**PROGRAM TITLE:** Expansion Day Treatment Program (EDT) **PROVIDER:** Department of Behavioral Health (DBH)

PROGRAM DESCRIPTION: EDT is a therapeutic program for adolescents comprised of two clinicians, and two community mental health specialists. EDT is a day treatment program intended to assist in stabilizing an adolescent who has been recently discharged from a psychiatric inpatient facility or to prevent the need for referring to an inpatient psychiatric facility. The program is designed for adolescents and teens, grades 7-12, who have been unable to commit to a healthier lifestyle, and who need intensive support and/or interventions to cultivate new, more appropriate methods of coping and behaving. The program is a structured, multi-disciplinary program of therapy that may be an alternative to hospitalization, avoid placement in a more restrictive setting, or maintain the child in a community setting. Services are available at least three hours each day during the program's hours. Service activities include assessment, plan development, individual and group therapy, rehabilitation, daily community/milieu meeting, skill-building groups, and collateral. Capacity is 8 adolescents. The overall objective of the program as a specialized short-term service is to return the youth to their community setting equipped with a range of skills to make a better adjustment to life in the community. The program focuses on achieving the following goals: (1) reduction in crisis services (CSU visits), (2) reduction in inpatient psychiatric hospitalizations, and (3) improvement in the following life functioning areas: family, academic performance, school behavior, school attendance, social functioning, and living.

#### PROGRAM DEMOGRAPHICS FOR JANUARY 2014 – JUNE 2015

- A total of 27 clients received services.
- Language: 20 English (74%), 6 Spanish (23%), 1 Unknown (3%).
- Race: 19 Hispanic (70%), 5 Caucasian (17%) and of the remaining 3 (13%) of the following: 2 African-American, 1 Asian Pacific Islander.
- Gender: 21 Female (79%), 6 Male (21%).

$\boxtimes$	Children	
	Adult	Older Adult

**DATES OF OPERATION:** July 1, 1982 - Current **DATES OF DATA REPORTING PERIOD:** Jan 2014 – Jun 2015

#### **OUTCOME GOAL**

This reporting period captures program process outcomes and effectiveness. Data was pulled at different times from Avatar and numbers may vary due to corrections, edits, etc. made in Avatar by staff.\*

- 1. Client count Number of clients served was maintained from July 2014-June 2015.
- Service Count-Decreased % of services provided by a total of 18% for the period of January-June 2015 compared to the prior six months. Fluctuations in program due to clients stabilizing their symptoms and transitioning to lower levels of care.
- 3. Crisis services-Decreased % of clients seen by crisis service providers by a total of 22% for the period of January-June 2015 compared to the prior 6 months. Clients within the program are not stable in their symptomology and it is not uncommon for clients to experience crisis during their time in the EDT program.
- 4. Hospitalizations-Number of clients serviced by hospitals stayed constant over the 18 month time period. The ratio of clients hospitalized and days hospitalized has decreased from January-June 2014 (25 days=76/3) to January-June 2015 (12 days=36/3).
- 5. All served clients received primarily Day Treatment services.

#### **OUTCOME DATA**

Client Count	Jan- Jun 2014	Jul-Dec 2014	% Increase/ Decrease	Jan-Jun 2015	% Increase/ Decrease	Total # Unique Clients
Expansion of Day Treatment Program (EDT)	15	12	-20.0%	12	0.0%	27
CMH Division Total	3459	2872	-17.0%	2546	-11.4%	6755
CMH Division Total Average	314	287	-8.7%	255	-11.4%	614

Service Count	Jan-Jun 2014	Jul-Dec 2014	% Increase/ Decrease	Jan-Jun 2015	% Increase/ Decrease	Total
Expansion of Day						
Treatment Program (EDT)	719	602	-16.3%	495	-17.8%	1,816
CMH Division						
Total	22,877	20,371	-11.0%	19,428	-4.6%	62,676
CMH Division						
Average	2080	2037	-2.0%	1943	-4.6%	5698

**Crisis Services	Jan- June 2014	Jul- Dec 2014	% Increase/ Decrease	Jan-Jun 2015	% Increase/ Decrease	Jan 14-Jun 15 Total
# of Clients w/Crisis Services	7	9	29%	7	-22%	20
# of Clients with recurrence of crisis services	5	5	0%	5	0%	16

<sup>\*\*</sup>Crisis services were pulled from CCAIR visits from 01/01/2014 through May 2015. Data was also pulled from Exodus cost center 21101 and 211Y. This data was pulled on September 22, 2015 and reflects real time data. Crisis reoccurrence is defined as more than one 23 hour period visit at those locations.

