

PROGRAM INFORMATION:

Program Title:	Exodus Youth Crisis Stabilization Center	Provider:	Exodus Recovery, Inc.
Program Description:	Exodus Recovery operates an LPS designated Crisis Stabilization Center (CSC) providing psychiatric stabilization services to youth (17 years of age and younger) who would otherwise be taken to or access care in an emergency room. Individuals who experience a mental health crisis or are in imminent danger of presenting a risk to themselves, others or becoming gravely disabled are able to immediately access care 24/7, 365 days per year at the Exodus CSC.	MHP Work Plan:	4-Behavioral health clinical care Choose an item. Choose an item.
Age Group Served 1:	CHILDREN	Dates Of Operation:	April 15, 2015 to Present
Age Group Served 2:	Choose an item.	Reporting Period:	July 1, 2022 - June 30, 2023
Funding Source 1:	Medical FFP	Funding Source 3:	Choose an item.
Funding Source 2:	Realignment	Other Funding:	Click here to enter text.

FISCAL INFORMATION:

Program Budget Amount:	\$5,915,657	Program Actual Amount:	\$3,930,133
Number of Unique Clients Served During Time Period:	1,323		
Number of Days Services Rendered During Time Period:	4,052		
Number of Admissions During Time Period:	1,980		
Actual Cost Per Client:	\$2,971		

CONTRACT INFORMATION:

Program Type:	Contract-Operated	Type of Program:	Crisis Stabilization
Contract Term:	07/01/2016 – 06/30/2022 plus two optional one-year extensions	For Other:	Click here to enter text.
		Renewal Date:	June 30, 2023
Level of Care Information Age 18 & Over:	Choose an item.		
Level of Care Information Age 0- 17:	Choose an item.		

The levels of care shown above do not apply. This program provides crisis stabilization services to individuals at the Youth Crisis Stabilization Center.

TARGET POPULATION INFORMATION:

Target Population: Youth(17 years of age and younger) who would otherwise be taken to or access care in an emergency room. Individuals who experience a mental health crisis or are in imminent danger of presenting a risk to themselves, others or becoming gravely disabled are able to immediately access care 24/7, 365 days per year at the Exodus CSC.

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)

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

Community collaboration

Integrated service experiences

Choose an item.

Please describe how the selected concept (s) embedded :

We have 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.

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 Exodus CSC. In addition, Exodus' Decision Support Department provides analytical support to the Exodus CSC by collecting, analyzing and reporting outcomes data from conceptualization through presentation to all stakeholders. The work of the Decision Support Department drives and supports key business decisions that yield positive outcomes at the Exodus CSC. Altogether, our Quality Management Program and Plan are dedicated to meeting the needs and to exceed the expectations of our clients, their families and the community.

With the assistance of Decision Support, Quality Improvement Department and program management, Exodus collects, manages and submits data for internal tracking purposes as well as to demonstrate client outcomes and performance-based criteria inclusive of guidelines set forth by Exodus, Fresno County and the State. An internal Access based computerized tracking system ("the Admission Log") is used to collect and maintain client related admission /discharge data and client demographic information.

All collected program outcomes are appraised by the Quality Improvement (QI) Committee composed of clinical, quality and program leadership on a monthly basis. After outcomes appraisal, the review committee creates a plan to change behaviors that negatively influence outcomes.

Outcome: Effectiveness of Discharge Planning as demonstrated by the referral and linkage to other department of Behavioral Health programs, community providers and other community resources.

