

## FRESNO COUNTY MENTAL HEALTH PLAN

## OUTCOMES REPORT- Attachment A

### PROGRAM INFORMATION:

<b>Program Title:</b>	Exodus Youth Crisis Stabilization Center	<b>Provider:</b>	Exodus Recovery, Inc.
<b>Program Description:</b>	Exodus Recovery operates an LPS designated Crisis Stabilization Center (CSC) providing psychiatric stabilization services to adolescents (17 years of age and younger) who would otherwise be taken to or access care in an emergency room. Individuals who experience a mental health crisis or are in imminent danger of presenting a risk to themselves, others or becoming gravely disabled are able to immediately access care 24/7, 365 days per year at the Exodus CSC.	<b>MHP Work Plan:</b>	4-Behavioral health clinical care Choose an item. Choose an item.
<b>Age Group Served 1:</b>	CHILDREN	<b>Dates Of Operation:</b>	April 15, 2015 to Present
<b>Age Group Served 2:</b>	Choose an item.	<b>Reporting Period:</b>	July 1, 2020 - June 30, 2021
<b>Funding Source 1:</b>	Medical FFP	<b>Funding Source 3:</b>	Choose an item.
<b>Funding Source 2:</b>	Realignment	<b>Other Funding:</b>	Click here to enter text.

### FISCAL INFORMATION:

<b>Program Budget Amount:</b>	\$4,630,813.60	<b>Program Actual Amount:</b>	\$4,123,225.50
<b>Number of Unique Individuals Served During Time Period:</b>	1,051		
<b>Number of Services Rendered During Time Period:</b>	1,661		
<b>Actual Cost Per Individual:</b>	\$3,923.15		

### CONTRACT INFORMATION:

<b>Program Type:</b>	Contract-Operated	<b>Type of Program:</b>	Crisis Stabilization
<b>Contract Term:</b>	7/01/2016 – 06/30/2019 plus three optional one-year extensions	<b>For Other:</b>	Click here to enter text.
		<b>Renewal Date:</b>	June 30, 2022
<b>Level of Care Information Age 18 &amp; Over:</b>	Choose an item.		
<b>Level of Care Information Age 0- 17:</b>	Choose an item.		

The levels of care shown above do not apply. This program provides crisis stabilization services to individuals at the Youth Crisis Stabilization Center.

## TARGET POPULATION INFORMATION:

**Target Population:** Adolescents (17 years of age and younger) who would otherwise be taken to or access care in an emergency room. Individuals who experience a mental health crisis or are in imminent danger of presenting a risk to themselves, others or becoming gravely disabled are able to immediately access care 24/7, 365 days per year at the Exodus CSC.

## 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

Community collaboration

Integrated service experiences

Choose an item.

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

Exodus has provided a welcoming environment where a person in crisis or with urgent mental health needs will immediately be seen and evaluated by a professional and receive the services, he/she needs. Treatment has been individual-centered by incorporating the individual's input in determining the services and supports that are most effective and helpful for the persons-served. Exodus has provided ongoing services until the individual is successfully connected to community services. A key component of treatment services is the development of a comprehensive discharge plan designed to transition the individual to a less restrictive but supportive level of care, reestablish linkage to their previous service provider, and link persons-served and their families to a system of relevant community resources. These have included outpatient treatment, crisis residential beds, shelter beds, board and cares, sober living houses, and other programs.

**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

Exodus has designed a continuous quality assurance and quality improvement (QI) process with strategies to measure variations in the structure, method and program outcomes for the Exodus CSC. In addition, Exodus' Decision Support Department provides analytical support to the Exodus CSC by collecting, analyzing and reporting outcomes data from conceptualization through presentation to all stakeholders. The work of the Decision Support Department drives and supports key business decisions that yield positive outcomes at the Exodus CSC. Altogether, our Quality Management Program and Plan are dedicated to meeting the needs and to exceed the expectations of the persons-served, their families and the community.

With the assistance of Decision Support, Quality Improvement Department and Program Management, Exodus collects, manages and submits data for internal tracking purposes as well as to demonstrate individual's outcomes and performance-based criteria inclusive of guidelines set forth by Exodus, Fresno County and the State. An internal Access-based computerized tracking system (the "Admission Log") is used to collect and maintain individual related admission /discharge data and individual demographic information.

