

PROGRAM INFORMATION:

Program Title:	Crisis Acute Care-Law enforcement Field Clinician (LEFC)	Provider:	Department of Behavioral Health	
Program Description:	<p>The role of the Law Enforcement Field Clinician is to educate law enforcement officers about mental health, writing 5150 holds, and the 5150 process. This is accomplished by assisting law enforcement in responding to mental health crisis calls (in vivo training), both in the field and through phone consultation. Formal didactic training is also offered. Field response support is designed to assist with de-escalation and evaluation of crisis needs and mental health resources. The goals are increased safety for the client, the community and the officer, quick resolution of the crisis, and appropriate, timely mental health intervention for the client and family.</p> <p>Staffing for the program consists of 2 Mental Health Clinicians.</p>		MHP Work Plan:	1-Behavioral Health Integrated Access
Age Group Served 1:	ALL AGES	Dates Of Operation:	June 10, 2009 - Current	
Age Group Served 2:		Reporting Period:	July 1, 2016 - June 30, 2017	
Funding Source 1:	Prevention (MHSA)	Funding Source 3:	Medical FFP	
Funding Source 2:	Early Intervention (MHSA)	Other Funding:	Click here to enter text.	

FISCAL INFORMATION:

Program Actual Amount:	\$283,944
Number of Unique Clients Served During Time Period:	371
Number of Services Rendered During Time Period:	438
Actual Cost Per Client:	\$765

TARGET POPULATION INFORMATION:

Target Population: Individuals experiencing acute mental health symptoms for which law enforcement is requesting assistance in assessing for Danger to Others (DTO), Danger to Self (DTS), or Gravely Disabled (GD).

CORE CONCEPTS:

- **Community collaboration:** Individuals, families, agencies, and businesses work together to accomplish a shared vision.
- **Cultural competence:** Adopting behaviors, attitudes and policies that enable providers to work effectively in cross-cultural situations.
- **Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services:** Adult clients and families of children and youth identify needs and preferences that result in the most effective services and supports.
- **Access to underserved communities:** Historically unserved and underserved communities are those groups that either have documented low levels of access and/or use of mental health services, face barriers to participation in the policy making process in public mental health, have low rates of insurance coverage for mental health care, and/or have been identified as priorities for mental health services.
- **Integrated service experiences:** Services for clients and families are seamless. Clients and families do not have to negotiate with multiple agencies and funding sources to meet their needs.

Please select core concepts embedded in services/ program:

(May select more than one)

Access to underserved communities

Cultural Competency

Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services

Please describe how the selected concept (s) embedded :

Diverse staff, staff trainings on cultural awareness, referrals to culturally appropriate community services, and outreach at cultural events are provided to reflect respect for cultural values of the clients.

The program focus is a client driven goal setting and to link clients to a range of services that are a part to the client’s path to recovery, which stress recovery values of hope, personal responsibility, self-advocacy, choice and respect.

PROGRAM OUTCOME & GOALS

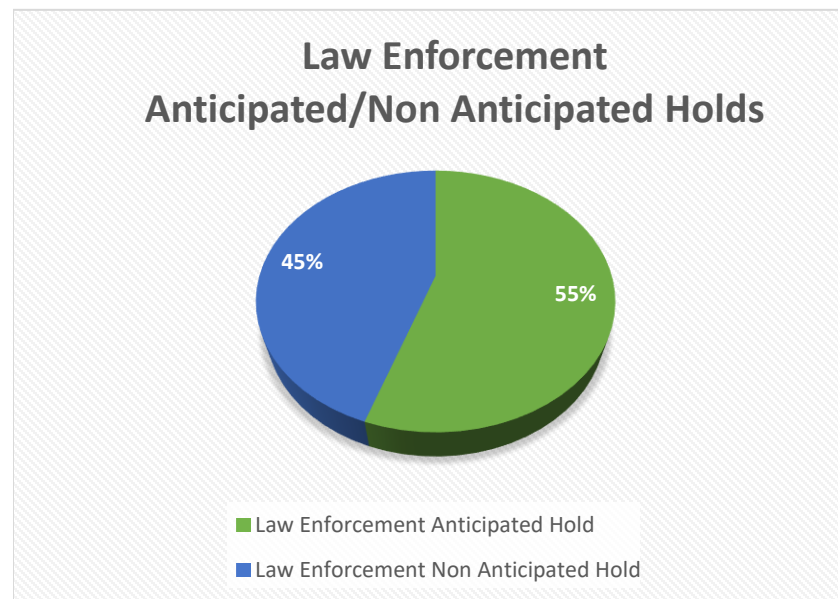
- **Must include each of these areas/domains:** (1) Effectiveness, (2) Efficiency, (3) Access, (4) Satisfaction & Feedback Of Persons Served & Stakeholder
- **Include the following components for documenting each goal:** (1) Indicator, (2) Who Applied, (3) Time of Measure, (4) Data Source, (5) Target Goal Expectancy

