

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

PROGRAM TITLE: Youth Link

PROVIDER: Department of Behavioral Health (DBH)

PROGRAM DESCRIPTION: Services provided to dependency Court-ordered include mental health assessments and evaluations, case management services, transitional services, medication services, individual, family and group therapy and family advocacy. This program also provided mental health screening, attachment assessments, family therapy, group therapy and attachment-based parent/child therapy where services are for voluntary or court-ordered 0-3 year olds. Due to special considerations and procedures are necessary when providing treatment within the framework of a legal system designed to protect children, prosecute offenders, rehabilitate families, and reunite children with families when it is safe to do so, the team collaborated closely with the Department of Social Services Child Welfare Division. The program focused on achieving the following goals: (1) reduction in crisis services (CCAIR visits) and (2) reduction in inpatient psychiatric hospitalization.

Since the Katie A. settlement, DSS and DBH have participated in a close planning and collaborative process to meet compliance. Given the settlement mandates and change in philosophical treatment framework necessary to implement the Core Practice model and CAPP work, a RFP was prepared and released in April 2014 to address and meet the mental health needs of children in CWS. Since then this program has been contracted out effective 9/30/2014. However, services still may be provided by staff until client is transitioned or therapeutically terminated.

PROGRAM DEMOGRAPHICS FOR JANUARY 2014 – JUNE 2015

- A total of 1100 clients received services
- Language: 1021 English (92.77%), 67 Spanish (6.07%), 2 Hmong (0.15%), 8 Other (0.77%), 3 Unknown (0.23%)
- Race: 671 Hispanic (61.03%), 233 Caucasian (21.21%), 151 African-American (13.76%), 27 Asian/Pacific Islander (2.46%), and of the remaining 18 (1.54%) of the following: 2 Native American, 8 Other, 8 Unknown
- Gender: 611 Female (55.57%), 485 Male (44.12%), 3 Unknown (0.31%)

☒ **Children**

☒ TAY

☒ **Adult**

☐ Older Adult

DATES OF OPERATION: January 2005 – Current

DATES OF DATA REPORTING PERIOD: Jan 2014 – Jun 2015

OUTCOME GOAL

OUTCOMES DATA

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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 – Increased % of clients served by 91.3 for the period of January 2015 to June 2015 from the previous 6 months period. This represents the number of clients who are still in treatment after the program closed in September 2014.
2. Crisis services- Decreased number of clients seen by crisis service provider at every 6 month period. Reduction is attributed to program closure.
3. Hospitalization- Decreased number of clients serviced by hospitals at every 6 month period. Reduction could be attributed to program closure in September 2014.
4. Wait time- Increased wait time by 14% for the period of July to December 2014 from the previous 6 months period and all clients would be in treatment during January to June 2015. Program closure could have contributed to increase in wait time period as a high number of first services were referred to contract providers.
5. All served clients primarily received therapy services and case management.

*Client count, service count, proportion of services and wait time were pulled from Avatar in 07/2015.

Client Count	Jan-Jun 2014	Jul-Dec 2014	% Increase/ Decrease	Jan-Jun 2015	% Increase/ Decrease	Total # Unique Clients
Youth Link	797	504	-36.8%	44	91.3%	1,100
CMH Division Total	3,459	2,872	-17.0%	2546	-11.4%	6,755
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
Youth Link	3,385	2,095	-38.1%	372	-82.2%	5,852
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-Jun 2014	Jul-Dec 2014	% Increase/ Decrease	Jan-Jun 2015	% Increase/ Decrease	Jan 14-Jun 15 Total
# of Clients w/Crisis Services	21	16	-24%	0	-100%	57
# of Clients with recurrence of crisis services	10	10	0%	0	-100%	33

*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.

* 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.

