

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

PROGRAM TITLE: Family Advocacy Services **PROVIDER:** Kristi Williams

PROGRAM DESCRIPTION: Provide family advocacy services, support, and linkages to family members/care providers of those receiving mental health services or who are experiencing first on-set of symptoms.

AGES SERVED:

X Children	X TAY
X Adult	X Older Adult

DATES OF OPERATION: December 2013 – current

DATES OF DATA REPORTING PERIOD: January 1st 2014 through June 30th 2015

COST PER CLIENT: Actual Expenditures \$112,487.87 / 602 Unique Clients Served = \$186.86 (January 2014 through June 2015)

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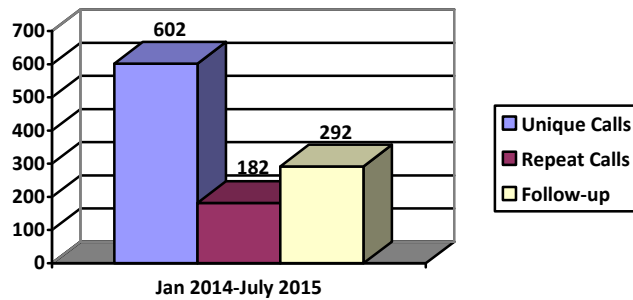
GOAL

1. Provide advocacy services as initiated by incoming requests, document disposition including referrals/linkages and follow-up including duration.

DATA

- **1,076** calls logged
 - **602** unique family members
 - **182** repeat callers
 - **292** follow up calls made by Advocate. (see graph 1)
- **73%** of calls were for advocacy and support.
- **27%** resulted in referrals or linkages
- **2 Days** Average service duration

Graph 1



Source of Referrals/Calls:

- **7%** Family/Friend
- **23%** County MH Providers
- **17%** Contracted Providers
- **30%** NAMI
- **3%** Parent's Rights Advocates
- **20%** Other/Not Reported

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2. Increase family member/caregiver level of functioning, Confidence, and awareness of relapse prevention.

Services Received By Care Provider:

- **13%** Spouse/Partner
- **63%** Parent
- **21%** Other Family
- **3%** Non-Relative

Before receiving help from the Family Advocate

- **52%** of Care Providers Reported (Strongly Agreed) that their care giving responsibilities:
 - Led to to feeling of depression, anxiety, hopelessness;
 - Was a burden that they couldn't handle;
 - Led to conflict with their family;
 - Prevented them from takeing care of their own needs.*(graph 2A on page 4)*

After receiving help from the Family Advocate

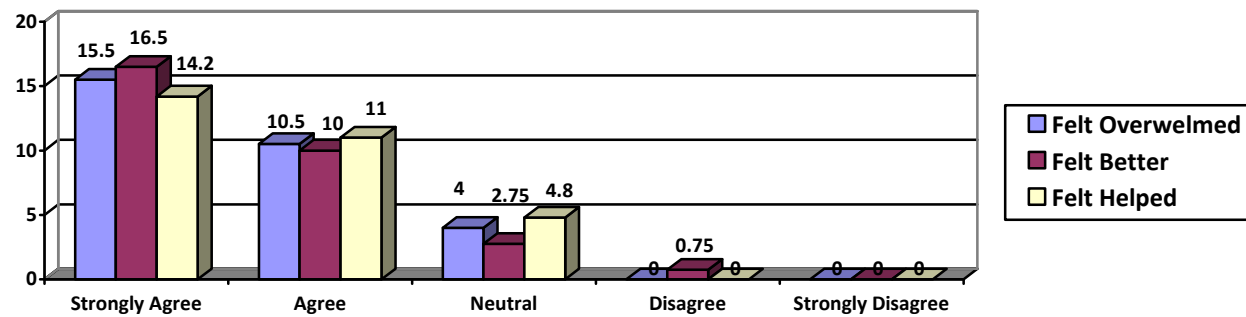
- **55%** of Care Providers Reported (Strongly Agreed) that their care giving responsibilities were:
 - Less likely to cause feelings of depression, anxiety and hopelessness;
 - Less of burden;
 - Less likely to cause conflict with their family; and
 - Less likely to prevent them from takeing care of their own needs.*(graph 2A on page 4)*
- **47%** of Care Providers Reported (Strongly Agreed):
 - Increased confidence and awareness of relapse prevention;
 - Increased knowledge of and access to resources;
 - Increased referrals/linkage to services;

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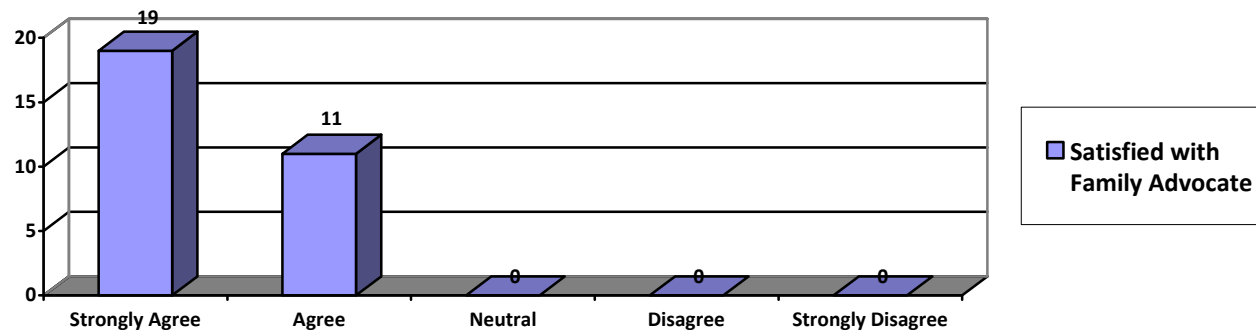
- Increased awareness of the impact of mental illness;
- Decreased level of stigma surrounding mental issues.
(graph 2A on page 4)

- **63%** of Care Providers Reported (Strongly Agreed) that they are satisfied with the help and support received
(graph 2B on page 4)

Graph 2A



Graph 2B



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GOAL

- 3. Increase family member/caregiver access to resources including community organizations, government benefits, self-help programs, support groups, and other appropriate referrals and linkages.**

- 4. Assist in orientation of new families entering the mental health system by educating and increasing awareness of the impact of mental illness on family members and minimizing stigma surrounding mental health issues**

DATA

Access to resources and information was increased as a result of linking families to:

- NAMI Support Groups and trainings;
- Ala-Non;
- First On-set Family meetings; and
- 54 Hours (three six-week courses at 3 hours per week) of NAMI Mental Health Basics Training provided by Advocate.

Assists in orientation of new families by:

- Working closely with Fresno County Law Enforcement Field Clinicians;
- Acting as a first contact for families when seeking answers and help with Conservatorship;
- Participating in the Assertive Community Team's (ACT) transition plan for families; and Participating in the ADHD Parent Groups for Children's mental health.

DEPARTMENT RECOMMENDATION(S):

Recommend to continue with the services as contracted (contract expires on June 30, 2018) at this time.
Any further growth of Family Advocate services to be vetted through MHS Annual Update process in 2016.