Domain: ACCESS

Indicator: Referrals and Linkages

Who Applied: Non-hospitalized individuals

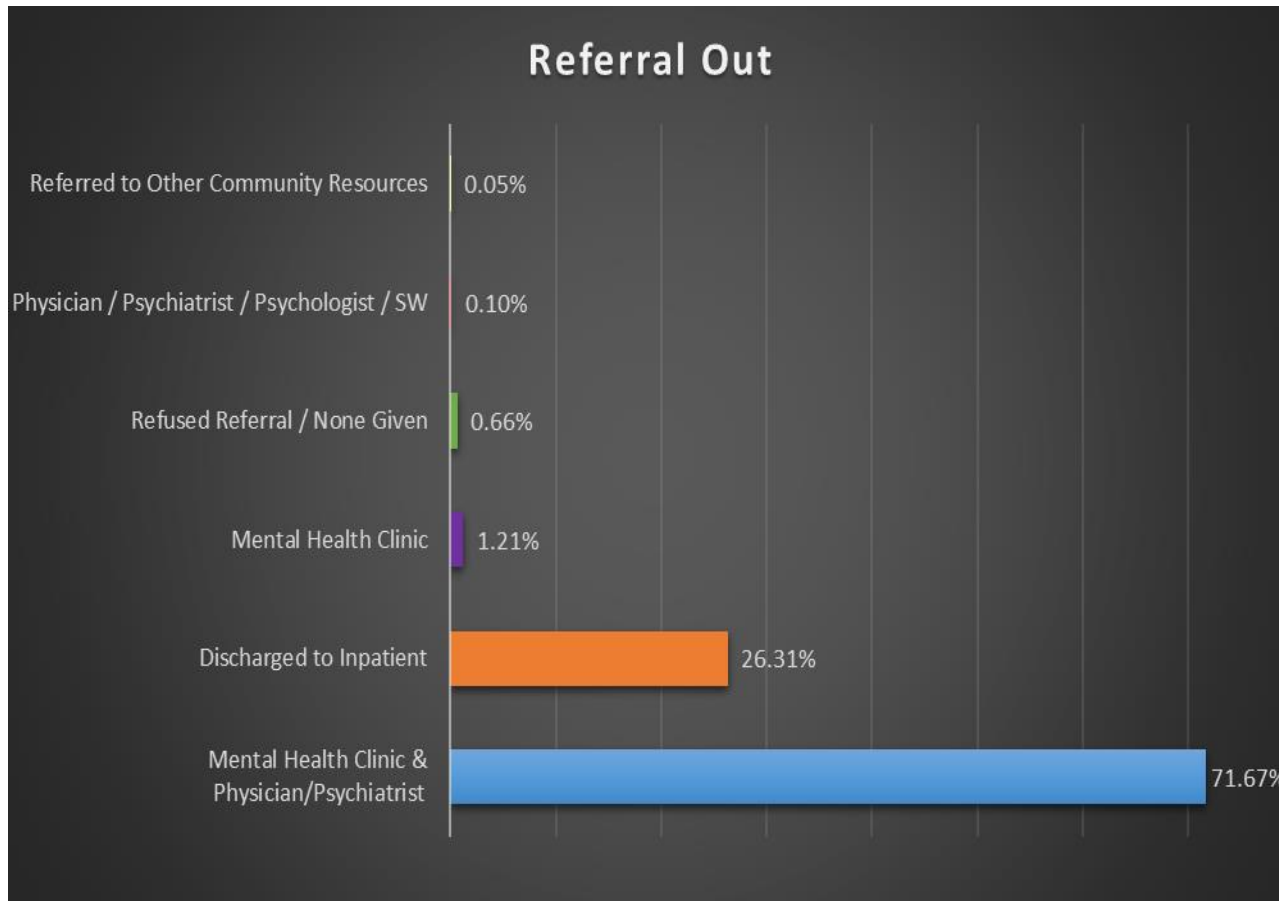
Time of Measure: FY 22-23

Data Source: Admissions Log

Target Goal Expectancy: 100% of non-hospitalized persons served will be referred and linked

Exodus currently provides a plan to each client upon discharge that effectively connects our clients to the broad array of services that Fresno County offers. This has resulted in better integration of behavioral care for our clients across other systems, including physical health and other service services that positively impact the overall health and wellness of our clients. Regardless of a client admission status to the Exodus CSC, the Admission Log collects information and other **indicators** about what Department of Behavioral Health program, community provider or other community resources refer clients to the Exodus CSC (Referral In). In addition, the Admission Log collects information about a client's subsequent referral out/disposition and discharge to Department of Behavioral Health programs, community providers or other community resources. Our **goal** is to refer and link 100% of our non-hospitalized clients (1,459 clients). An **analysis** report is generated on a monthly basis for Exodus management to identify gaps in client care, services and problems with linkage care coordination. Currently, 73.7% of all clients are discharged to non-hospital settings. 99.1% of those clients are referred to Department of Behavioral Health programs, community providers or other community resources.

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Referral Out	Number of Clients
Mental Health Clinic & Physician/Psychiatrist	1,419
Discharged to Inpatient	521
Mental Health Clinic	24
Refused Referral / None Given	13
Physician / Psychiatrist / Psychologist / SW	2
Referred to Other Community Resources	1
Grand Total	1,980

NOTES:

- Data extracted from Exodus' Fresno CSC Admissions Log
- Includes Admissions from July 1, 2022 to June 30, 2023
- Includes youth 17 years of age and younger

Outcome: Collaborative approach and treatment strategies to reduce readmission of clients with frequent readmissions to the facility.

Domain: EFFECTIVENESS

Indicator: Recidivism/Readmissions

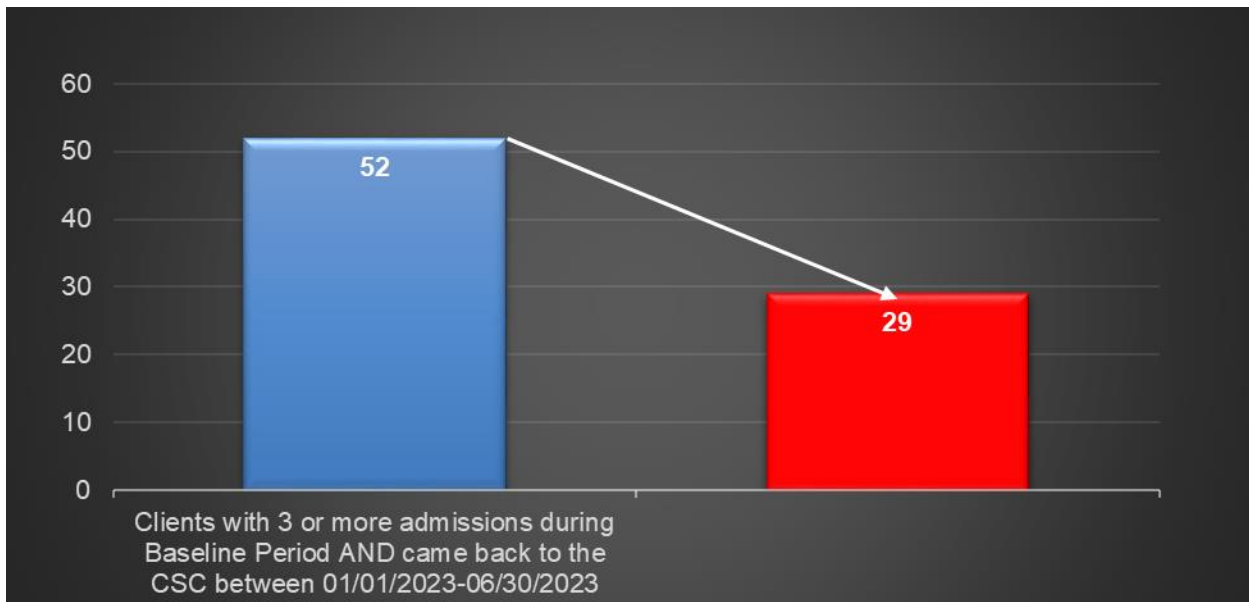
Who Applied: Persons with 3 or more admissions

