PROGRAM TITLE: Supervised Overnight Stay (SOS) - Innovations PROVIDER: WestCare

PROGRAM DESCRIPTION: The SOS programs intent is to serve consumers with serious mental health disorders who present at emergency rooms for 5150 evaluation during the late evening/early morning hours and it has been determined that immediate hospitalization is not needed, but the consumer does require next day linkage to an appropriate program(s).

By design these consumers are given the opportunity to be discharged from the Emergency Department and be transported to the SOS facility where they can safely spend the night, receive a nutritious meal and get next day assistance with service linkage.

It is the express goal of the program to link consumers with needed mental health services with the hope of reducing frequent and unnecessary visits for psychiatric care to area Emergency Departments.

AGES SERVE	D	:
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	Children	
\boxtimes	Adult	ult

DATES OF OPERATION: July 2, 2012 to May 1, 2013 **DATES OF DATA REPORTING PERIOD:** July 2, 2012 to May 1, 2013

OUTCOME GOALS

SOS Program Goal 1: Contractor shall track response time to emergency departments/5150 facility by SOS team members. Response to Emergency Room Departments in 30 minutes or less.

OUTCOME DATA

SOS Program Outcome 1: YTD SOS average response time to emergency departments/5150 facilities is 25 minutes. Response time is tracked utilizing reproducible data sets. This represents a greater than 10% below target average. *See Table A

SOS Program Goal 2: Contractor shall track the amount of time it takes to place consumers from the emergency departments/5150 Facility to the SOS Facility.

SOS Program Goal 3: Contractor shall track consumers with behavioral health disorders who are frequent users of hospital emergency departments/designated 5150 facility and monitor the recidivism rate of those consumers.

SOS Program Outcome 2: YTD SOS return time from emergency departments/5150 facilities is 15 minutes. This is within contract expectations. *See Table B

SOS Program Outcome 3: SOS developed a dual tracking method to demonstrate a fuller range of outcomes.

Tracking method one (1) tracked the number of Emergency Room visits by consumers that were discharged YTD by SOS. SOS tracked these Emergency Room visits from January 1, 2012 to the date of admission at SOS.

This group had 583 Emergency Room visits from January 1, 2012 until the initial admission to SOS.

After Admission to SOS the number of Emergency Room visits by the same group decreased to 199 representing an approx. 200% reduction in Emergency Room visits.

Tracking method two (2) tracked the number of SOS consumers who did not return to the Emergency Room

SOS Program Goal 3: Contractor shall track consumers with behavioral health disorders who are frequent users of hospital emergency departments/designated 5150 facility and monitor the recidivism rate of those consumers (continued).

while receiving support services by SOS.

(68%) did not have a return visit to hospital emergency rooms or designated 5150 facilities while participating in the SOS Program.

(32%) did return for services at the hospital or designated 5150 facility. * See Table C.

SOS Program Goal 4: Contractor shall monitor, report, and track appropriate linkage successes and challenges.

SOS Program Outcome 4:

SOS Program linkage challenge number (1) is exhibited in keeping consumers involved with Mental Health Services (23% Linked and not active at discharge).

SOS Program linkage challenge number (2) is that 33% of consumers once linked to Mental Health Services could not be located. The majority of these individuals report themselves as homeless (238 YTD).

To seek solutions to this dilemma SOS has been actively involved in mental health related groups such as the Interagency meeting; the 5150 committee; The Poverello Meeting

SOS Program Goal 4: Contractor shall monitor, report, and track appropriate linkage successes and challenges (continued).

and has developed relationships within the mental health community including the Department of Behavioral Health Interagency Discharge Team and Turning Point Full Service Programs.

SOS Program Success number (1) 95% of consumers are initially linked to mental health services.

SOS Program Success number (2) 41% of consumers are discharged as successfully linked and actively involved in Mental Health Services. Consumers were provided with Case Management services for a minimum of 45 or maximum of 90 days before discharge.

SOS Program Success number (3) 4% of consumers are actively linked to AOD Programs and encouraged to re-contact SOS upon discharge for follow up Mental Health Services. *See Chart D

SOS Program Outcome 5:

Follow up contacts with consumers are conducted by SOS Case
Managers with Follow up contact information being gleaned from

SOS Program Goal 5: Contractor shall track, report, and monitor follow up contacts with consumers.

SOS Program Goal 5: Contractor shall track, report, and monitor follow up contacts with consumers.(continued).

consumer progress notes as activities provided by SOS staff.

Follow up activities include the following:

- Linkage to MH
- Transportation
- Peer Support Linkage
- Case Management
- Telephone Counseling
- Supportive Counseling
- Family Sup & Education
- Contact Attempt

Year to date SOS has completed 4178 follow up activities with consumers. **(Table F)** illustrates follow up activities provided by Case Managers.

A numerical breakdown of all activities provided by SOS staff is included in SOS Program Outcome 8

SOS Program Goal 6: Contractor shall track clinical outcomes by discharge placement.

As a non-treatment program SOS has tracked the following clinical outcomes:

SOS Program Outcome 6: Clinical Outcome (1) The SOS Program has maintained a 95% average of linking consumers to Mental Health Services.

