

**PROGRAM INFORMATION:**

<b>Program Title:</b>	California Psychological Institute	<b>Provider:</b>	California Psychological Institute
<b>Program Description:</b>	Outpatient specialty mental health services for children and youth with serious emotional disturbances and parents with a serious mental illness and court-specific services to children and families in Fresno County's Child Welfare Services system.	<b>MHP Work Plan:</b>	4-Behavioral health clinical care
<b>Age Group Served 1:</b>	ADULT	<b>Dates Of Operation:</b>	2001-current
<b>Age Group Served 2:</b>	CHILDREN	<b>Reporting Period:</b>	July 1, 2015 - June 30, 2016
<b>Funding Source 1:</b>	Medical FFP	<b>Funding Source 3:</b>	Other, please specify below
<b>Funding Source 2:</b>	EPSDT	<b>Other Funding:</b>	DSS

**FISCAL INFORMATION:**

<b>Program Budget Amount:</b>	\$3,000,000	<b>Program Actual Amount:</b>	\$2,871,941.26
<b>Number of Unique Clients Served During Time Period:</b>	1,138		
<b>Number of Services Rendered During Time Period:</b>	18,595		
<b>Actual Cost Per Client:</b>	\$2,523.59		

**CONTRACT INFORMATION:**

<b>Program Type:</b>	Contract-Operated	<b>Type of Program:</b>	Outpatient
<b>Contract Term:</b>	01/01/2009 -- 09/30/2015; 06/30/2019 (10/01/2015 -- 06/30/2017 plus two optional one-year extensions)	<b>For Other:</b>	
		<b>Renewal Date:</b>	07/01/2017
<b>Level of Care Information Age 18 &amp; Over:</b>	Medium Intensity Treatment (caseload 1:22)		
<b>Level of Care Information Age 0- 17:</b>	Outpatient Treatment		

**TARGET POPULATION INFORMATION:**

**Target Population:** All referred children, youth, parents, guardians, and foster parents of children with an open Child Welfare case. This target population includes children and youth referred to in the *Katie A. Settlement Agreement* as members of the “class” and “subclass.”

**MHSA CORE CONCEPTS:**

**Please select MHSA core concepts embedded in services/ program:**

*(May select more than one)*

Choose an item.

Choose an item.

Choose an item.

Choose an item.

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

Click here to enter text.

**PROGRAM OUTCOME GOALS:**

1. Less than 20% of clients discharged from services will be discharged for non-compliance.
2. A follow up service will be scheduled within 15 days of the initial assessment for all active clients.
3. 90% of all clients referred for psychiatric evaluations will be offered an appointment within 30 days.
4. Children in treatment over 6 months will demonstrate stability or improvement in the Child and Adolescent Needs and Strengths assessment (CANS) “Life Domain Functioning” category.
5. 90% of all clients report overall satisfaction with their services.
6. Crisis referrals will be assessed within 3 days, priority referrals will be assessed within 15 days and standard referrals will be assessed within 30 days.

**PROGRAM OUTCOME DATA/INDICATORS:**

1. CPI discharged 452 clients during the last fiscal year. Of the total discharged 16.8 % of them were due to non-compliance. Non-compliance is defined as choosing to voluntarily terminate services before significant progress is made, moving out of county, and incarceration.
2. On an average, all clients that were recommended for ongoing treatment at the time of assessment were provided follow up services within 13.3 days. Engagement can be measured by client participation. Our goal to increase engagement and provide appropriate continued care is to have a follow up services within 15 days. Of the 240 clients assessed and recommended for ongoing services 75% of clients were provided a follow up service between 1-15 days, 20% were provided a follow up service between 16-25 days and 5% were provided a follow up service between 25-44 days. Common causes for a delay in the second service are often related to placement changes, no shows, care providers needing a specific day and time, a change in contact information, waiting on consent for treatment from bio parents or further information from social workers.
3. CPI has a psychiatrist on staff two days a week. Clients are referred by their treating therapist for a medication evaluation or a court order can be submitted. Our goal is to complete the evaluation within the first 30 days of referral. In fiscal year 15-16 all medication assessments were completed within 34 days some as early as 24 hours. We continue to strive for easy access to services with our limited availability to our psychiatrist. Appointments are usually available within 15 days of referral but clients no show, cancel and request certain days and times to accommodate their schedules which is of most common reason for delay. Holidays also contribute to delays occasionally.
4. The Life Functioning Domain in The Child and Adolescent Needs and Strengths Assessment (CANS) identifies a client's needs and strengths in areas such as living situation, school, social functioning, medical, behavior and school attendance and achievement. Overall, there was a decrease or stabilization in need for 71% of clients while in treatment at CPI. Mental health treatment can provide some of the tools necessary for managing needs in the Life Functioning domain. However, an increased score in this area may have no relation to the overall mental health, emotional or behavioral functioning of a child. For example, a client may have a high need for support in residential placement but this need could solely be due to the life circumstance of the foster parent (a promotion that will take them out of state, retirement from foster care, illness, etc.). Therefore, the CANS is helpful at identifying client needs, not necessarily progress in mental health treatment.
5. CPI administers a satisfaction survey for clients, care givers and parent's multiple times per year. Of those surveyed, 92% of clients, caregivers and parents reported great satisfaction with their services. 95% of clients, care givers and parents reported that they have learned skills and approaches that have helped them in their daily lives. 100% of clients, caregivers and parents reported that they felt their therapist treated them with respect. CPI understands that when our clients and families feel respected, the likelihood of engagement is sharply increased.
6. CPI received 345 referrals in fiscal year 15-16. Of those 62 were inactivated prior to assessment due to various reasons (ex: incarceration with no release date, DSS case closed, clients moving out of State or County and already being engaged with another provider, clients being too young to participate in an assessment). CPI received 283 viable referrals, of these referrals, 9 were classified as a crisis referral by the social worker. Each crisis referral was carefully reviewed and 7 of 9 were deemed in need of crisis response (3-day assessment). All 7 (100%) were assessed within 3 days, 2 were assessed within 48 hours. 84 referrals were identified as priority

referral of which 62 (74%) were assessed within 15 days. Of the standard referrals received, 237 were assessed within 30 days and 46 were assessed between 30-45 days. The delay in assessment (over 30 days) was largely due to placement change(s) prior to receipt of the referral, delays in receiving the updated contact information, difficulty making contact, families/clients requesting an assessment date after the 30-day mark, or receipt of referral occurring during the holiday season or at the start of the contract (October 2016) when CPI was building clinical capacity

**DEPARTMENT RECOMMENDATION(S):**

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