<sup>\*</sup>Client count, service count, wait time by program and proportion of services data was pulled from Avatar in 07/2015

<sup>\*\*</sup> Data was broken down by 6 months and reflects crisis services for the youth receiving services and crisis within only those months. Data for the whole 18 month period will capture clients who were served within the 18 months as well as received a crisis services in the 18 months. This is the reason the number is higher than each of the 6-month periods.

+Hospitalization	Jan- June 2014	Jul- Dec 2014	% Increase/ Decrease	Jan-Jun 2015	% Increase/ Decrease	Jan 14-Jun 15 Total
# of Clients Hospitalized	3	1	-67%	3	200%	10
# of Days of Hospitalization	76	10	-87%	36	260%	211
# of Clients with more than one consecutive period of hospitalization	1	0	-100%	1	-	4

<sup>+</sup>This data was pulled on September 22, 2015 and reflects real time data. Client counts may have changed due to Avatar corrections. Data was pulled from Crestwood PHF, Central Star PHF, and hospitals in Avatar.

<sup>+</sup>Data was broken down by 6 months and reflects # of clients hospitalized from the youth served within those same months. Data for the whole 18 month period will capture clients who were served within the 18 months and were hospitalized within the 18 months. This is the reason the number is higher than each of the 6-month periods.

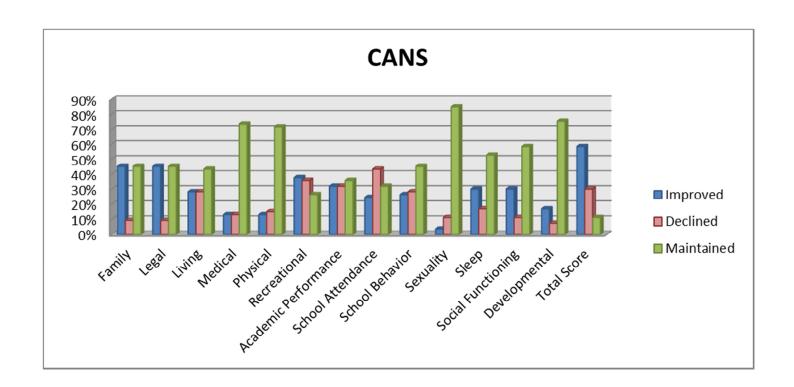
	January-June 2014										
Proportion of Services (Avatar)	Assessments	Case Management	Collateral	Crisis Services	Placement	Plan Development	Rehab	Therapy	Med Services	Day Treatment Services	Total
Expansion Day Treatment Program (EDT)	0.28%	0.56%	0.14%	0.00%	0.00%	0.14%	0.83%	0.97%	0.00%	97.08%	100.00%
CMH Division Average	6.85%	17.06%	6.74%	6.52%	0.01%	7.76%	8.69%	40.95%	2.13%	3.29%	100.00%

	July-December 2014												
Proportion of Services (Avatar)	Assessments	Case Management	Collateral	Crisis Services	Placement	Plan Development	Rehab	Therapy	Med Services	Day Treatment Services	Total		
Expansion Day Treatment Program													
(EDT)	0.17%	0.66%	0.00%	0.00%	0.00%	0.00%	0.00%	0.83%	0.00%	98.34%	100.00%		
CMH Division													
Average	5.63%	17.17%	6.24%	6.61%	0.02%	6.75%	7.76%	44.22%	2.41%	3.19%	100.00%		

January-June 2015											
Proportion of Services (Avatar)	Assessments	Case Management	Collateral	Crisis Services	Placement	Plan Development	Rehab	Therapy	Med Services	Day Treatment Services	Total
Expansion Day											
Treatment Program (EDT)	0.00%	0.81%	0.20%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	98.99%	100.00%
CMH Division											
Average	5.77%	17.36%	5.87%	5.25%	0.01%	6.54%	7.26%	47.72%	1.38%	2.86%	100.00%

#### **OUTCOME GOAL**

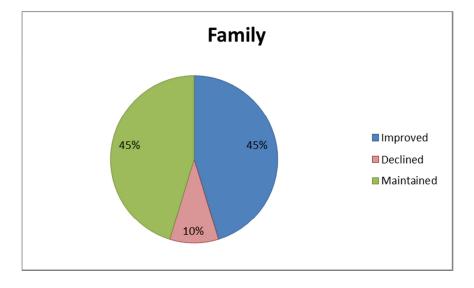
Program outcomes are measured using the Child and Adolescent Needs and Strengths, Ages 5+ (CANS) instrument in the area of "Life Domain Functioning." It is administered upon entry into the program based on behaviors prior to services, every six months and at discharge. Data on CANS was pulled for January 2014-June 2015 and 53 matched pairs were found. Matched pairs include CANS assessments completed six months prior to January 2014, if a second CANS assessment was completed in our 18 month data reporting period. The goal is for clients to improve in all life domains. Below we have highlighted a few domains; family, academic performance, school behavior, school attendance, social functioning, and living.