Time of Measure: FY 22-23

Data Source: Admissions Log

Target Goal Expectancy: Reduce rates by 10% from previous six month period

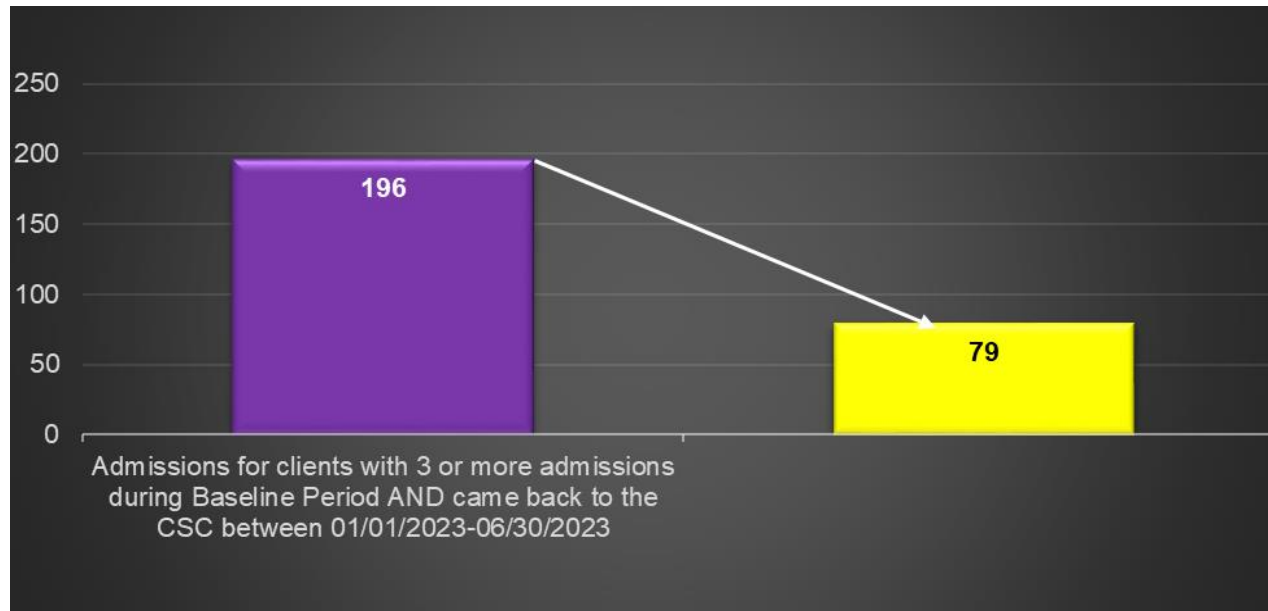
Exodus currently uses recidivism and readmission rates as **indicators** to measure the effectiveness of our collaborative approach and treatment strategies that keep clients from returning to the CSC. At any point in time, the Admission Log has the ability to **analyze** recidivism rates for clients who have had 3 or more admissions to the CSC during the previous 30 days, 3 or 6-month period. The Admission Log tracks these clients over subsequent months in order to measure a decrease or increase in readmissions for those clients. Also, the Admission Log has the ability to report monthly readmission rates (i.e. x percent of the admissions for a specific month were for repeat clients). Readmission/recidivism rates are reviewed by QI, Decision Support, program director, and discussed with Exodus staff as well as community partners in an effort to reduce readmissions. Our **goal** is to reduce readmissions and recidivism rates by 10% from the previous six month period.



***44.23% reduction in readmissions during FY 22-23 VS 52.6% during FY 21-22

- NOTES:
- Data extracted from Exodus' Fresno CSC Admissions Log
 - Includes Admissions from July 1, 2022 to June 30, 2023
 - Includes youth 17 years of age and younger

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***59.7% reduction in readmissions during FY 22-23 VS 77.2% during FY 21-22

- NOTES:
- Data extracted from Exodus' Fresno CSC Admissions Log
 - Includes Admissions from July 1, 2022 to June 30, 2023
 - Includes youth 17 years of age and younger

Outcome: Denial rate reduction of 5% for Crisis Stabilization billing that does not meet Medi-Cal medical necessity criteria as determined by the utilization review performed by the Fresno County Mental Health Plan.

Domain: EFFICIENCY

Indicator: Denial Rate for Non-Medical Necessity Crisis Stabilization

Who Applied: Persons Served who did not meet medical necessity

Time of Measure: FY 22-23

Data Source: DBH Managed Care Utilization Review

Target Goal Expectancy: 5% reduction

Exodus calculates its denial rate by dividing the number of denied claims by the total number of claims processed post a Utilization Review (UR) from Fresno County MHP. Such **analysis** is generated based on the frequency of a UR being performed by Fresno County Mental Health Plan. Avatar Report does not reflect any denied services.