All collected program outcomes are appraised by the Quality Improvement (QI) Committee composed of clinical, quality and program leadership on a monthly basis. After outcomes appraisal, the review committee creates a plan to change behaviors that negatively influence outcomes.

**Outcome: Effectiveness of Discharge Planning as demonstrated by the referral and linkage to other Department of Behavioral Health programs, community providers and other community resources.**

Domain: ACCESS

Indicator: Referrals and Linkages

Who Applied: Non-hospitalized individuals

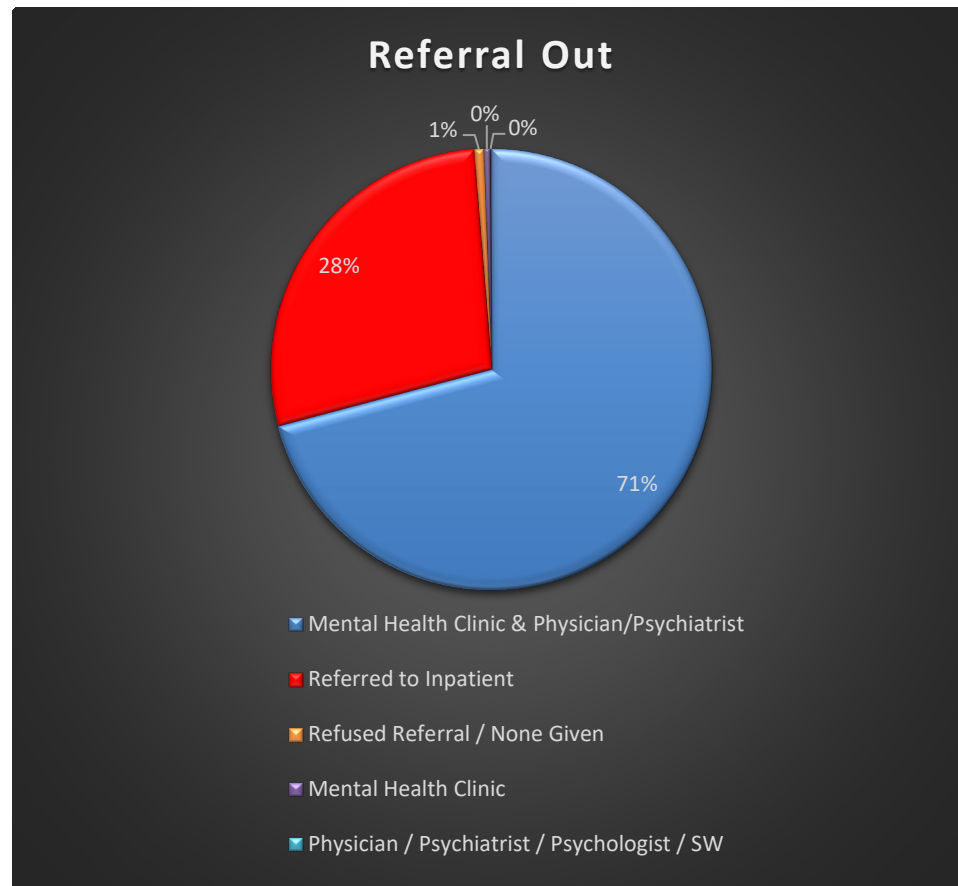
Time of Measure: FY 20-21

Data Source: Admissions Log

Target Goal Expectancy: 100% of non-hospitalized persons served will be referred and linked

Exodus currently provides a plan to each individual upon discharge that effectively connects the persons served to the broad array of services that Fresno County offers. This has resulted in better integration of behavioral care for individuals across other systems, including physical health and other service services that positively impact the overall health and wellness of the persons served. The Admission Log collects information and other **indicators** about what Department of Behavioral Health program, community provider or other community resources refer individuals to the Exodus CSC ("Referral In"). In addition, the Admission Log collects information about an individual's subsequent "Referral Out"/disposition and discharge to Department of Behavioral Health programs, community providers or other community resources. Our **goal** is to refer and link 100% of our non-hospitalized individuals (1,198 individuals). An **analysis** report is generated on a monthly basis for Exodus management to identify gaps in individual's care, services and problems with linkage care coordination. Currently, 72.1% of all persons served are discharged to

non-hospital settings. 99% of those individuals are referred to Department of Behavioral Health programs, community providers or other community resources.



