently use resources and maintain or minimize cost per individual.
- ii. **Indicator:** Total program costs compared to the number of unique FSC-OP individuals served.
- iii. **Who Applied:** FSC-OP individuals served by the program.
- iv. **Time of Measure:** FY 19-20
- v. **Data Source:** Avatar and Financial Records
- vi. **Target Goal Expectancy:** To keep within departmental budgeted costs for the program.
- vii. **Outcome:** Compared to the previous fiscal year, cost per individual for FY 19-20 remained about the same for SUD services, however total program costs for SUD services was reduced by 1.4%. The average cost per individual for mental health services was increased by 17% and the total costs for mental health services was increased by 15%, compared to the previous fiscal year. The increase in costs per individual is attributed to fewer individuals served compared to the previous year. The program successfully operated within budgeted costs during the evaluation period.

Period	Level	Individuals Served	Average Cost per Individual	Total Program Cost
18-19	SUD	654	\$1,864.84	\$1,219,609.37
18-19	MH	315	\$1,612.76	\$508,018.34
19-20	SUD	635	\$1,893.87	\$1,202,609.89
19-20	MH	310	\$1,898.77	\$588,114.16

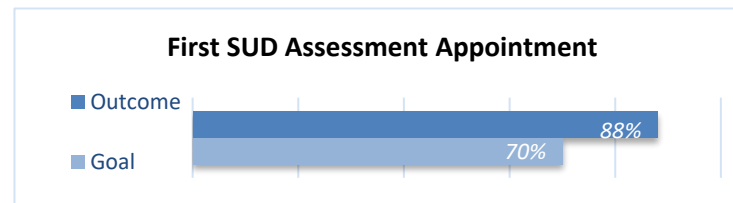
3. Access-**a. Length of time from SUD Screening to First Assessment Appointment Offered**

The FSC program receives referrals from the Department of Probation. The goal of the program is to act promptly for each referral.

- i. **Objective:** To provide timely service for individuals requesting SUD treatment services.
- ii. **Indicator:** Percentage of individuals offered an SUD assessment appointment within 10 business days of their SUD screening.
- iii. **Who Applied:** A sample of individuals referred to the program.
- iv. **Time of Measure:** FY 19-20
- v. **Data Source:** Avatar/Accucare EHR

- vi. Target Goal Expectancy: 70% of referred individuals will be offered their first SUD assessment appointment within 10 business days of their SUD screening.
- vii. Outcome: The average wait time from SUD screening to the first SUD assessment appointment offered was 7 calendar days. 88% of individuals were offered an SUD assessment appointment within 10 business days.

Period	Wait Length Average	% of individuals offered SUD assessment date within 10 days
18-19	7 days	90%
19-20	7 days	88%

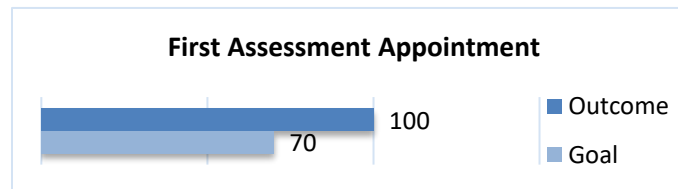


b. Length of time from mental health screening to the first offered mental health assessment appointment

The FSC program receives referrals from the Department of Probation. The goal of the program is to act promptly for each referral.

- i. Objective: To provide timely service for individuals requesting mental health care.
- ii. Indicator: Percentage of individuals offered their first mental health assessment appointment within 10 business days of initial screening.
- iii. Who Applied: A sample of individuals referred to the program.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar EHR
- vi. Target Goal Expectancy: 70% of individuals will be offered an appointment for their first mental health assessment within 10 business days of initial screening.
- vii. Outcome: The average wait time from initial screening to the first mental health assessment appointment offered was 6 days. 100% of individuals were offered a mental health assessment appointment within 10 days of the initial screening appointment. Wait length average increased in fourth quarter due to mitigating factors associated with the COVID 19 Health Crisis.

Period	Wait Length Average	Percentage
18-19	6 days	91%
19-20	10 days	100%

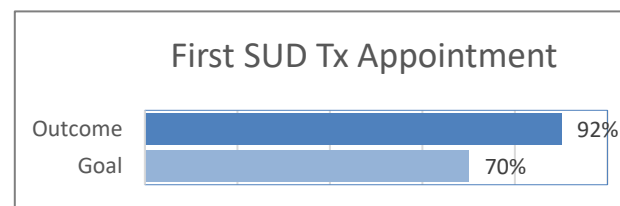


c. Length of time from SUD Assessment to first treatment appointment offered

The FSC program receives referrals from the Department of Probation. The goal of the program is to act promptly for each referral.