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*Hospitalization	Jan-Jun 2014	Jul-Dec 2014	% Increase/Decrease	Jan-Jun 2015	% Increase/Decrease	Jan 14-Jun 15 Total
# of Clients Hospitalized	8	5	-38%	2	-60%	24
# of Days of Hospitalization	78	31	-60%	29	-6%	338
# of Clients with more than one consecutive period of hospitalization	0	0	-	1	-	7

**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.*

**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.*

Wait Time By Program (Days): Avatar Report Wait time from assessment to first service. Medical service is meds services, crisis services and psychiatrist services. Non-medical services all other codes. This report excludes note to charts, cancellations, and no shows	January-June 2014			July-December 2014				January-June 2015			
	Medical Service	Non-Medical Service	Combined	Medical Service	Non-Medical Service	Combined	% Increase/Decrease	Medical Service	Non-Medical Service	Combined	% Increase/Decrease
Youth Link	147	44	191	151	67	218	14%	-	-	-	-
CMH Division Average	83	24	108	62	18	80	-26%	-	-	-	-

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Proportion of Services (Avatar)	January-June 2014										
	Assessments	Case Management	Collateral	Crisis Services	Placement	Plan Development	Rehab	Therapy	Med Services	Day Treatment Services	Total
Youth Link	21.19%	21.91%	2.55%	0.04%	0.00%	10.25%	0.00%	44.07%	0.00%	0.00%	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%

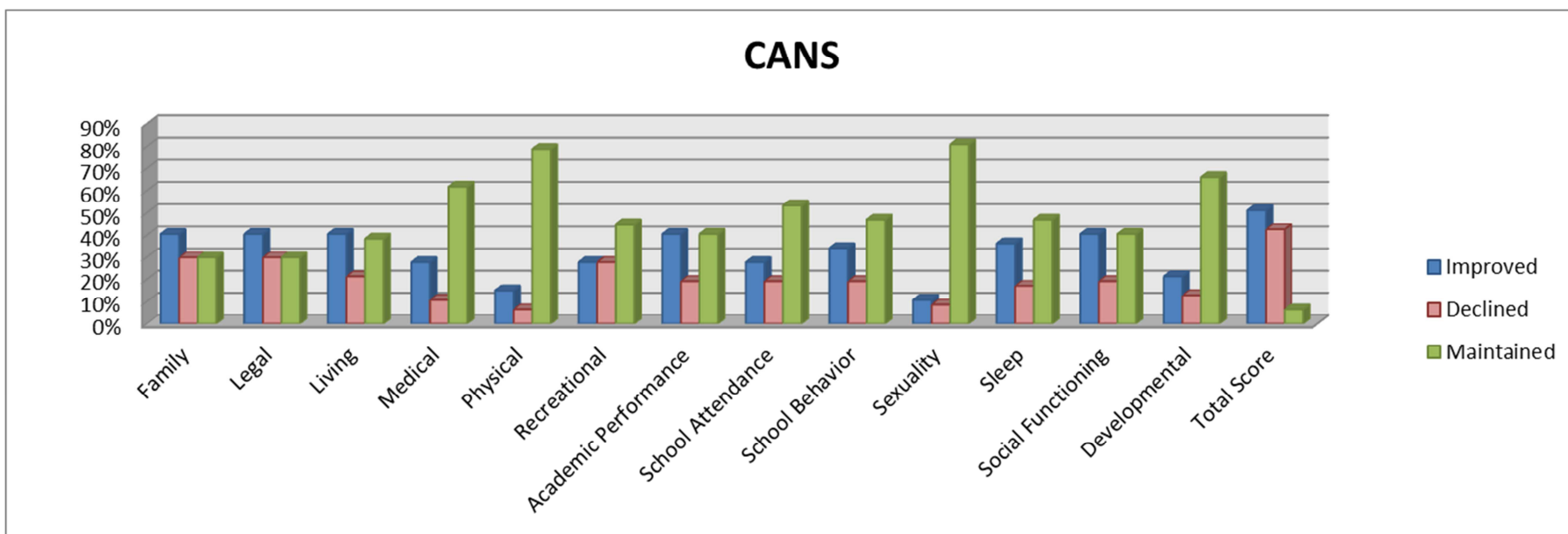
Proportion of Services (Avatar)	July-December 2014										
	Assessments	Case Management	Collateral	Crisis Services	Placement	Plan Development	Rehab	Therapy	Med Services	Day Treatment Services	Total
Youth Link	16.81%	16.64%	2.91%	0.00%	0.00%	7.11%	0.00%	56.53%	0.00%	0.00%	100.00%
CMH Division Average	5.63%	17.17%	6.24%	6.61%	0.02%	6.75%	7.76%	44.22%	2.41%	3.19%	100.00%

Proportion of Services (Avatar)	January-June 2015										
	Assessments	Case Management	Collateral	Crisis Services	Placement	Plan Development	Rehab	Therapy	Med Services	Day Treatment Services	Total
Youth Link	0.00%	15.14%	1.43%	0.00%	0.00%	2.57%	0.00%	80.86%	0.00%	0.00%	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%

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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.” Data on CANS was pulled for January 2014-June 2015 and 47 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.

