FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

PROGRAM INFORMATION:

Program Title: Exodus 24/7 Mental Health Access Line

Program Description: In addition to the CSC for adults and

youth, Exodus Recovery operates a tollfree 24/7 Access Line for DBH in accordance with state and federal regulations and utilizes the County's Access Line Database to maintain a log

of all requests for mental health services.

Provider: Exodus Recovery, Inc.

MHP Work Plan: 1—Behavioral Health Integrated Access

Choose an item. Choose an item.

\$639.753

Age Group Served 1: ALL AGES

Age Group Served 2: Choose an item.
Funding Source 1: Medical FFP

Funding Source 2: Realignment

Dates Of Operation: July 1, 2016 to Present

Reporting Period: July 1, 2022 - June 30, 2023

Funding Source 3: Choose an item.

Program Actual Amount:

Other Funding: Click here to enter text.

FISCAL INFORMATION:

Program Budget Amount: \$1,231,320

Number of Unique Clients Served During Time Period:

5,522

Number of Services Rendered During Time Period: 9,189

Actual Cost Per Client: \$70

CONTRACT INFORMATION:

Program Type: Contract-Operated

Contract Term: Click here to enter text.

Level of Care Information Age 18 & Over: N/A Choose an item.

Level of Care Information Age 0- 17: N/AChoose an item.

Type of Program: Other, please specify below

For Other: Access Line Renewal Date: 07/01/2023

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The levels of care shown above do not apply.

TARGET POPULATION INFORMATION:

Target Population: No particular target population. The toll-free Access Line is open and accessible to all populations.

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)

Community collaboration

Access to underserved communities

Integrated service experiences

Choose an item.

Please describe how the selected concept (s) embedded:

Exodus has provided a welcoming environment where a person in crisis or with urgent mental health needs will immediately be seen and evaluated by a professional and receive the services he/she needs. Treatment has been client-centered by incorporating the client's input in determining the services and supports that are most effective and helpful for our clients. We have provided ongoing services until the client is successfully connected to community services. A key component of our treatment services is the development of a comprehensive discharge plan designed to transition the client to a less restrictive but supportive level of care, reestablish linkage to their previous service provider, and link clients and their families to a system of relevant community resources. These have included outpatient treatment, crisis residential beds, shelter beds, board and cares, sober living houses, and other programs.

FY 2022-23 Outcomes

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

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

Exodus has designed a continuous quality assurance and quality improvement (QI) process with strategies to measure variations in the structure, method and program outcomes for the through presentation to all stakeholders. Altogether, our Quality Management Program and Plan are dedicated to meeting the needs and to exceed the expectations of our clients, their factorized to meeting the needs and to exceed the expectations of our clients, their factorized to meeting the needs and to exceed the expectations of our clients, their factorized to meeting the needs and to exceed the expectations of our clients, their factorized to meeting the needs and to exceed the expectations of our clients, their factorized to meeting the needs and to exceed the expectations of our clients, their factorized to meeting the needs and to exceed the expectations of our clients.

With the assistance of Decision Support, Quality Improvement Department and program management, Exodus collects, manages and submits data for internal tracking purposes as well Admission Log") is used to collect and maintain data related to all Access Line calls received by Exodus.

***All data from this point forward is originated directly from the Access Line Annual Test Call Report

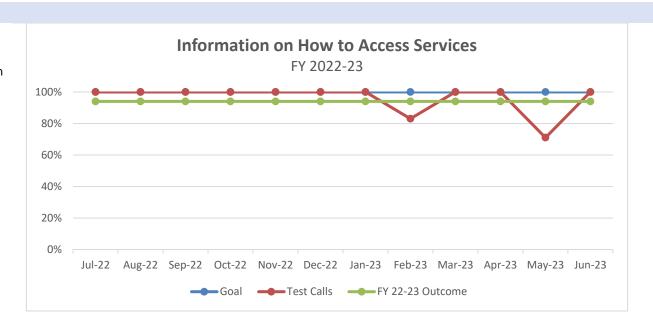
EFFECTIVENESS

Outcomes performance for FY 2022-23 is based on the overall average result for the test calls completed for that fiscal year, for each individual performance indicator.

