FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

PROGRAM TITLE: SOS **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.

AGES SERVED:

- ☐ **Children**
- ☒ **Adult**
- ☒ **TAY**
- ☒ **Older Adult**

DATES OF OPERATION: July 2, 2012 – Current **DATES OF DATA REPORTING PERIOD:** Jan-Dec 2014

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OUTCOME GOALS **OUTCOME DATA**

SOS PROGRAM GOAL 1: Contractor shall track response time to emergency departments/5150 facility by SOS team members. Response to Emergency Department is expected within 30 minutes or less.

> **SOS Program Outcome 1:** CY 2014 average response time from SOS facility to emergency department is ***18.9 minutes*** well below the expected goal of 30 minutes

SOS PROGRAM GOAL 2: Contractor shall track the amount of time it takes to place consumers from the emergency department to the SOS facility. The average time spent at the emergency facility constitutes the data for this goal.

> **SOS Program Outcome 2**: CY 2014 average time from arrival at ED/5150 facility to departure to SOS facility was *15 minutes*; consistent with the time it take to secure consent from the client to be transported as well as discharge information from hospital staff.

SOS PROGRAM GOAL 3: Contractor shall track consumers with behavioral health disorders who are frequent users of hospital ED/5150 facilities and monitor recidivism of those consumers

> **SOS Program Outcome 3**: CY 2014 data show 611 discharges for the calendar year. Consumers are tracked from intake forward 90 days for revisits to the emergency room and/or subsequent hospitalizations. Data presented here are limited to information available in Avatar and does not, as a result, include repeat visits to CRMC. Data presented is data for revisits to Exodus facility only.
>
> As reported in Avatar, 287 unique persons or 47% had no identifiable return visits to Exodus during the time of involvement in the SOS Program. 166 persons (27.2%) had one recorded visit. And 63 (10.3%) had two visits to Exodus. This suggests that 84.5% of persons who were served by SOS did not have excessive repeat visits to the 5150 evaluation facility. Of course, this data is to be interpreted cautiously as there is no

information available for those consumers presenting at CRMC, St. Agnes and other area emergency departments.

Data is similarly tracked for psychiatric hospitalization from intake admission at SOS to 90 days forward. Avatar is queried to identify hospital utilization. For 589 of the 611 individuals discharged in 2014 from SOS, there is no evidence of psychiatric hospitalization. This represents 96.4% of consumers discharged from SOS and suggests that the vast majority of persons presenting at ED/5150 facilities for "crisis," in fact are not requiring a 5150 hold to stabilize their condition. This also suggests that SOS is providing a valuable service by assisting ED/5150 facilities to clear their facilities efficiently.

Comparison data from pre-SOS involvement to post SOS involvement with regard to 5150 visits and hospitalizations was not available due to a long period of no access to the Avatar system after conversion to the cloud based system.

SOS PROGRAM GOAL 4: Contractor shall monitor report and track appropriate linkage successes and challenges.

SOS Program Outcome 4: The tables below shows discharge status for 611 individuals who discharged in CY 2014:

DISCHARGE STATUS	NUMBER	PERCENT
Successfully Linked	154	25.3
Linked but not known active at discharge	90	14.7
Declined services for linkage	137	22.4
Unable to locate	153	25.1
Moved out of county	27	4.4
Incarcerated	21	3.4
Primary AOD problem	15	2.4

Not SMI	3	0.50
Other	11	1.8
TOTAL	611	100

Successes: Forty percent of individuals were successfully linked with one or more mental health service and 25% of persons discharged were actively participating in a mental health service at time of discharge.

Challenges: Because at least 80% of consumers served by SOS are homeless, follow-up contact is very difficult and many consumers get lost until the next visit to the ED or 5150 facility. Keeping consumers engaged in services is also a challenge and once linkages have been made; contact with SOS is less intensive as responsibility for engagement shifts to the mental health provider.