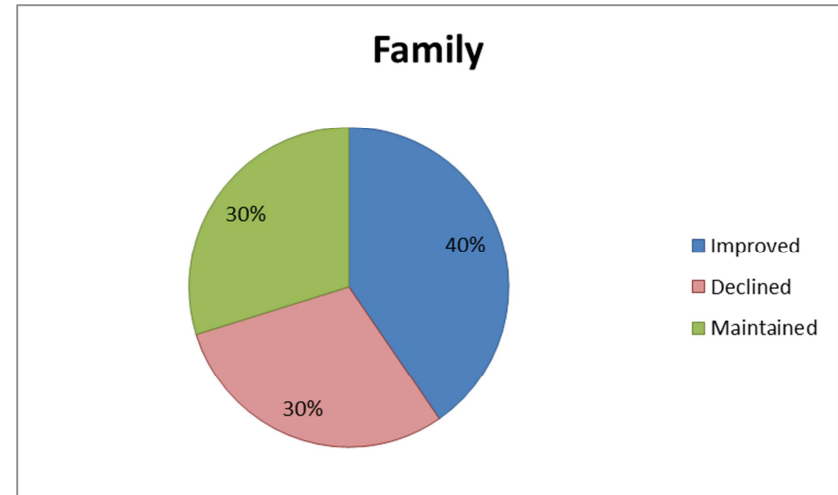


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CANS Family Relationships Domain:

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.)

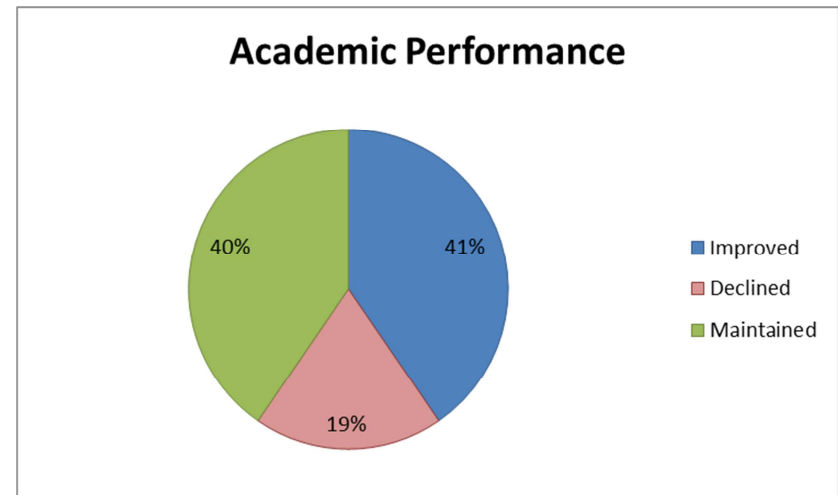
- 40% of clients showed an improvement.
- 30% maintained family relationships while in the program.



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.)

- 41% of clients showed an improvement.
- 40% maintained academic performance while in the program.