Outcome: Satisfaction & Feedback Of Persons Served & Stakeholder

Domain: SATISFACTION & FEEDBACK

Indicator: Consumer feedback regarding satisfaction, efficiency, and effectiveness

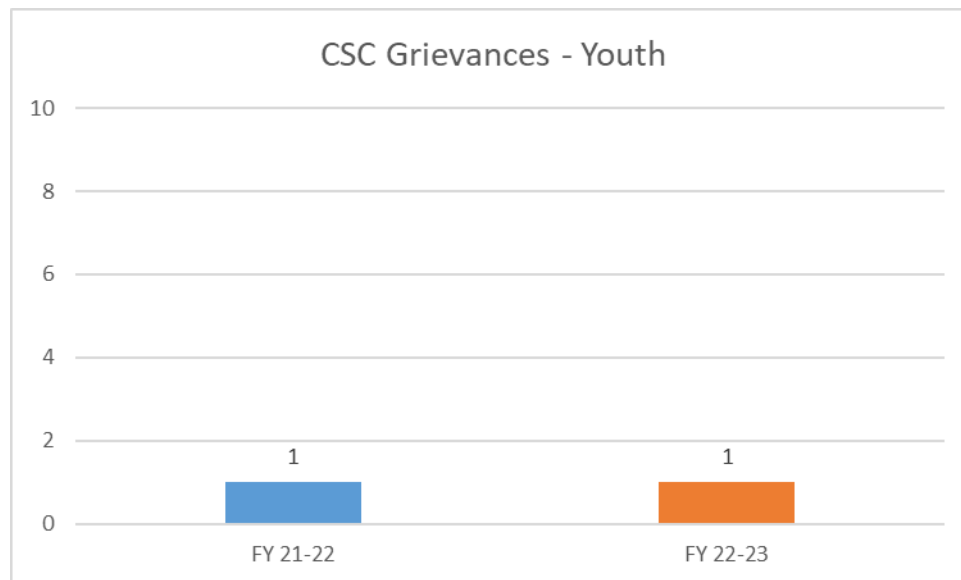
Who Applied: All persons served

Time of Measure: FY 22-23

Data Source: County feedback, Internal and County grievances, success stories, and Client Satisfaction Surveys

Target Goal Expectancy:

Exodus works closely with our community partners. Thanks to the collaborative team effort we have been able to link many clients to the appropriate level of care. We also reconnect many clients back to FSPs or other outpatient mental health settings, and encourage re-engagement with services. Outcomes of complaints and concerns from clients, providers and stakeholders are reviewed at the County monthly meetings to include any actions taken to resolve issues. During this fiscal year the management team, staff and clients worked on implementing same day problem resolution. The staff ensured that client concerns were resolved with the charge nurse or management. If they felt their concern was not addressed they could involve the Program Director in person or through an internal client complaint line. This complaint line was a 4 digit number 8630 or (559) 512-8630 that could be easily dialed from the client phones. The clients stated they were satisfied with the new process and clients were given an additional outlet to provide feedback. We believed this new process was a big contributor in minimizing the number of grievances.