SOS Program Goal 6: Contractor shall track clinical outcomes by discharge placement (continued).

Clinical Outcome (2) Discharge Placement

Consumers that are Successfully Linked and Active at Discharge exhibit the following clinical outcomes:

- (1) Consumers are linked to an individually appropriate Mental Health Service.
- (2) Consumers are offered Mental Health Services which includes medication, counseling, group therapy, job training (if appropriate) and socialization with peers.
- (3) Consumers take an active role in Mental Health Services.
- (4) Hospitalizations, length of stays and returns to Emergency Rooms are minimized.
- (5) Homeless consumers become stabilized and can take advantage of housing opportunities.

Clinical Outcome (3)

Consumers that are **linked and not** active at discharge exhibit the following clinical outcomes:

(1) Consumers are linked to an individually appropriate Mental Health

SOS Program Goal 6: Contractor shall track clinical outcomes by discharge placement (continued).

Service.

- (2) Consumers are familiarized with Mental Health Services which include medication, counseling, group therapy, job training (if appropriate) and socialization with peers.
- (3) Consumers are offered supportive services by SOS in the form of MH linkages, Supportive counseling, family education packets, transportation, linkage to AOD program (if appropriate), and other supportive services.

Clinical Outcome (4)

Consumers who **Declined Further Services** (32) exhibit the following clinical outcomes:

- (1) Do not consider selves as having a mental illness.
- (2) Exhibit a high level of denial and poor insight.
- (3) Refusal of mental health services.

Clinical Outcome (5)

Consumers who are assessed as **not being SMI** (7) exhibit the following clinical outcomes:

- (1) Have been linked to a Mental Health Service for assessment.
- (2) Have been assessed and

SOS Program Goal 6: Contractor shall track clinical outcomes by discharge placement (continued).

determined to not be severely mentally ill.

Clinical Outcome (6)

Consumers that SOS is **Unable to Contact/Locate** exhibit the following clinical outcomes:

- (1) Consumers do not want to be located.
- (2) Exhibit high levels of denial and poor insight.
- (2) Consumers are in a constant state of transition and cannot be located.
- (3) Homelessness is a significant factor as it pertains to the mentally ill.

Clinical Outcome (7)

Consumers who are **primarily AOD** exhibit the following clinical outcomes:

- (1) Demonstrate a greater need for immediate AOD services.
- (2) Are referred to AOD Services.

SOS Program Goal 7: Contractor will develop a satisfaction survey, approved by DBH that complies with the mandated State performance outcome and quality improvement reports/outcomes. At a minimum, eighty percent (80%) of consumers will report satisfaction with the program services.

SOS Program Outcome 7:

Attached is the Fresno County MHSA approved consumer satisfaction survey. The survey invites consumers to respond to survey questions

SOS Program Goal 7: Contractor will develop a satisfaction survey, approved by DBH that complies with the mandated State performance outcome and quality improvement reports/outcomes. At a minimum, eighty percent (80%) of consumers will report satisfaction with the program services (continued).

regarding support services provided by the Overnight Stay Program.

Categories of response are listed as Strongly Agree Agree Disagree Strongly Disagree

Survey questions and results for each category are as follows:

- 1. My initial contact with WestCare SOS was helpful in addressing my needs.
 - 61% Strongly Agree
 - 36% Agree
 - 2% Disagree
 - 1% strongly disagree

97% Combined satisfaction rating with SOS Services.3% Combined dissatisfaction rating with SOS Services.

- 2. WestCare SOS staff is timely in it's responses to my questions.
 - 61% Strongly Agree
 - 36% Agree
 - 2% Disagree
 - 1% Strongly disagree

SOS Program Goal 7: Contractor will develop a satisfaction survey, approved by DBH that complies with the mandated State performance outcome and quality improvement reports/outcomes. At a minimum, eighty percent (80%) of consumers will report satisfaction with the program services (continued).

97% Combined satisfaction rating with SOS Services.3% Combined dissatisfaction rating with SOS Services.

- 3. WestCare SOS staff treated me with dignity and respect.
 - 61% Strongly Agree
 - 36% Agree
 - 2% Disagree
 - 1% Strongly disagree

97% Combined satisfaction rating with SOS Services.

3% Combined dissatisfaction rating with SOS Services.

- 4. I trust that my case manager can help me with my case management needs.
 - 72% Strongly Agree
 - 25% Agree
 - 1% Disagree
 - 2% strongly disagree

97% Combined satisfaction rating with SOS Services.3% Combined dissatisfaction rating with SOS Services.

5. The services I was linked to

SOS Program Goal 7: Contractor will develop a satisfaction survey, approved by DBH that complies with the mandated State performance outcome and quality improvement reports/outcomes. At a minimum, eighty percent (80%) of consumers will report satisfaction with the program services (continued).

were helpful.

- 58% Strongly Agree
- 36% Agree
- 5% Disagree
- 1% Strongly disagree

94% Combined satisfaction rating with SOS Services.6% Combined dissatisfaction rating with SOS Services.