### **CANS Family Relationship Domain:**

**Family relationships will improve** – Improvement in the client's relationship with family members and the extent there are problems (i.e., frequent/constant arguing, negative relationships, domestic violence, etc.)

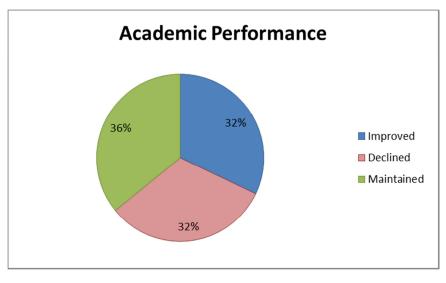
- 45% of clients showed an improvement.
- 45% maintained family relationships while in the program.
- 10% of clients declined in family relationships.



#### **CANS Academic Performance Domain:**

Academic performance will improve – Improvement in the client's achievement at school and the extent there are problems with achievement (i.e., struggling or failing some subjects, falling behind same age peers, etc.) Clients in EDT program transition from traditional school to home hospital instruction which is the last 5 hours of instruction a week.

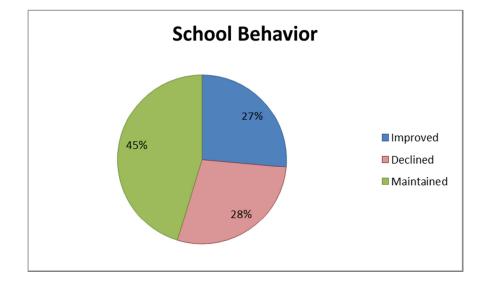
- 32% of clients showed an improvement in academic performance.
- 36% maintained academic performance while in the program.
- 32% of clients declined in academic performance.



#### **CANS School Behavior Domain:**

**School Behavior will improve** – Improvement is measured by comparing the client's behaviors and its impact at school such as classroom disruptions, sanctions that may include suspensions or severe behavioral problems that may jeopardize school placement.

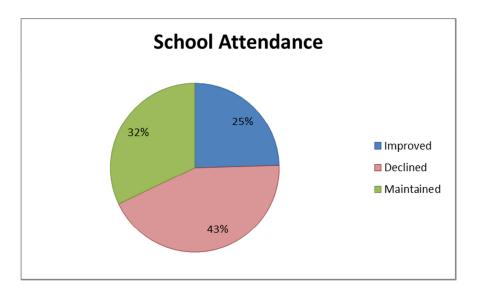
- 27% of clients showed an improvement in school behavior.
- 45% maintained school behavior while in the program.
- 28% of clients declined in school behavior.



#### **CANS School Attendance Domain:**

**School attendance will improve** – Improvement is measured by comparing the client's attendance. *Clients in EDT program transition from traditional school to home hospital instruction which is the last 5 hours of instruction a week.* 

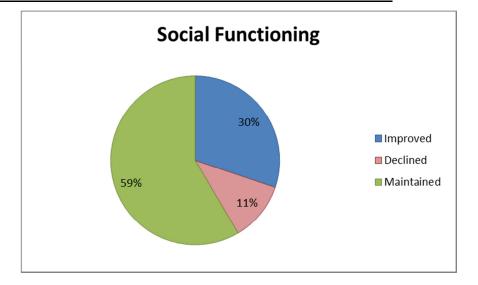
- 25% of clients showed an improvement in school attendance.
- 32% maintained school attendance while in the program.
- 43% of clients declined in school attendance.



#### **CANS Social Functioning Domain:**

**Social Functioning will improve** – Improvement is measured by comparing the client's ability to have meaningful relationships with peers, friendships and socialization while at school and in the community.

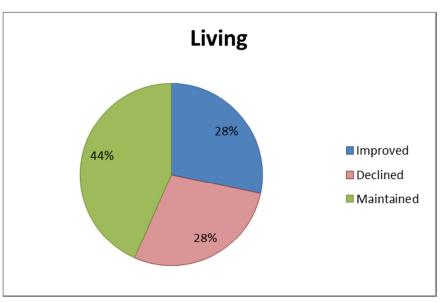
- 30% of clients showed an improvement in social functioning.
- 59% maintained social functioning while in the program.
- 11% of clients declined in social functioning.



## **CANS Living Situation Domain:**

**Living situation will improve** – Improvement in the client's living situation and the extent there are problems (i.e., caregiver's concerns, disruptive behaviors, conflict with others in the residence, etc.)

- 28% of clients showed an improvement in their living situation.
- 44% maintained their living situation while in the program.
- 28% of clients declined in living situation.



**DEPARTMENT RECOMMENDATION(S):** The Department recommends continuing the funding for the Expansion Day Treatment Program for FY 2015-16.