Outcome: Length of Stay

Domain: EFFICIENCY

Indicator: Length of Stay

Who Applied: All Adults Clients Served

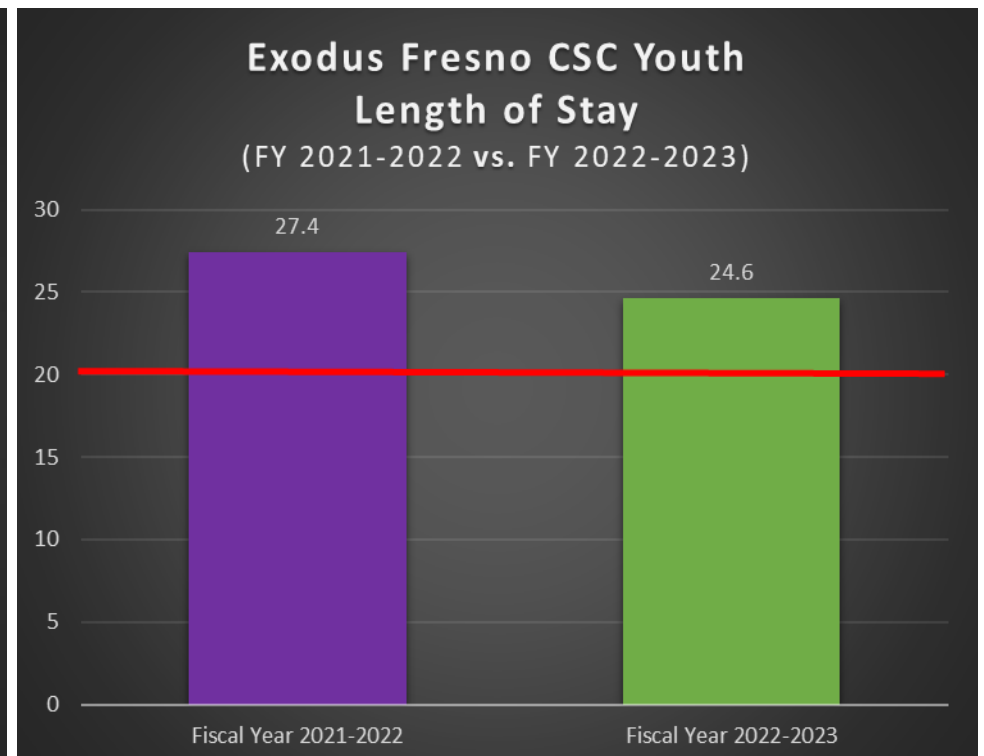
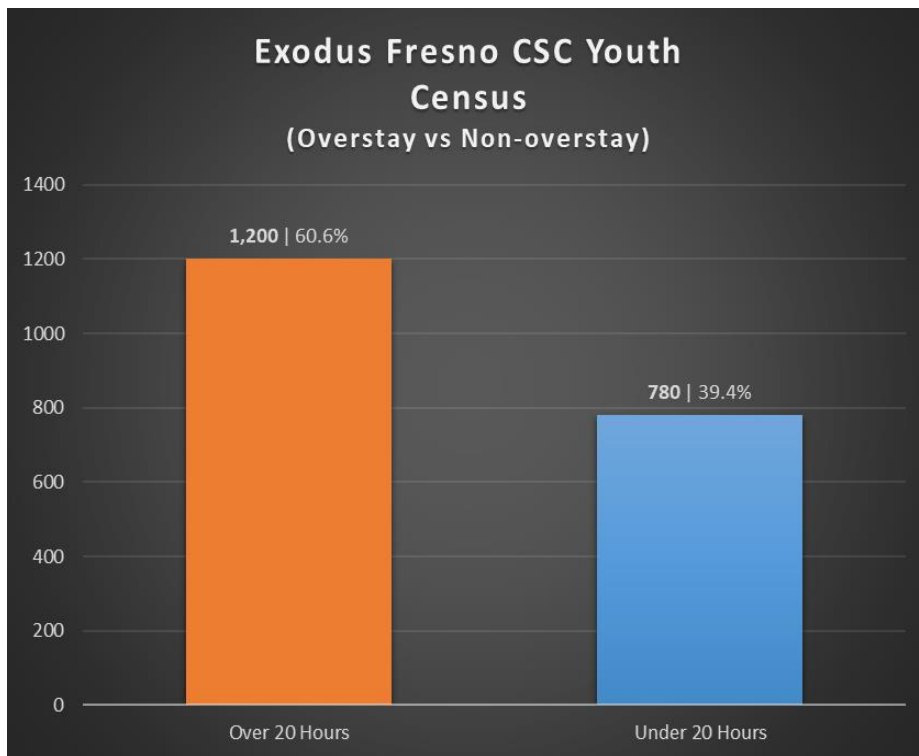
Time of Measure: FY 22-23

Data Source: Admissions Log

Target Goal Expectancy: Less than 20 hours

Exodus currently uses length of stay as an indicator to measure the efficiency of our services. The Admission Log tracks these clients in order to measure the average length of stay for those clients. Additionally, the Admission Log has the ability to report number of clients who overstayed (clients' stay more than 20 hours) and non-overstay (clients' stay less than or equal to 20 hours).

Currently, 60.6% of clients are overstay (1,200 clients) with the average length of stay of 32.1 hours. 39.4% clients are within the target timeline (780 clients) with the average length of stay of 13.1 hours. Even though we haven't achieved the target goal for all clients, Exodus has successfully reduced the average length of stay overall from 27.4 hours in FY 21-22 to 24.6 hours in FY 22-23 (10.2% reduction).



Outcome: Exodus strives to hire at least 50% of bilingual staff to meet Fresno County’s threshold languages in order to care for the target population in their preferred language.

Domain: Cultural/Community Defined Practices

Indicator: Target language

Who Applied: Exodus Staff

Time of Measure: FY 22-23

Data Source: HR Data Tracker

Exodus CSC currently has 161 staff members, of which 77 are bilingual. Exodus works to hire staff that are bilingual to assist the clients in their care. We understand that it can be challenging for our clients to use an interpreter during their crisis or in the peak of their psychosis. We are proud to have a 47.8% of our staff speak an additional language. Our current CSC has staff that communicate in the following languages:

American Sign

Cambodian

Chinese, Other

Filipino, Tagalog

Hindi

Hmong

Japanese

Other Non-English

Portuguese

Spanish

Thai

Visayan

Yoruba

Satisfaction & Feedback Of Persons Served & Stakeholder

Domain: SATISFACTION & FEEDBACK

Indicator: Consumer feedback regarding satisfaction, efficiency, and effectiveness

Who Applied: All Persons Served

Time of Measure: FY 22-23

Data Source: County feedback, success stories, and Client Satisfaction Surveys

Target Goal Expectancy: 80% of respondents will have a favorable response to each satisfaction survey question

Exodus has maintained a strong connection in collaborating with every community partner in Fresno County. Thanks to the collaborative team efforts we have been able to link many clients to the appropriate level of care and support needed to help continue their stability in the outpatient setting. A great resource we utilize consistently with success is the utilization of FSP referrals for every client in need of more intensive mental health support in the outpatient setting. We pride ourselves in our ability to reconnect many of our clients to FSP Services, conduct warm hand-offs to encourage re-engagement with services via their case managers and we work collaborate with our community stakeholders to advocate for higher levels of care for our clients when necessary, including the advocacy for temporary conservatorship for some of our clients when necessary. Outcomes of complaints and concerns from clients, providers and stakeholders are reviewed at the County monthly meetings to include any actions taken to resolve any major issues or concerns.