Referral Out	# of Clients
Mental Health Clinic & Physician/Psychiatrist	1,177
Referred to Inpatient	463
Refused Referral / None Given	12
Mental Health Clinic	7
Physician / Psychiatrist / Psychologist / SW	2
<b>Grand Total</b>	<b>1,661</b>

## NOTES:

- Data extracted from Exodus' Fresno CSC Admissions Log
- Includes Admissions from July 1, 2020 to June 30, 2021
- Includes adolescents 17 years of age and younger

**Outcome: Collaborative approach and treatment strategies to reduce frequent readmissions to the facility.**

Domain: EFFECTIVENESS

Indicator: Recidivism/Readmissions

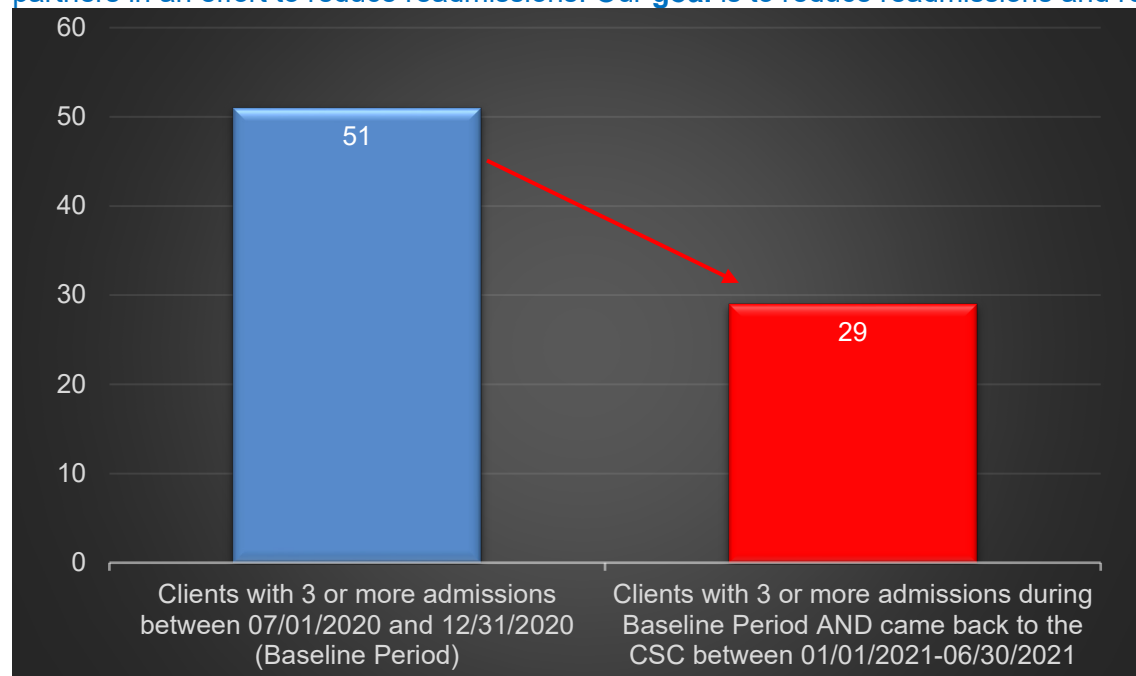
Who Applied: Persons with three or more admissions

