### FRESNO COUNTY MENTAL HEALTH PLAN

## **OUTCOMES REPORT- Attachment A**

**PROGRAM INFORMATION:** 

Program Title: Consumer/Family Advocacy Services

(C/FAS)

Program Description: The provision of community-based

behavioral health support and stigma

reduction educational services.

Age Group Served 1: ALL AGES

**Age Group Served 2:** Choose an item.

Funding Source 1: Com Services & Supports (MHSA)

Funding Source 2: Choose an item.

Provider: Centro La Familia Advocacy Services/Fresno

Interdenominational Refugee Ministries

MHP Work Plan: 2-Wellness, recovery, and resiliency support

Choose an item.

Dates Of Operation: January 1, 2017 - current

Reporting Period: July 1, 2020 - June 30, 2021

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

Other Funding: Click here to enter text.

**FISCAL INFORMATION:** 

Program Budget Amount: \$113,568 Program Actual Amount: \$91,860

Number of Unique Clients Served During Time Period: 2,048 (Presentations); 4,096 (Outreach); 166 (through 37 Support groups); 995 (Calls);

722 (One-on-ones)

Number of Services Rendered During Time Period: 8,077

Actual Cost Per Client: \$12

**CONTRACT INFORMATION:** 

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

Contract Term: January 1, 2017 – June 30, 2019, with 3 For Other: Community Services and Supports (CSS)

optional 12-month terms.

Renewal Date: July 1, 2022

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

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

The Level of Care information above does not apply to this contracted program.

#### TARGET POPULATION INFORMATION:

**Target Population:** 

Unserved and underserved children/youth, transitional age youth, adults, and older adults and their families residing in rural and metropolitan areas of Fresno County who may be experiencing a first break in mental illness or experiencing early onset of a crisis.

#### **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

Access to underserved communities

Community collaboration

Integrated service experiences

### Please describe how the selected concept (s) embedded:

Centro La Familia Advocacy Services (CLFA) has the identified core concepts emedded in its services/program and is implemented during all contacts and supports provided to consumers and families.

1. Individual/Family Driven, Wellness/Recovery/Resiliency-Focused Services:

CLFA's service delivery includes its "full approach" method that focuses on eight approaches for service delivery to clients. The "full approach" was developed by CLFA to address an individual's need and promote wellness and it incorporates the following elements:

- 1. Access: address barriers such as culture, transportation, language, isolation and others and work to help family and persons serveds overcome them.
- 2. Cultural Values: acknowledge a family/persons' served unity, religious beliefs and privacy.
- 3. Respect: each family/persons' served decisions, cultural norms, gender roles, and reputation.

- 4. Trust/Consistency: create relationships based on trust and consistency.
- 5. Staffing: employ bilingual, bicultural staff that create safe and supportive environments.
- 6. Messenger: be a reliable/trusting messenger when assisting family/client in navigating services/networks.
- 7. Outreach: implement cultural/relevant tools for each client interaction.
- 8. Engagement: attend important events relevant to community and services.

All services are centered around the family/person served so that they can capitalize on their strengths and better cope with stressors. This helps them build resiliency and address areas of need so that they can recover and stay resiliency focused.

Access to Underserved Communities: Unserved and underserved communities are reached through CLFA's "roving advocacy" component. "Roving advocacy" is when staff travel to rural areas to meet with and serve indviduals and their families. The Consumer Family Advocates work to identify sites, dates and times of service delivery at a time convenient for the person served/family. To facilitate these additional services, CLFA collaborates with rural organizations that provide confidential office space for staff to work from, including health clinics, County Department satellite offices, rural police departments, churches, Fresno Housing Authority and senior centers.

When advocates conduct roving advocacy, they are fully equipped with internet-ready laptops, cell phones, and locked file boxes. This allows staff to complete note taking and report rendering in the field when information is fresh in their minds thereby reducing the time and cost of case management and improving the quality and accuracy of case file information.

**Cultural Competency:** CLFA receives monthly cultural awareness training from Dr. Juan Garcia, LMFT and Executive Director of Integral Community Solutions Institute. The trainings allow staff to increase their awareness on cultural approaches relevant to mental health

service delivery. Topics focus on Family/Familismo; Respect/Respeto; Close relationship/Personalismo; Proper social etiquette for ethnic populations; Cultural mental health stigma challenges; and Facilitation of support groups.