We pride ourselves on the positive feedback and good reviews given by some of our former clients and family members which is often expressed by their kind words, comments and thank you cards. We have wonderful relationships and carry great collaboration with the Fresno Police Department CIT Team and the Public Guardian's Office, and have excellent and positive feedback from this team. In a recent networking meeting where Exodus management staff was in attendance, we received great feedback from many of the stakeholders present, and were given praise for the consistency of services we provide to every individual as well as the consistent and solid leadership Exodus continues to hold.

Many youth come through the Crisis Stabilization Center with heart wrenching stories. It is our hope that when providing services to the youth clients early in life they will be able cope and surpass their crisis and ultimately thrive without using this level of care. When thinking of success stories, we think of one young lady that began using our Crisis services since February of 2020 and had been admitted 29 times up to date. There were multiple times that she had been admitted and stabilized and there were other times in which she required hospitalization. This client had been hospitalized to several facilities i.e. Central STAR Behavioral Health, Fremont Behavior Health, San Jose Behavioral Health, Bakersfield, etc. In addition, client had been in and out of foster care, STRTP, and group homes. Moreover, client have had run ins with the law several times. During her last admission to the Crisis center our team was able to partner with Fresno County and other community resources to do expert panel discussions about the appropriate level of care and what needed to be done to ensure this youth stopped losing placement. The client was ultimately held at the CSC for 33 hours until we could safely transfer her to STARs PHF. The client was stabilized and placed on a conservatorship.

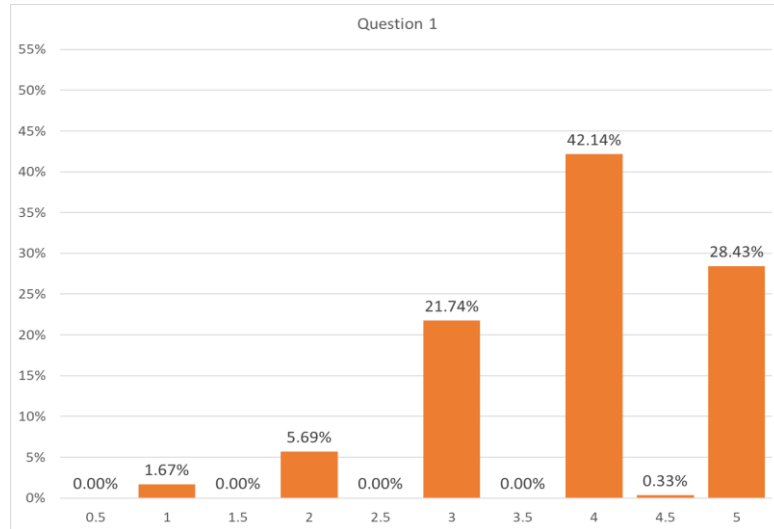
Client Satisfaction Survey Data

Data was collected by providing all discharged persons served the opportunity to complete a “Client Satisfaction Survey.” Data collection attempts were conducted throughout the entire fiscal year. Of the surveys returned to staff, 28.9% of clients documented refusal. The remaining surveys were compiled into Excel for analysis.

A rating scale of “Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree” was used. Data was calculated by assigning “Strongly Agree” a numeric value of 5, “Agree” a numeric value of 4, “Neutral” a numeric value of 3, “Disagree” a numeric value of 2, and “Strongly Disagree” a numeric value of 1. Data was assigned a 0.5 value if two feedback scores were circled. If more than two feedback scores were selected for a question, it was not utilized in calculation. A Descriptive Statistics Analysis was performed, utilizing Excel tools. In the statistical analysis below, the usage of “Favorable” refers to a reported score equivalent to “Strongly Agree”, “Agree”, or another incremental rating greater than “Neutral”.

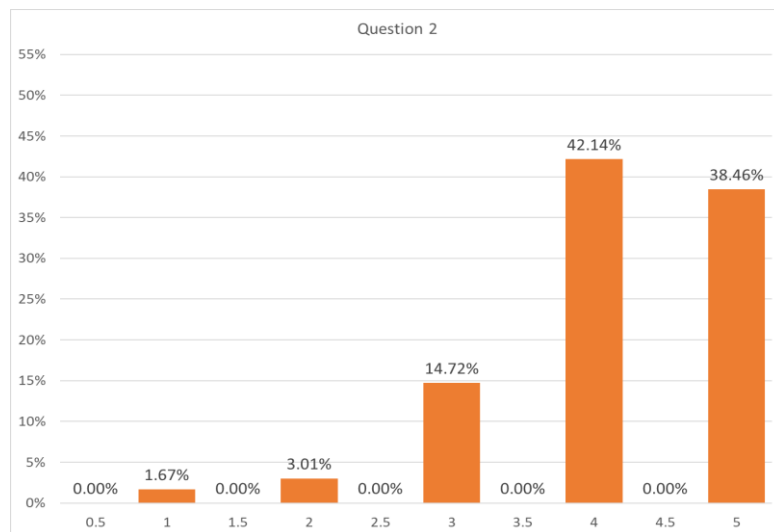
We met our goal on 13/16 questions by exceeding 80% satisfaction, and the overall survey average score was 80.8% satisfaction. This overall score exceeds our target of 80%. Additional data per question is included below including question content, average scores and percentages per question. These score will inform future potential areas for continued improvement and client communication.