Time of Measure: FY 20-21

Data Source: Admissions Log

Target Goal Expectancy: Reduce rates by 10% from previous six-month period

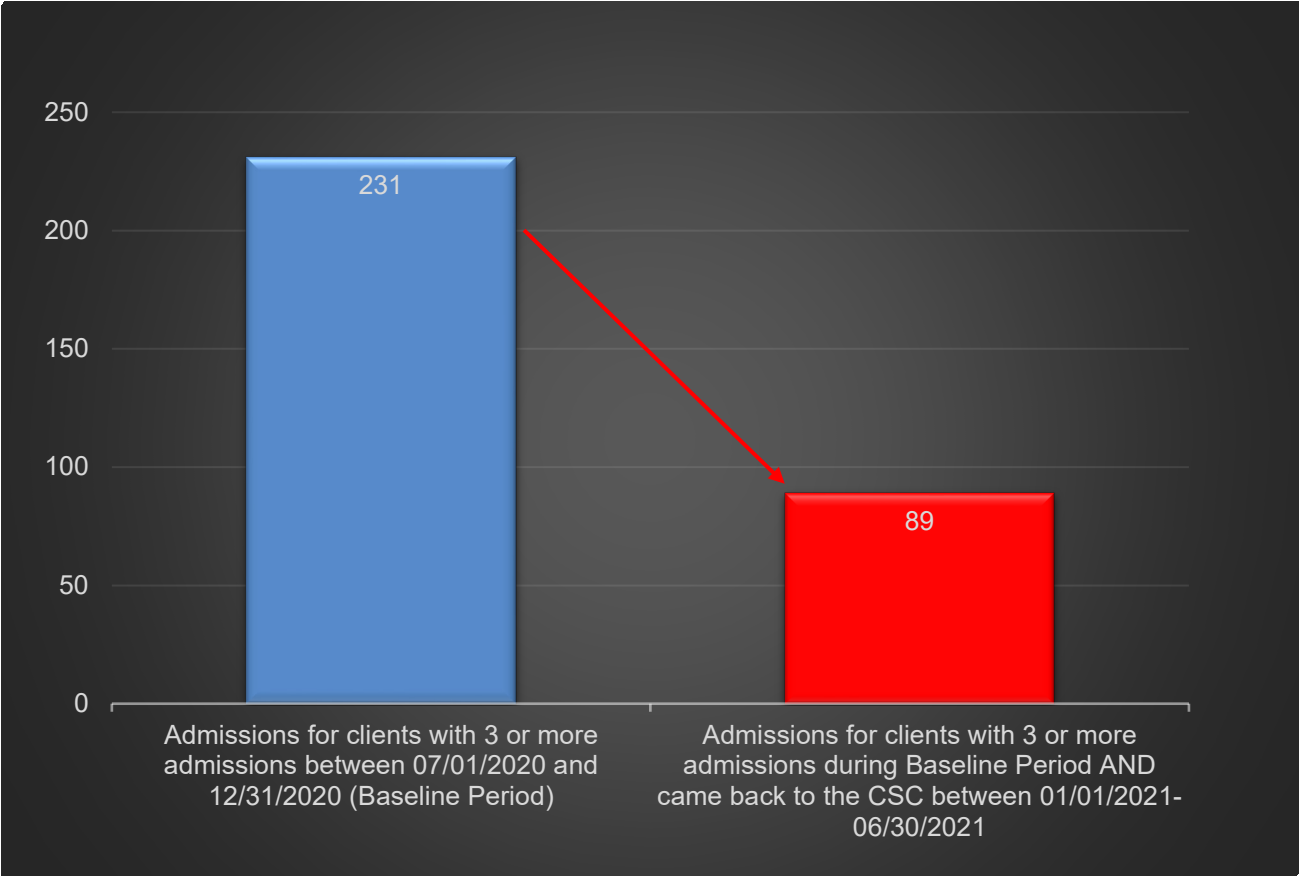
Exodus currently uses recidivism and readmission rates as **indicators** to measure the effectiveness of our collaborative approach and treatment strategies that keep individuals from returning to the CSC. At any point in time, the Admission Log has the ability to **analyze** recidivism rates for individuals who have had three or more admissions to the CSC during the previous 30 days, 3-, or 6-month period. The Admission Log tracks these individuals over subsequent months in order to measure a decrease or increase in readmissions for those individuals. Also, the Admission Log has the ability to report monthly readmission rates (i.e., x percent of the admissions for a specific month were for repeat individuals). Readmission/recidivism rates are reviewed by QI, Decision Support, Program Director, and discussed with Exodus staff as well as community partners in an effort to reduce readmissions. Our **goal** is to reduce readmissions and recidivism rates by 10% from the previous six-month period.