- i. Objective: To provide timely service for participants referred for treatment services.
- ii. Indicator: Percentage of individuals offered their first SUD treatment appointment within 10 business days of their assessment date.
- iii. Who Applied: A sample of individuals referred to the program.
- iv. Time of Measure: FY 19-20
- v. Data Source: Accucare EHR
- vi. Target Goal Expectancy: A minimum of 70% of individuals will be offered their first SUD treatment appointment within 10 business days of their assessment date.
- vii. Outcome: The average wait time from assessment to first treatment appointment offered was 7 days. 92% of individuals were offered a treatment appointment within 10 days of their assessment date.

Period	Average Wait Time	% of individuals offered 1 st treatment appoint. within 10 days
18-19	7 days	90%
19-20	7 days	92%

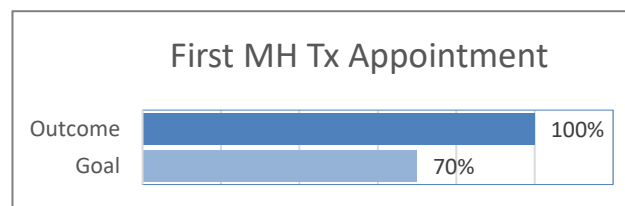


d. Length of time from mental health assessment to first treatment appointment offered

The FSC program receives referrals from the Department of Probation. The goal of the program is to act promptly for each referral.

- i. Objective: To provide timely service for participants referred for treatment services.
- ii. Indicator: Percentage of individuals offered their first mental health treatment appointment within 10 business days of their assessment date.
- iii. Who Applied: A sample of individuals referred to the program.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar EHR
- vi. Target Goal Expectancy: A minimum of 70% of individuals will be offered their first treatment appointment within 10 business days of their assessment.
- vii. Outcome: The average wait time from assessment date to the first treatment appointment offered was 7 days. 100% of individuals were offered a treatment appointment within 10 days of their assessment date.

Period	Average Wait Time	% of individuals offered 1 st treatment appoint. within 10 days
18-19	5 days	100%
19-20	7 days	100%

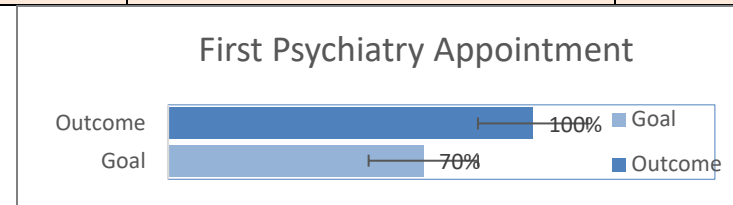
**e. Length of time from mental health assessment to the first psychiatry appointment date offered**

The FSC program receives referrals from the Department of Probation. The goal of the program is to act promptly for each referral.

- i. Objective: To provide timely service for participants referred for treatment services.
- ii. Indicator: Percentage of individuals offered their first psychiatry appointment within 15 business days of their assessment date.
- iii. Who Applied: A sample of individuals referred to the program.
- iv. Time of Measure: FY 19-20
- v. Data Source: Avatar EHR

- vi. Target Goal Expectancy: A minimum of 70% of individuals will be offered their first psychiatry appointment within 15 business days of their assessment date.
- vii. Outcome: The average wait time from assessment to the first psychiatry appointment date offered was 12 days. 100% of individuals were offered their first psychiatry appointment within 15 days of the assessment date.

Period	Average Wait Time	% of individuals offered 1 st treatment appoint. within 15 days
18-19	7 days	90%
19-20	12 days	100%



4. Satisfaction & Feedback of Persons Served & Stakeholders-

a. Consumer Perception Survey

Consumer Perception Surveys (CPS) are conducted every six months over a one week period. Beneficiaries of the MHP are encouraged to participate in filling out the CPS surveys which are available to consumers and family members at County and contracted provider organizations.

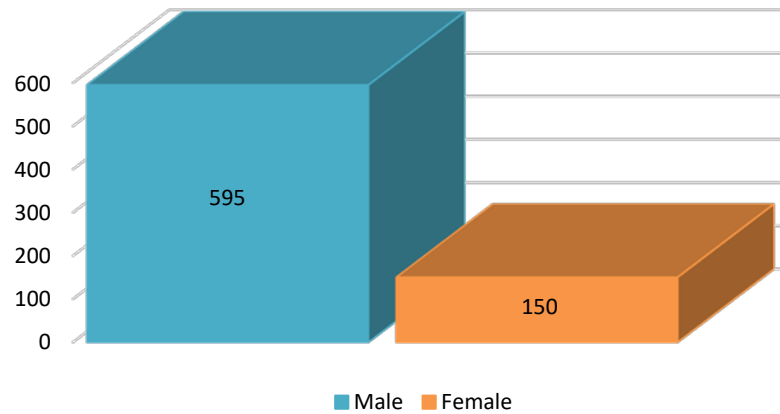
- i. Objective: To gauge satisfaction of individuals and collect data for service planning and quality improvement.
- ii. Indicator: Average percent of individuals who complete the survey and response was 'Agree' or 'Strongly Agree' for the following domains: General Satisfaction, Perception of Access, Perception of Quality and Appropriateness, Perception of Treatment Participation, Perception of Outcomes of Services, Perception of Functioning, and Perception of Social Connectedness.
- iii. Who Applied: Individuals who completed the survey in October of 2019.
- iv. Time of Measure: Surveys were completed in October of 2019.
- v. Data Source: Consumer Perception Survey data
- vi. Target Goal Expectancy: The program would like to see a majority of individuals satisfied for each domain.