Question 1: I was seen quickly when I arrived



70.9% of respondents reported a favorable response, resulting in an average score of 3.90 with a standard deviation of 0.94.

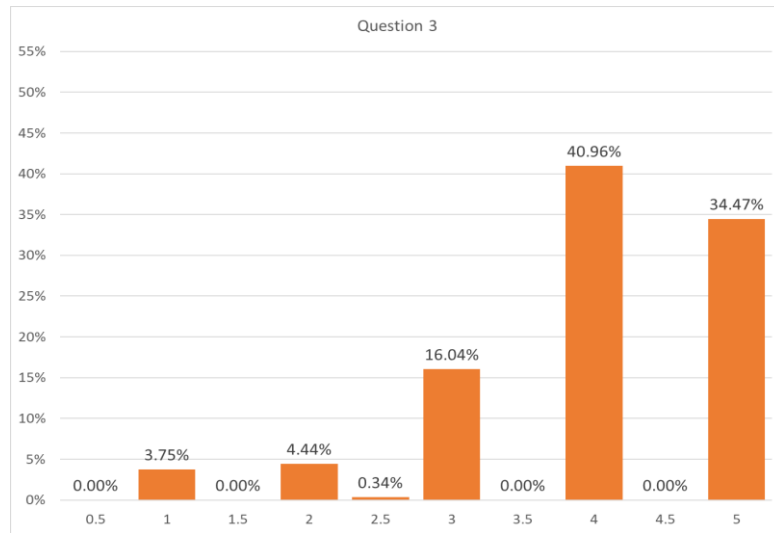
Question 2: I was greeted by friendly staff when I arrived



80.6% of respondents reported a favorable response, resulting in an average score of 4.13 with a standard deviation of 0.89.

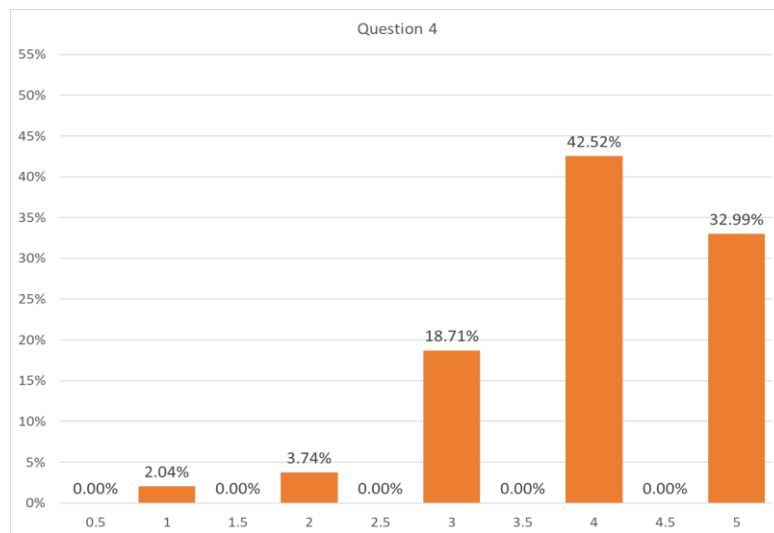
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Question 3: Staff made me feel safe and secure



75.4% of respondents reported a favorable response, resulting in an average score of 3.98 with a standard deviation of 1.02.

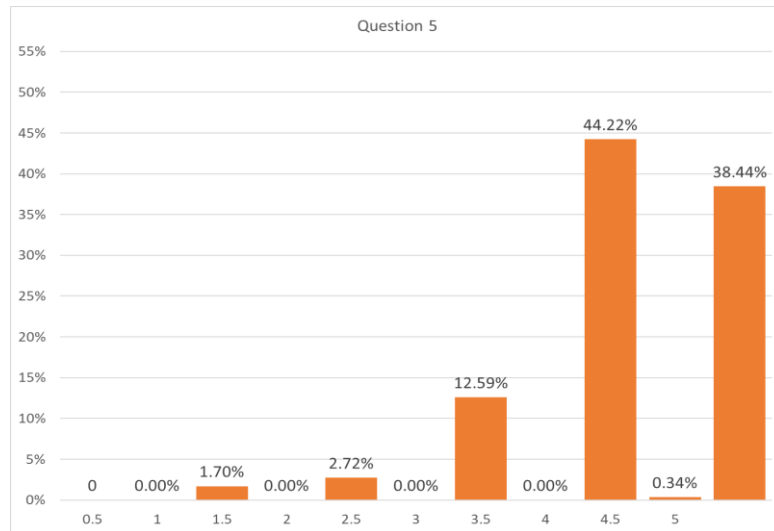
Question 4: The facility hours are convenient



75.5% of respondents reported a favorable response, resulting in an average score of 4.01 with a standard deviation of 0.92.