\*\*\*61.5% reduction in  
readmissions during FY 20-21  
VS 58.2% during FY 19-20

## NOTES:

- Data extracted from Exodus' Fresno CSC Admissions Log
- Includes unique individuals with admissions from July 1, 2020 to June 30, 2021



\*\*\*43.1% reduction in  
recidivism during FY 20-21  
VS 45.5% during FY 19-20

NOTES:

- Data extracted from Exodus' Fresno CSC Admissions Log
- Includes Admissions from July 1, 2020 to June 30, 2021
- Includes adolescents 17 years of age and younger

**Outcome: Denial rate reduction of 5% for Crisis Stabilization billing that does not meet Medi-Cal medical necessity criteria as determined by the utilization review performed by the Fresno County Mental Health Plan.**

Domain: EFFICIENCY

Indicator: Denial Rate for Non-Medical Necessity Crisis Stabilization

Who Applied: Persons served who did not meet medical necessity

Time of Measure: FY 20-21

Data Source: DBH Managed Care Utilization Review

Target Goal Expectancy: 5% reduction

Exodus calculates its denial rate by dividing the number of denied claims by the total number of claims processed post a Utilization Review (UR) from the Fresno County Mental Health Plan. Such **analysis** is generated based on the frequency of a UR being performed by Fresno County Mental Health Plan. Per the Utilization Review from Fresno County, the Youth CSC had a 0% denial rate.

**Outcome: Satisfaction & Feedback of Persons Served & Stakeholders**

Domain: SATISFACTION & FEEDBACK

Indicator: Individual's feedback regarding satisfaction, efficiency, and effectiveness

Who Applied: All persons served

Time of Measure: FY 20-21

Data Source: Direct feedback from persons served, County feedback, and success stories

Exodus engages in collaborative, person-centered approach with youth, their caregivers, as well as our community providers. Staff retrieve information related to treatment interest, insurance information, residence location and prior/current linkages to determine the best treatment and discharge strategy for a successful discharge. Exodus makes referrals for therapeutic treatment and/or wraparound services based on individual's needs and resources. Exodus also has a comprehensive list of individual providers for persons served who wish to use their private insurance for continued treatment. Thanks to the collaborative team effort we have been able to link many individuals to the appropriate level of care. We also reconnect many individuals back to FSPs or other outpatient mental health settings, and encourage re-engagement with services.

Outcomes of complaints and concerns from individuals, providers and stakeholders are reviewed at the County monthly meetings to include any actions taken to resolve issues. Exodus also works collaboratively with schools in order to ensure continued follow up with individuals and their family, gather pertinent history of persons-served/student symptoms/functioning, incidents, and history/current placements to inform referral process and linkage to DSS. Once an individual is discharged, Exodus staff will follow up, as needed, if continued correspondence related to the individual arrives at the facility, in which case, the assigned case worker will be contacted and the information provided.

Direct feedback received from a caregiver of a youth who was new to the area and had no insurance was admitted to the CSC. Exodus contacted Children's Mental Health and informed them that the individual needed Spanish-speaking services. They were successfully linked and reported they had been using therapy services with a Spanish-speaking provider and the youth was doing well. The youth had returned to the CSC, briefly, due to a new incident, and the family reported the youth had been doing well up until that point, following the care and referral he had received through Exodus. Another form of satisfaction would be that we had no grievances filed against the CSC youth for the entire year.

**Outcome: Timeliness of Services – Exodus’ goal is to provide individuals with the highest opportunity for recovery by admitting youth after a referral is generated and providing individualized treatment within one hour.**