[vii.](#) Outcome: Majority of participants rated themselves satisfied in all five domains. **Access**/Convenient Time, **Quality**/Choose My Treatment Goals, **Care Coordination**/Work With Physical Health Providers, **Outcome**/Better Able To Do Things, **General Satisfaction**/Overall Satisfied With Services, indicates that more than 88% of individuals surveyed were satisfied.

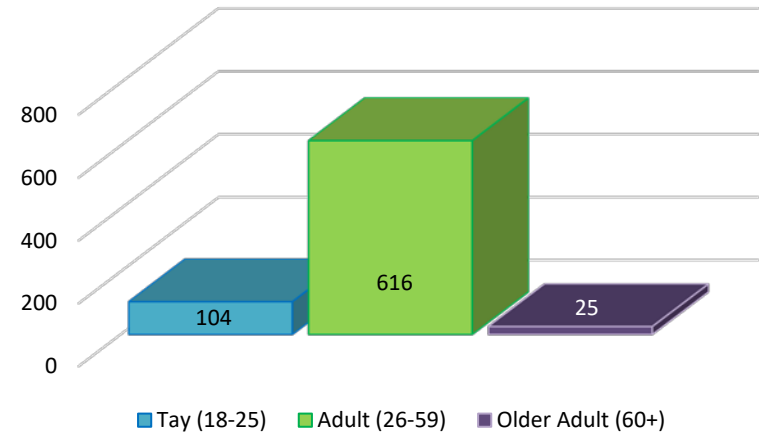
Domains	October 2019
Access/Convenient Time	90%
Quality/Chose My Treatment Goals	86%
Care Coordination/Work With My Physical Health Provider	90%
Outcome/Better Able To Do Things	77%
General Satisfaction/Overall Satisfied With Services	88%

Program Demographics

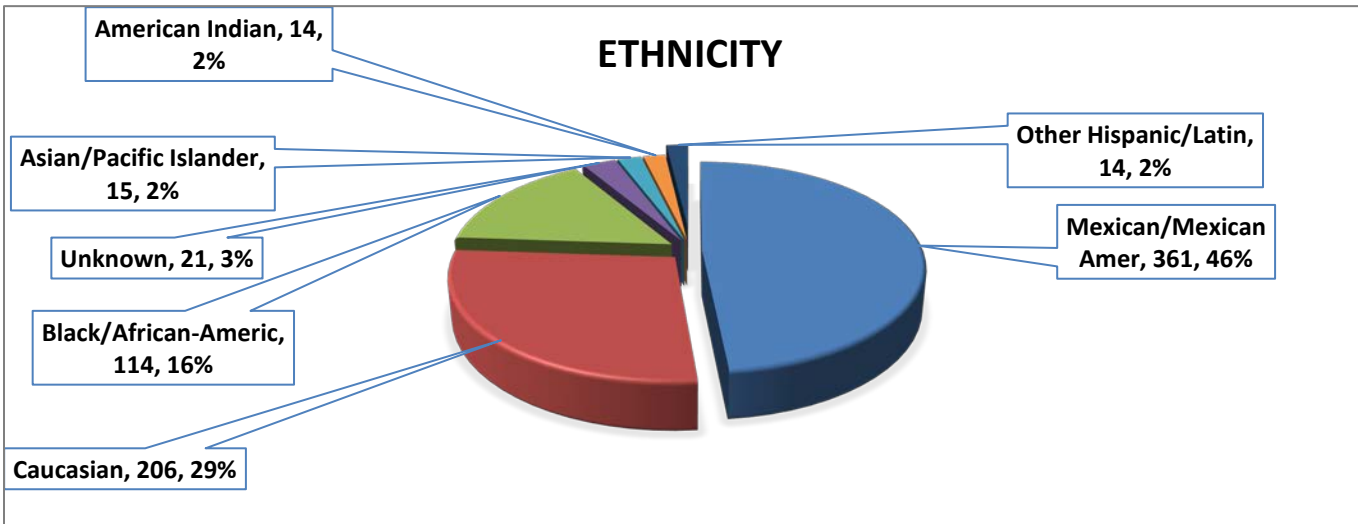
Gender



Age



ETHNICITY



DEPARTMENT RECOMMENDATION(S):