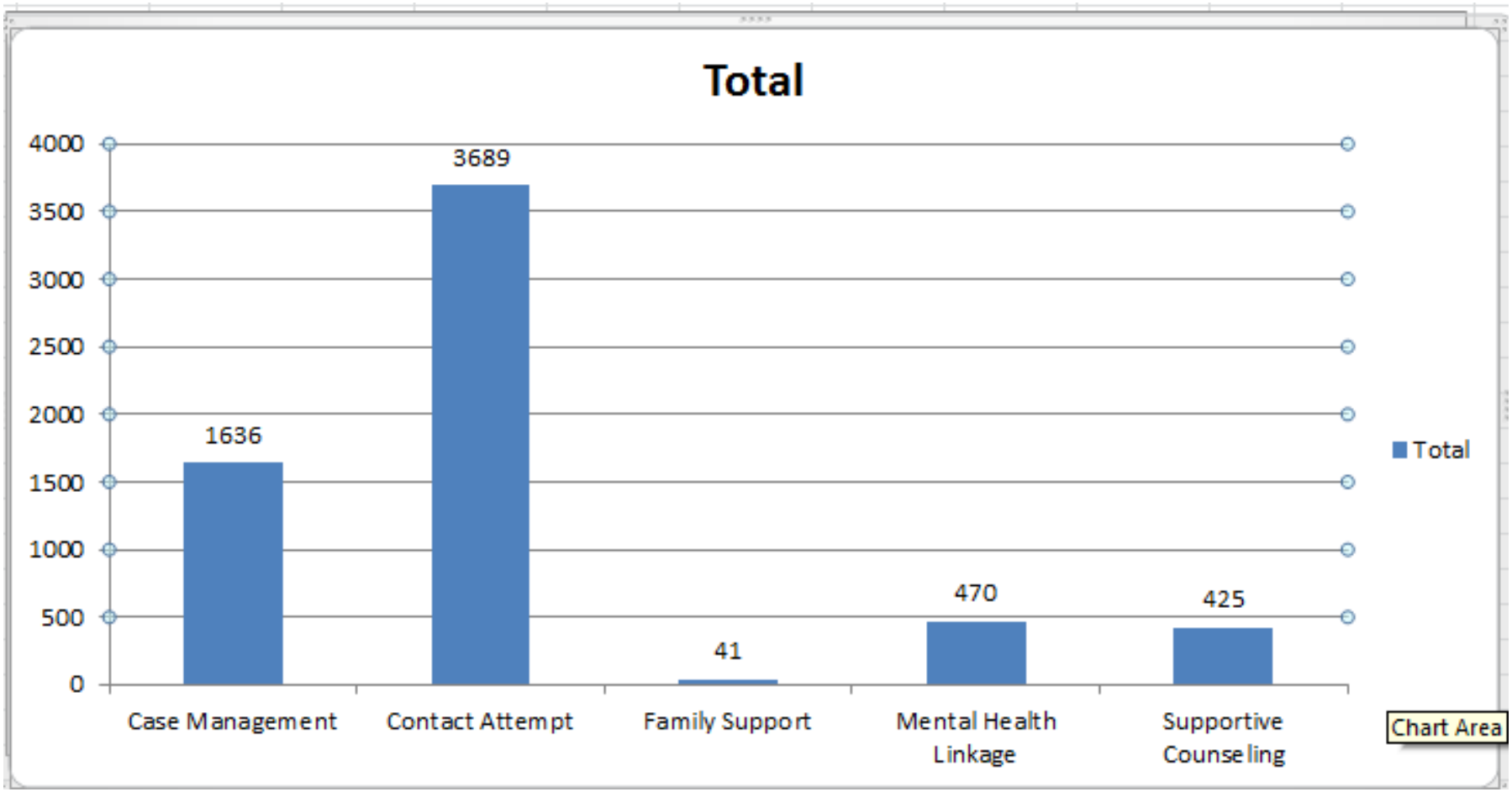
The following table illustrates specific mental health linkages by agency. Three hundred eighty-four (384) consumers were linked during their time in SOS

AGENCY	NUMBER
DBH: First Onset	4
DBH: Older Adult	4
DBH: Metro	66
DBH: UCWC	87
MHS Impact	4
Turning Point Co-Occurring	23
Turning Point ICCST	38
Turning Point: IMH	35
Turning Point: TAY	19
Turning Point: Rural	32
WestCare OPTIONS	23
Parolee Outpatient Clinic	5

Other	44
TOTAL	384

SOS PROGRAM GOAL 5: Contractor shall track, report and monitor follow-up contacts with consumers by case managers. These include the following types of services: linkage to mental health, case management, supportive counseling, family support and education and active efforts to contact consumers for follow-up. For CY 2014 case management activities are summarized in the graph below.