Performance Indicator 1:	Information on how to access services
Numerator:	Number of callers informed on how to access services
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	94%

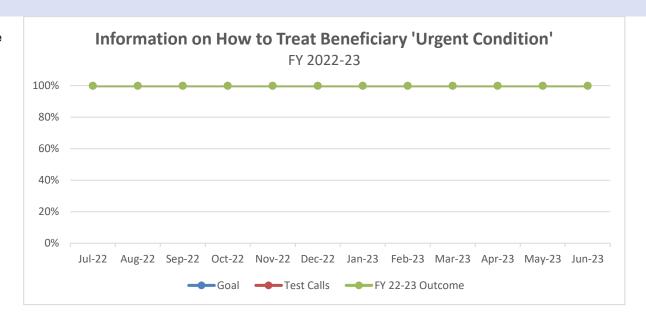
Graph:

The 'Test Calls' line indicates the overall percentage of calls made in that month which was provided appropriate information on how to access specialty mental health services (SMHS), file a grievance and/or appeal, how to receive a provider's list, etc. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



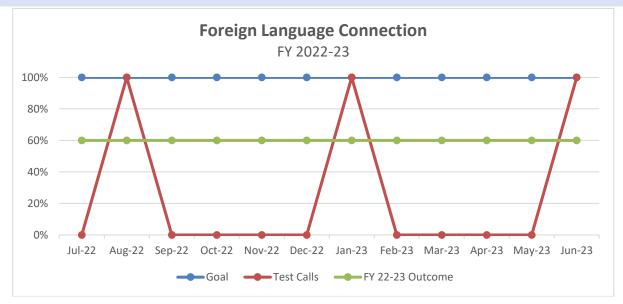
Performance Indicator 2:	Information on how to treat beneficiary 'Urgent Condition'
Numerator:	Number of test callers assessed for crisis
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	100%

The 'Test Calls' line indicates the overall percentage of test calls made in that month assessed for crisis. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



Performance Indicator 3:	Foreign Language Connection
Numerator:	Number of test calls, successfully connected to the language line and/or bilingual operator
Denominator:	Total number of test calls completed in a foreign language
Goal:	100%
Outcomes for FY 2022-23:	60%

The 'Test Calls' line indicates the overall percentage of test calls made in a foreign language connected to the language line and/or an Access Line operator who spoke the language. Of the 53 test calls made in this reporting period, 5 calls were made in a foreign language. Out of those 5 calls, 3 calls (60%) were connected to the language line and/or an Access Line operator who spoke the language.



OUTCOMES REPORT- Attachment A

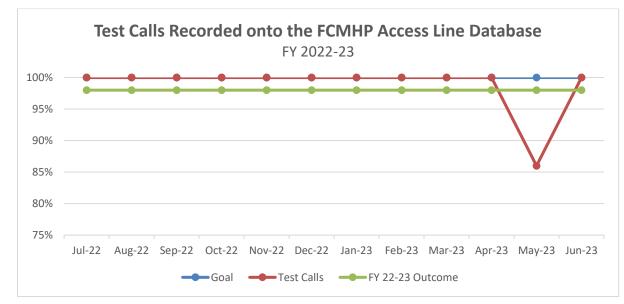
Performance Indicator 4:	Information on how to use the beneficiary problem resolution & fair hearing process
Numerator:	Number of test callers informed on how to file a complaint and/or fair hearing
Denominator:	Total number of grievance test calls
Goal:	100%
Outcomes for FY 2022-23:	Information was not available during this reporting period.
Graph:	

Outcomes performance for FY 2022-23 is based on the overall average result for the test calls completed for that fiscal year, for each individual performance indicator.

Performance Indicator 1:	Test calls recorded onto the FCMHP Access Line Database
Numerator:	Number of test calls recorded onto the FCMHP Access Line Database
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	98%

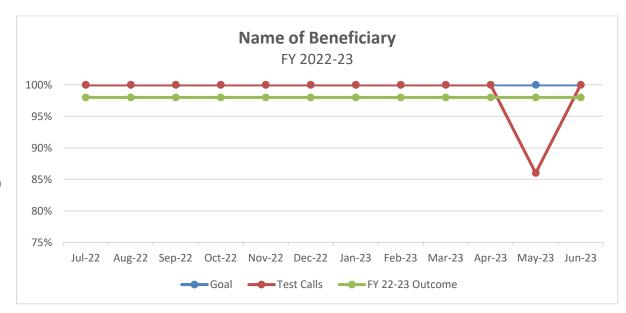
Graph:

The 'Test Calls' line indicates the overall percentage of calls made in that month logged onto the FCMHP Access Line Databse. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



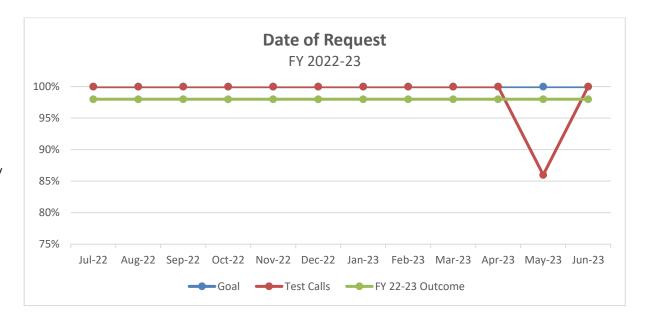
Numerator:	Number of accurate names recorded
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	98%