1. Effectiveness-

a. Accuracy of Mental Health Evaluation by Law Enforcement

- i. Objective: To link clients to mental health services as needed during interaction with law enforcement.
- ii. Indicator: Percent of holds for which law enforcement did not initially identify a mental health need.
- iii. Who Applied: Any client served by the program. This may include duplicates as this data measures encounters; client may have more than one encounter with law enforcement and clinician.
- iv. Time of Measure: FY 16-17
- v. Data Source: LEFC database
- vi. Target Goal Expectancy: The Department is developing target goals.
- vii. Outcome: In total 376 holds were issued by the clinician during a law enforcement encounter. Of those, 45% were encounters where law enforcement did not initially identify a mental health need.

	Encounter Counts
Law Enforcement Anticipated Hold	208
Law Enforcement Non Anticipated Hold	168
Total Holds	376



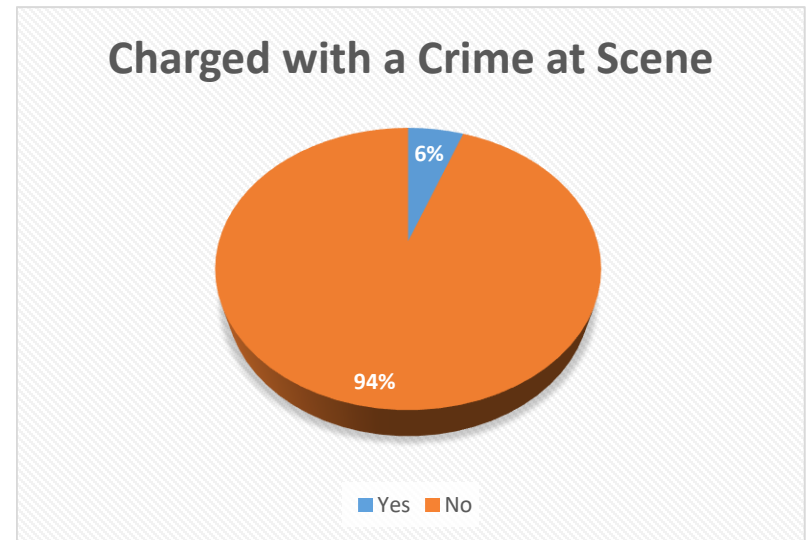
On scene behavioral health intervention yielded approximately 168 hours of in vivo mental health education and training for law enforcement. Each encounter equals approximately one hour of law enforcement and clinician intervention.

b. Charged with Crime During a Law Enforcement and Field Response Interaction

- i. Objective: To provide intervention, which may reduce or avoid placement of individuals in jail when client is in need of mental health services.
- ii. Indicator: Percent of clients who were not charged with a crime during law enforcement and field response encounter.
- iii. Who Applied: Any client served by the program. This may include duplicates as this data measures encounters; client may have more than one encounter with law enforcement and clinician.
- iv. Time of Measure: FY 16-17
- v. Data Source: LEFC database
- vi. Target Goal Expectancy: The Department is developing target goals.
- vii. Outcome: 94% of encounters with law enforcement did not result in a charge with a crime with clinician intervention.

Charged with a Crime at the Scene

	Encounter Counts
Yes	22
No	370
Total Encounters	392



2. Efficiency

a. Cost per Client

Costs include all staffing and overhead costs associated with operation of the program.

- i. Objective: To maximize the use of resources and keep within budgeted costs.
- ii. Indicator: Total program costs compared to number of unique clients served.
- iii. Who Applied: Clients served by the program. Client served for this data represents clients who received any specialty mental health services in FY 16-17.
- iv. Time of Measure: FY 16-17
- v. Data Source: Avatar and Financial Records
- vi. Target Goal Expectancy: To keep within departmental budgeted costs for the program.
- vii. Outcome: Compared to prior year, the cost per client for FY 16-17 decreased by 47%. The number of unique clients served increased by 53%. Some indicators for increase in clients served could include continued outreach efforts, training and relationship building with law enforcement agencies.

Note: The cost per client includes data for direct client services and does not reflect time spent on remote consultations with law enforcement.

Cost per Client

	FY 15-16	FY 16-17
Unique Clients	242	371
Program Cost Actuals	\$346,311	\$283,944
Cost per Client	\$1,431	\$765