Additionally, CLFA & FIRM engage in cultural awareness trainings from other providers. These trainings include webinars and educational workshops that can help expand their understanding and knowledge of other community resources and professional skills that can better equip them to provide services to the homeless, veterans, LGBTQ+, etc.

**Community Collaboration:** CLFA and FIRM work together to provide mental health services to the community. Partners also have a large collaborative list of organizations that they utilize to reach clients with education and serices. The list includes Fresno County DSS, The City of Fresno, colleges and universities, Reading & Beyond, The Fresno Center, Jakara Movement, BHC, West Fresno Family Resource Center, and others.

Integrated Services Experiences: The program utilizes an integrated service approach that includes sustained contact over prolonged periods of time allowing individuals and families to build rapport and trust with staff as each individual and family seeks and receives services in their time of need. Partners then becomes a service provider they trust; working to provide linkages, and wraparound services. Wraparound services include CLFA and FIRM's internal programs such as access to public benefits, health insurance, immigration, parenting education, and others. A high referral rate is made to CLFA's Multi-Agency Access Program (MAP), that provides a single point entry for Fresno County residents to access linkage(s) to multiple behavioral, social and health services to promote their wellness.

#### **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

**Effectiveness:** Family Advocate Training and Peer to Peer Education

**Objective:** Consumer Family Advocates shall participate in Family Advocacy Trainings focusing on holistic, culturally sensitive mental health service delivery.

Indicator: Consumer Family Advocates will increase in knowledge of holistic, culturally sensitive mental health services delivery

Who applied: Consumer Family Advocates Time of Measure: Monthly/Quarterly

Data Source: Training Logs submitted monthly. Peer to Peer Records

Target Goal Expectancy: Family Advocacy trainings to be completed on a quarterly basis

**Outcome:** For this reporting period, partners CLFA and FIRM participated in training on cultural responsiveness and humility with the goal of expanding staff's capacity to provide culturally sensitive and linguistic services to unserved and underserved families/clients in Fresno County. The trainings focused on responding to family/client needs, suicide prevention, depression and the holiday seasons, cultural wealth model, understanding culture and holiday stress, ethnic awareness, johari's window. It total, **12** trainings were provided during the program's fiscal year.

The ongoing pandemic continued to play a part in family stressors and need for mental health support. Many families shared with staff the impact COVID brought on them such as isolation, lack of employment, increased financial hardships, educational e-learning, to name a few. Partners worked together to provide families with mental health resources, COVID-19 education, and other wraparound services. These challenges were shared during the monthly trainings (in confidential settings) and the trainer was able to provide guidance on how to continue to support families during difficult times and continued importance of self-care for staff.

As a result of this type of support and the trainings received, partners were able to increase staff's capacity in providing peer to peer education and linkage/referral services to families/clients in communities in Fresno County. Of the families/clients who received ongoing services, **64%** reported an increase in family support and awareness.

## > Efficiency: Family/Consumer Referral

Objective: Receive, log and provide advocacy services as initiated by calls to office.

**Indicator:** Family/Consumer support to assist in the navigation of system and to engage crisis/treatment services as needed to alleviate crisis escalation.

Who applied: Target population includes unserved and underserved in Fresno County.

Time of Measure: FY 2020-2021

Data Source: Monthly calls logs with deposition submitted

**Target Goal Expectancy:** 324 referrals for information about mental health.

**Outcome:** Partners provided mental health referrals (linkages) to persons served and families in the program. The goal was link these individuals to appropriate mental health services that would provide the support they needed and identify additional wraparound services they

would need such as public benefits, immigration, housing, etc. For this period, partners provided 324 referrals (linkages) to mental health and other wraparound services. The breakdown is as follows:

- 85 % Mental Health
- 30 % were linked to CLFA's wraparound services that included: Emergency Rental Assistance Program rental assistance for families impacted by COVID-19; COVID-19 education, testing and vaccination; domestic violence, sexual assault, and human trafficking intervention; health insurance and public benefit enrollment, Multi Agency Access Point (MAP) services; immigration; and others. Individuals were also linked to FIRM's services that included: COVID-19 education, testing and vaccination; Medi-cal enrollment & support services; advocacy assistance for short-term transitional housing; medical; PG&E assistance and others.