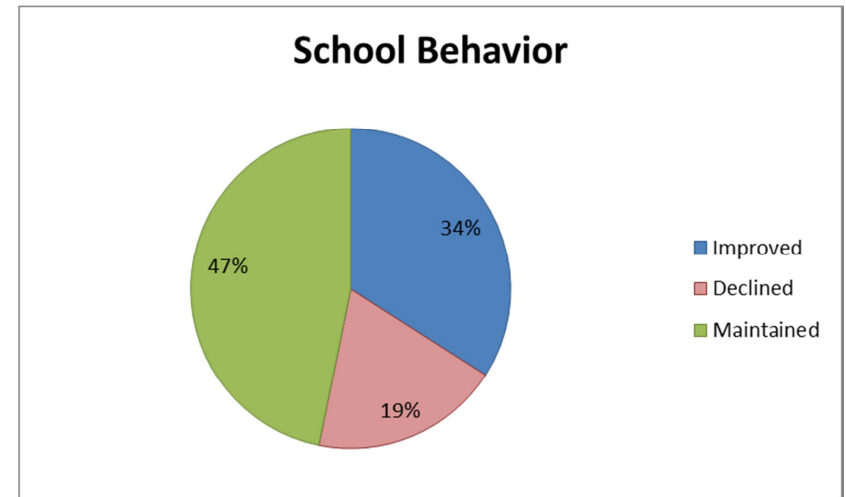


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CANS School Behavior Domain:

School Behaviors 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.

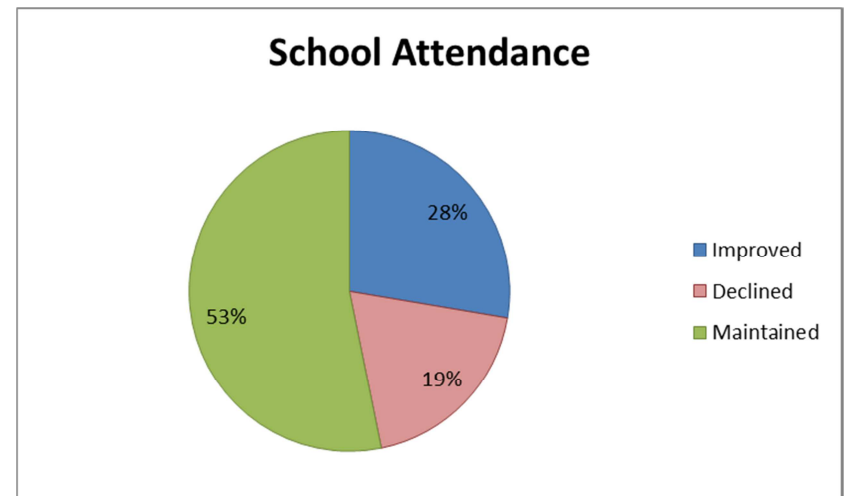
- 34% of clients showed an improvement.
- 47% maintained school behavior while in the program.



CANS School Attendance Domain:

School attendance will improve – Improvement is measured by comparing the client's attendance

- 28% of clients showed an improvement.
- 53% maintained school attendance while in the program.



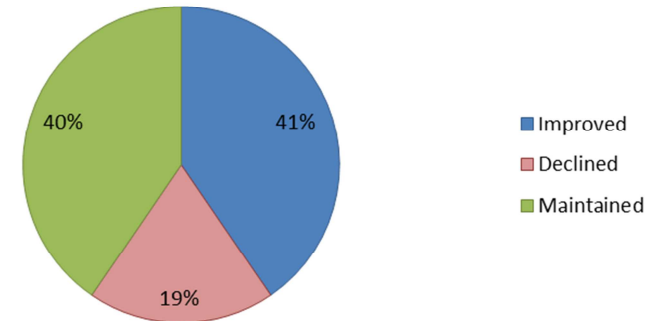
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CANS Social Functioning Domain:

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

- 41% of clients showed an improvement.
- 40% maintained social functioning while in the program.

Social Functioning

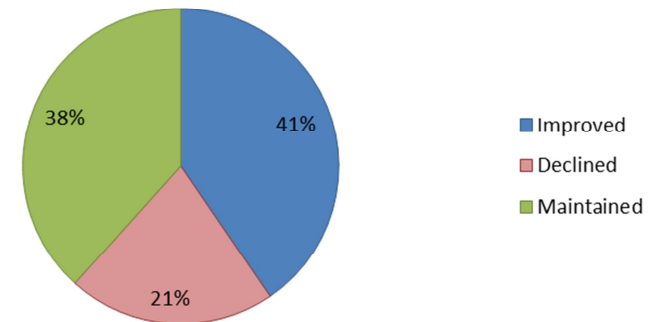


CANS Living Situation Domain:

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.)

- 41% of clients showed an improvement.
- 38% maintained their living situation while in the program.

Living



DEPARTMENT RECOMMENDATION(S): The Department recommends discontinuing funding for the Youth Link program for FY 2015-16.