The 'Test Calls' line indicates the overall percentage of calls made in that month that had the names correctly logged on the FCMHP Access Line Database. Please note, if a test call was not logged onto the Database, the name the test caller used cannot be verified. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



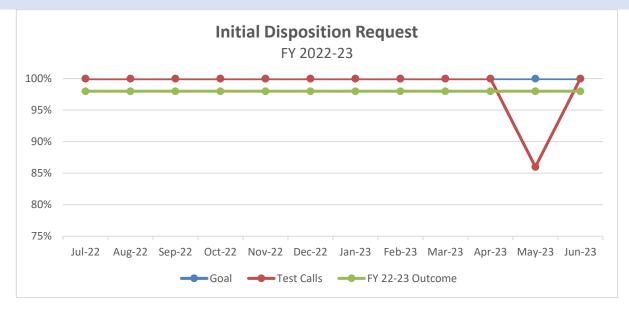
Performance Indicator 3:	Date of Request
Numerator:	Number of accurate dates recorded
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	98%

The 'Test Calls' line indicates the overall percentage of calls made in that month logged correctly with the date the call was made or within a timely manner (at least within 24 hrs from the time the test call was made) onto the FCMHP Access Line Database. Please note, unable to verify date if call was not logged onto the Database. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



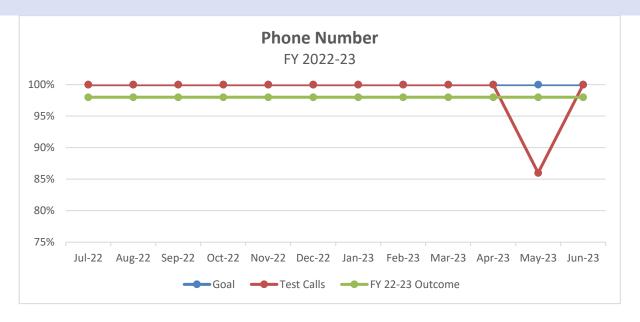
Performance Indicator 4:	Initial Disposition Request
Numerator:	Number of accurate dispositions recorded
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	98%

The 'Test Calls' line indicates the overall percentage of calls made in that month with the correct disposition/request in the FCMHP Access Line Database. Please note, unable to verify the disposition if the call was not logged onto the Database. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



Performance Indicator 5:	Phone Number
Numerator:	Number of accurate phone number recorded
Denominator:	Total number of test calls completed
Goal:	100%
Outcomes for FY 2022-23:	98%

The 'Test Calls' line indicates the overall percentage of calls made in that month with the correct phone number logged onto the FCMHP Access Line Database. Please note, if a test call is not logged onto the Database, phone number cannot be verified. On average, the number of test calls completed for each month is about five (5). The individual monthly Test Call Summary report is available upon request if needed.



ACCESS	
Performance Indicator 1:	Linked to Services
Numerator:	Number of callers linked to services
Denominator:	Total number of callers requesting specialty mental health services via MH Access Line
Goal:	70%
Outcomes for FY 2022-23:	Information was not available during this reporting period.
Performance Indicator 2:	Referred to Services
Numerator:	Number of callers referred to services
Denominator:	Total number of callers requesting specialty mental health services via MH Access Line
Goal:	70%
Outcomes for FY 2022-23:	Information was not available during this reporting period.
Performance Indicator 3:	Request to First Service
Numerator:	Total number of days to first services
Denominator:	Total number of callers via Access Line who received a first service (billable service)
Goal:	10 Business Days (non-urgent) and 48 hours (urgent)
Outcomes for FY 2022-23:	Information was not available during this reporting period.

SATISFACTION	
Performance Indicator 1:	Survey call respondent
Numerator:	Total # of callers who participated with the Caller Satisfaction Survey
Denominator:	Total number of survey calls completed
Goal:	40%
Outcomes for FY 2022-23:	Information was not available during this reporting period.

Performance Indicator 2:	Resources provided to caller- Caller Satisfaction Survey, Question 1: "Operator understood me and gave me the information and direction on what to do."
Numerator:	Total # of respondents who Strongly Agreed or Agreed to the question
Denominator:	Total number respondents who completed the survey
Goal:	70%
Outcomes for FY 2022-23:	Information was not available during this reporting period.

FRESNO COUNTY MENTAL HEALTH PLAN

OUTCOMES REPORT- Attachment A

	Consumer Satisfaction- Caller Satisfaction Survey, Question 2: "Overall I am statisfied with my experience with the Access Line."
Numerator:	Total # of respondents who Strongly Agreed or Agreed to the question
Denominator:	Total number respondents who completed the survey
Goal:	70%
Outcomes for FY 2022-23:	Information was not available during this reporting period.
Graph:	

DEPARTMENT RECOMMENDATION(S):

Click here to enter text.