Additionally, partners received/placed a total of **995** calls/emails to/from individuals seeking support and assistance in the navigation of behavioral health services and engaged in crisis/treatment services as needed to alleviate crisis escalation.

- Of the calls/emails received, 96% of individuals received support in the navigation of behavioral health and crisis/treatment services and;
- Of the calls placed, **20**% of individuals received further assistance with mental health and wraparound services, such as mental health, housing, public benefit, and other community resources.

> Access: Support Group Facilitation

Objective: Increase consumer and family members' confidence, functioning and coping skills

Indicator: Consumer and family members show and/or self-report an increase in confidence, functioning and coping skills.

Who applied: Target population includes unserved and underserved in Fresno County.

Time of Measure: FY 2020-2021

**Data Source:** Observation and Feedback from Participants

Target Goal Expectancy: Consumers and family members express positive change to group leaders

**Outcome:** Partners facilitated a total of **37** support group meetings with a total of **166** participants. Persons served were reached in Fresno City and Fresno County particulary in 93706, 93722, 93703, Kerman and Mendota.

As a result of the pandemic, the meetings were held virtually to meet local and state helath and safety requirements. Staff facilitated the support groups via WebEx during timeframes accessible by participants. Prior to the virtual meetings, staff meet with each person served virtually (telephone or video chat) to gage their technology capability and ensure they could connect to the support groups. During the sessions, staff continuously emphasized the importance of self-care and confidentiality at the beginning of each meeting. The topics covered include Cultural Healing, Mindfulness, Self-esteem, Stress Management, Wellness, Mental Health, Depression, Anxiety, Communication, Stress and Parenting During These Times.

When the COVID-19 pandemic hit, CLFA modified its support group delivery by impelenting "virtual visits" and "virtual group sessions". These virtual activities replaced regular in person visits, and support groups because these in-person activities could no longer be held due to COVID-19. CLFA worked with persons served to assess technology capabilities and provided services on a platform that was accessible to them. These platforms included Whats App, Facebook Messenger, Zoom, Web Ex and video phone calls.

As with previous years, the groups were open to anyone in the community and included individuals who receive services from CLFA and FIRM's other programs. Partners provided community members a safe place where participants can openly discuss and engage in fellowship while doing hands-on activities that promote wellness. The virtual groups were held in confidiential office spaces with noise maker machines running outside of the office to obstruct noise flow.

Access: Presentations to target populations on various mental health disorders, targeting homeless, elderly, LGBTQ+ and parents of school age children

Objective: Educate and increase public awareness of impact of mental illness to family members and consumer to minimize stigma.

Indicator: Increase awareness and knowledge of mental health.

Who applied: Unserved and underserved in rural areas and non-English speaking communities

Time of Measure: FY 2020-2021

Data Source: Pre/post evaluation of participants, Monthly report of outreach activities

Target Goal Expectancy: 75% of participants will increase in awareness and knowledge of mental health

**Outcome:** Partners conducted educational presentations to community members in Fresno County specifically targeting non-English speaking individuals who are monolingual Spanish, Hmong and Lao. The educational trainings had an overall attendance of **1,964**. During these eduaitonal presentations, staff discussed topics such as: The Importance of Good Mental Health, Introduction to Mental Health Awareness Month, Stress, Wellness, and Maintaining Good Mental Health During Covid-19. The presentations were conducted at various sites and locations including: Virtual settings, Centro La Familia Victim Services Department Support Groups, Spanish Parent Support Group, Mendota Monthly Collaborative Meeting, Fresno State Spanish Support Group, Fresno Housing Authority, and West Fresno Family Resource Center Parent Support Group. The educational presentations promoted wellness and included a strong message of hope and recovery. Staff was able to raise awareness on the stigma that individuals and families in the community faced when accessing mental health services, including the fear of the unknown, perceptions of culture regarding mental health and treatment, and immigration.