SOS Outcome 5: Data for CY 2014 show that 6261 activities were logged by case managers in efforts to get consumers linked to on-going mental health services after initial orientation and intake.



SOS PROGRAM GOAL 6: Contractor shall track clinical outcomes by discharge placement

SOS Outcome 6: Clinical outcomes by discharge placement are summarized below and are based on data presented in Program Goal 4:

Clinical Outcome 1: Forty percent (40) of consumers were linked to services

Clinical Outcome 2: Those consumers *successfully linked and active at discharge* (154) exhibit the following characteristics: they are linked to an identifiably appropriate mental health service; they are able to take an active role in their services, hospitalizations are minimized and returns to the ED are minimal; homeless consumers have been able to take advantage of housing opportunities.

Clinical Outcome 3: Consumers *linked but not active at discharge* (90) exhibit the following clinical outcomes; they are linked to an appropriate individual mental health service, they are familiarized with the range of options available to them; when stabilized homeless consumers can take advantage of housing opportunities and they are offered further supportive services should linkages fail.

Clinical Outcome 4: Consumers who *declined further services* (137) exhibit the following characteristics: they do not consider themselves to be mentally ill or in need of services; they exhibit a high level of denial and poor insight and many have co-occurring substance use disorders they are unwilling to address. They tend to recidivate to area ED/5150 facilities when experiencing a transient crisis.

Clinical Outcome 5: Consumers who cannot be contacted (153) represent 25% of all consumers and exhibit the following characteristics: high levels of denial and poor insight, mostly homeless, are in a constant state of transition and avoid services, except when in a transient crisis; these consumers are more likely to recidivate to are ED/5150 facilities.

Clinical Outcome 6: Those consumers who are identified as *primary substance abusers* in need of linkage to residential and/or outpatient substance use services (15) represent only 2.4% of consumers served at SOS, though co-occurring mental health disorders are highly prevalent across the board for SOS consumers (about 80%). In 2014, a total of 15 persons with primary substance abuse disorders were linked directly to substance abuse services.

SOS PROGRAM GOAL 7: Contractor will develop a satisfaction survey, approved by DBH that complies with mandated state performance outcome and quality improvement reports. At a minimum, eight percent of consumers will report satisfaction with program services.

SOS Outcome 7: WestCare is not in compliance with this requirement at this time. We are unable to locate consumer satisfaction surveys that were completed in CY 2014. It is not known if surveys were ever completed and where they are stored.

SOS PROGRAM GOAL 8: Contractor will identify services provided to each consumer

SOS Outcome 8: For CY 2014 SOS provided a total of 11,080 activities for consumers. Activities are displayed in two categories. Category One (4819 services) includes intake activities performed by Personal Service Coordinators and Peer Support Specialists. Category Two (6261 services) includes various support activities provided by case managers in efforts to get consumers linked to appropriate mental health services.

Contact attempts involve field visits and outreach efforts, coordination with other mental health providers, Fresno County Jail inmate locater, and confidential census reports provided by psychiatric hospitals as well as phone contacts.

Category One: Non Case Management	**Number**	**Category Two: Case Management**	**Number**
Hospital Intake	1499	Case Management	1636
Intake at SOS facility	2579	Contact Attempt	3689
Transportation	741	Family Support	41
		Mental Health Linkage	470
		Supportive Counseling	425
TOTAL CATEGORY ONE	4819	TOTAL CATEGORY TWO	6261

It should be noted that activities related to hospital intake, orientation and transportation showed a dramatic increase over CY 2013 from 1482 services to a high of 4819. This may reflect a difference in how data was collected but is consistent with an increase in both intakes and discharges for CY 2014.