6. Overall, my experience with SOS is a positive one.

- 66% Strongly Agree
- 31 Agree
- 3% Disagree
- 0% Strongly disagree

97% Combined satisfaction rating with SOS Services.3% Combined dissatisfaction rating with SOS Services.

7. Has there been an issue that SOS was not able to help you with?

No:

• 91%

Yes:

• 9%

SOS Program Goal 7: Contractor will develop a satisfaction survey, approved by DBH that complies with the mandated State performance outcome and quality improvement reports/outcomes. At a minimum, eighty percent (80%) of consumers will report satisfaction with the program services (continued).

91% Satisfaction rating with SOS Services.

9% Dissatisfaction rating with SOS Services.

Survey results are representative of 50% of SOS consumers completing the survey. The sub set analysis demonstrates that 97% of consumers felt their needs were met.

The only significant separation in survey results were consumer feelings about SOS case managers with an 11% increase in the strongly agree category on question number 4 (I trust that my case manager can help me with my case management needs).

SOS Program Goal 8: Contractor will identify services provided to each consumer on a monthly basis.

SOS Program Outcome 8:

Year to date The SOS program has provided services to 427 consumers (99 re-visits) The following is the year to date listing of activities provided to consumers served by SOS.

Category One: Intake Activities:

- Hospital Intake (424)
- Intake/Orientation (423)

SOS Program Goal 8: Contractor will identify services provided to each consumer on a monthly basis (continued).

AM Drop Off (66)

Category Two: Case Management Activities:

- Linkage to MH (332)
- Transportation (91)
- Peer Support Linkage (5)
- Case Management (994)
- Telephone Counseling (18)
- Supportive Counseling (475)
- Family Sup & Education (24)
- Contact Attempt (2239)

Year to date SOS has provided 5091 activities for consumers. Activities provided are displayed in two categories. Category One (Table E) displays intake activities provided to consumers. Category two (Table F) shows support in the form of follow up activities provided by Case Managers.

For the purpose of Table clarity Peer Support Linkage, Telephone Counseling; Supportive Counseling; and Family Support and Education are included in Case Management located on **Table F**.

Tables are located on pages 15-18

DEPARTMENT RECOMMENDATION(S): Based on outcome and contract measurements reported, the Department recommends to continue MHSA funding for this program for FY 2013-14.

Table A SOS Program Goal 1: Contractor shall track response time to emergency departments/5150 facility by Overnight Stay Facility team members. Response to Emergency Room Departments is to take place in 30 minutes or less. . YTD SOS average response time to emergency departments/5150 facilities is 25 minutes

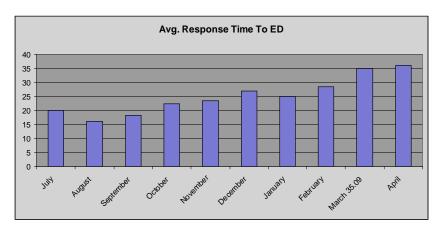


Table B SOS Program Goal 2: Contractor shall track the amount of time it takes to place consumers from the emergency departments/5150 Facility to the Overnight Stay Facility. YTD SOS average return to SOS is 15 minutes

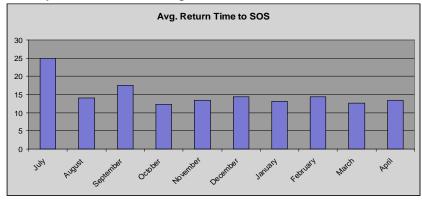


Table C

SOS Program Goal 3: Contractor shall track consumers with behavioral health disorders who are frequent users of hospital emergency departments/designated 5150 facility and monitor the recidivism rate of those consumers.

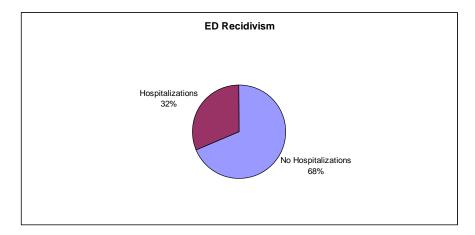


Table D

SOS Program Goal 4: Contractor shall monitor, report, and track appropriate linkage successes and challenges.

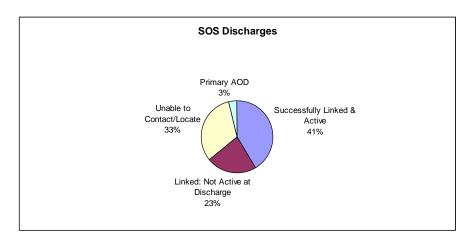


Table E

SOS Program Outcome 5: Contractor shall track, report, and monitor follow up contacts with consumers.

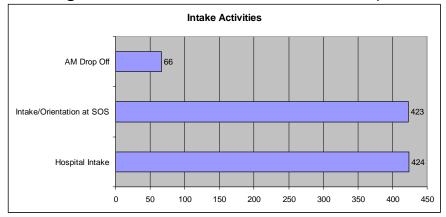


Table F

SOS Program Outcome 5: Contractor shall track, report, and monitor follow up contacts with consumers.