COVID-19 shifted our service delivery approach and outreach methods. With the start of the pandemic and through the duration of this reporting period, CLFA adapted to providing ongoing services and support groups though virtual platforms such as WebEx and Zoom to ensure persons served continue to receive services in a safe, effective manner. CLFA never closed its doors during the beginning or height of the pandemic; staff came to the office and ensured that those who were unable to connect via phone or virtual means still had access to advocates during these trying times. This placed CLFA at the forefront of adaptability and creativity while keeping the client and staff safe and ensuring that, despite the added stressors of the pandemic, clients received the services they needed.

As an example, shortly after the onset of the pandemic, CLFA launched En Vivo con Centro La Familia, a series of live virtual chats in Spanish on a variety of topics via the Facebook Live platform. One of these sessions was hosted by CLFA Executive Director Margarita Rocha and Dr. Irán Barrera, focusing on mental health. This public event allowed for interactions with the community via a live Q&A session and Dr. Barrera answered dozens of questions from the community. The video garnered hundreds of views. Additionally, the content is still available on CLFA's

social media and can still be accessed by the community, as the information continues to be relevant. CLFA also expanded its social media outreach to ensure that it can continue to provide training and access to services.

Additionally, staff participated in outreach events and media activities to further educate community members on mental health. Outcomes of the activities are below:

- Outreach Events: 47 total events/4,307 individuals reached
- Outreach to Creek Fire Families, Food Distributions (weekly/monthly), COVID-19 education/testing/vaccine events, Fresno Housing Authority Virtual Presentation, Raisin City Drive Thru Food Distribution, Central High School, The Lighthouse, Orange Cove Drive Thru Food Distribution, Biola Community Food Drive Thru, Family Care Package Distributions
- During the program year, CLFA partnered with Fresno Metro Ministries Food to Share program to receive food donations weekly and
  distribute to individuals in need. CLFA Consumer/Family staff members led this project and was able to connect with individuals and
  families one-on-one and educate them about mental health, stressors and depression while providing them much needed food. Staff
  reached clients weekly. The work was carried out of CLFA's main hub in 93706 and staff reached 10-30 clients each week (depending
  on the amount of food we received and were able to distribute. Families were very grateful for the food and information.
- Media:
- Social Media Facebook Live Chats,
- Social Media Facebook Mental Health Education Updates
- Television interviews on Univision: Holiday Blues and Depression

# > Satisfaction & Feedback of Persons Served & Stakeholder:

Objective: Increase service satisfaction and feedback among target population

**Indicator:** Observation and Feedback from Participants

Who applied: Unserved and underserved in rural areas and non-English speaking communities

Time of Measure: FY 2020-2021

Target Goal Expectancy: Consumers and family members express positive change to group leaders

**Outcome:** Partners received positive feedback from clients and observed it through one-on-one meetings, support groups, education, and training. The feedback is self-reported and centered around an individuals emotional wellbeing and needs. Individuals that participate in services report that they are happy to be a part of the support groups or presentations because they feel it is helping them.

Below are a few examples of positive feedback from persons served:

<u>Feedback from Person Served 1:</u> 'Person served disclosed she felt supported and started taking baby steps to go outdoors to take walks with her family, clean and cook, and get up early even when it felt difficult to do so. As a result, person served has taken initiative to want to handle referral for therapy on her own. Person served has been progressing well and has expressed gratitude for the services CLFA staff provide in ensuring she and her family are progress during this pandemic.'

<u>Feedback from Person Served 2:</u> 'Person served has disclosed she speaks less of the past trauma she has experienced and continues moving forward by attending her counseling sessions. Person served has expressed gratitude towards PSS and Medical Application Advocate. Person served stated with tears that the agency has made her feel comfortable at all times and for the first time she has felt cared for. PSS continues maintaining contact with client on a weekly basis.'

<u>Direct Quote:</u> "Thank you so much for listening to me. I felt like you actually helped me. When I call other places, they just give me numbers and then those places I call give me numbers and I feel like I just get the run-around and no one ever actually listens to help me."

<u>Direct Quote:</u> "It was wonderful. I was practicing mindfulness for the rest of the afternoon. I did not think support groups were like this. I even told my friend about them." (Person's served's feedback on support group)

### **DEPARTMENT RECOMMENDATION(S):**

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