Domain: Behavioral Health Integrated Access

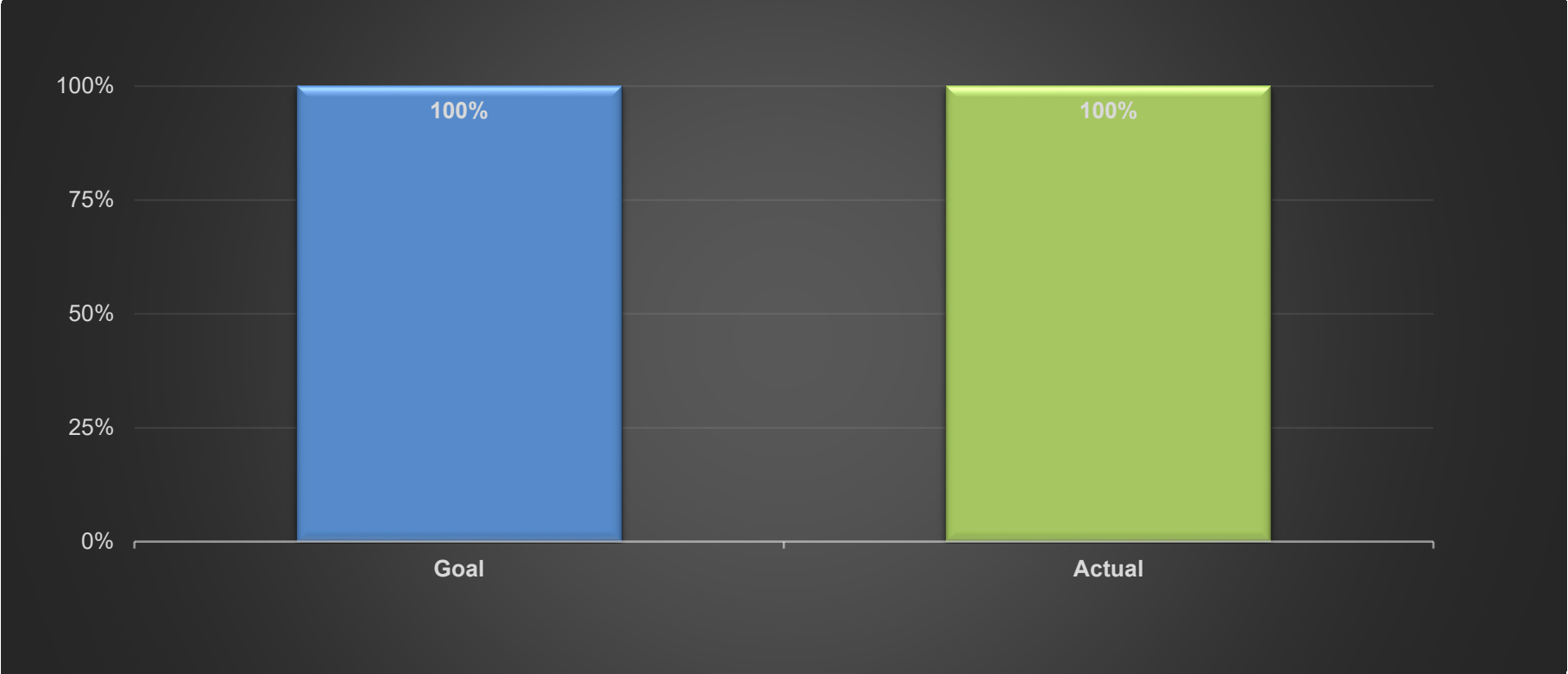
Indicator: Assessment time

Who Applied: All youth seeking admission

Time of Measure: FY 20-21

Target Goal: Youth are evaluated and individualized treatment provided within one hour

When individuals arrive to the Youth CSC they receive an immediate evaluation by a nurse to determine if they meet criteria to be admitted to the unit. Within an hour, all individuals receive an evaluation by the nurse and wait to be evaluated by the provider. The provider will see the individuals based on order of arrival. The nurse presents the individual’s case to the doctor to obtain orders for medication or standing orders if the provider is not able to see them before the end of their shift. The CSC’s goal is to have 100% of patients evaluated within an hour, and that goal was reached for FY 20-21.





**Outcome: Exodus strives to hire at least 50% of bilingual staff to meet Fresno County's threshold languages and care for the target population in their preferred language.**

Domain: Cultural/Community Defined Practices

Indicator: Languages spoken by staff

Who Applied: Exodus Staff

Time of Measure: FY 20-21

Data Source: HR Personnel Records

Exodus CSC currently has 99 staff members, of which 58 are bilingual (40 speaking either Hmong or Spanish) resulting in a bilingual percentage of 59%. The current CSC staff communicate in the following languages:

English  
Spanish  
Hmong  
Armenian  
French  
Arabic  
Hindi  
Shqip  
Punjabi  
Tagalog  
Khmer/Cambodian  
Visayan  
Indonesian  
Nigerian (Yoruba)  
Thai

**DEPARTMENT RECOMMENDATION(S):**

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