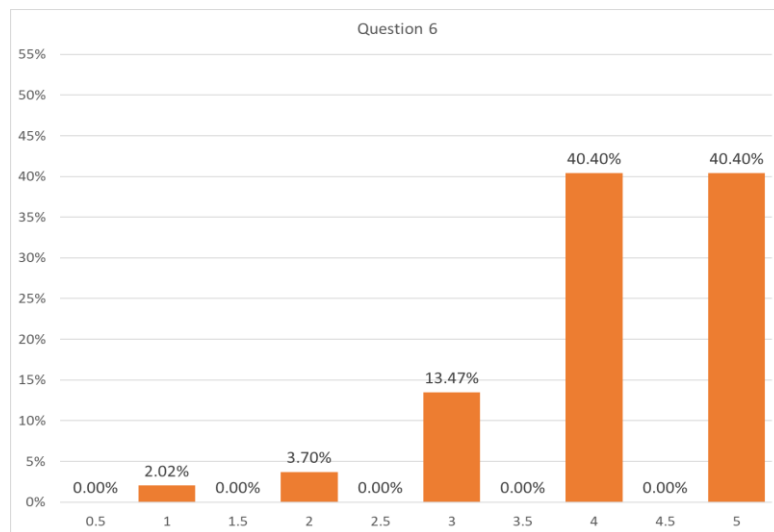
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Question 5: The facility was clean



83.0% of respondents reported a favorable response, resulting in an average score of 4.15 with a standard deviation of 0.87.

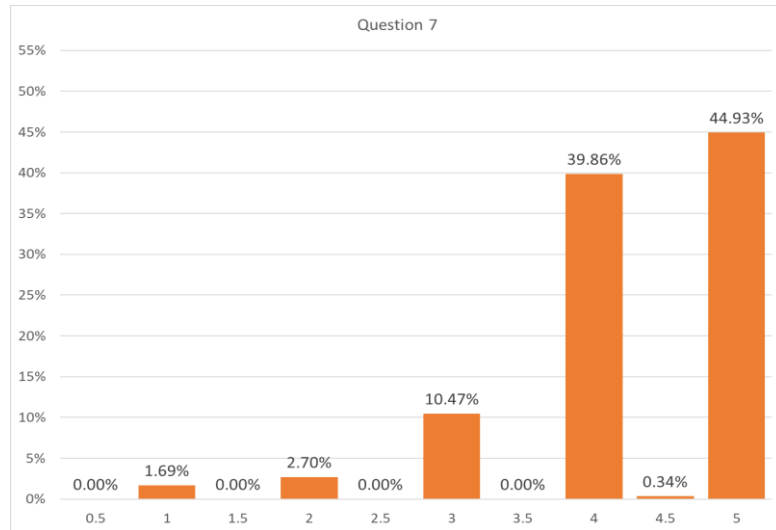
Question 6: I agreed with my treatment plan



80.8% of respondents reported a favorable response, resulting in an average score of 4.13 with a standard deviation of 0.92.

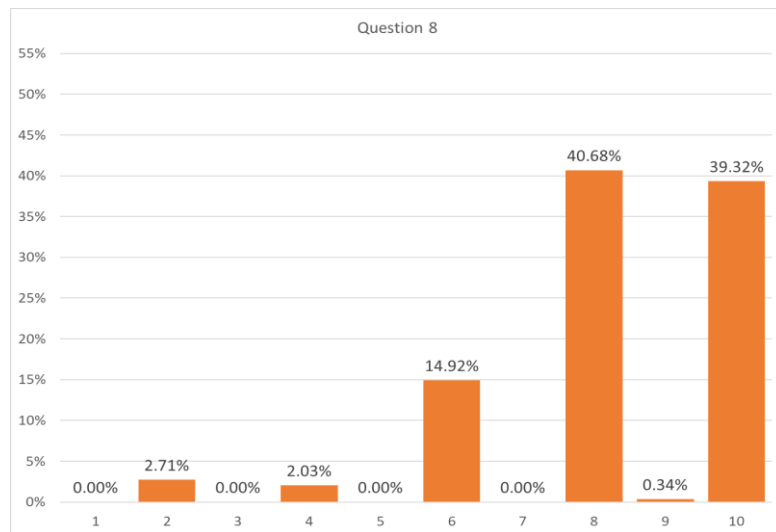
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Question 7: Nurses were helpful



85.1% of respondents reported a favorable response, resulting in an average score of 4.24 with a standard deviation of 0.87.

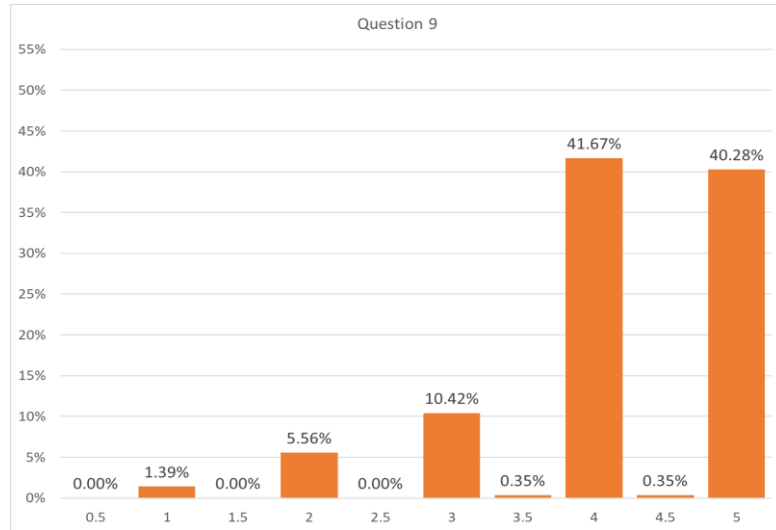
Question 8: The staff listened to what I was saying



80.3% of respondents reported a favorable response, resulting in an average score of 4.12 with a standard deviation of 0.93.

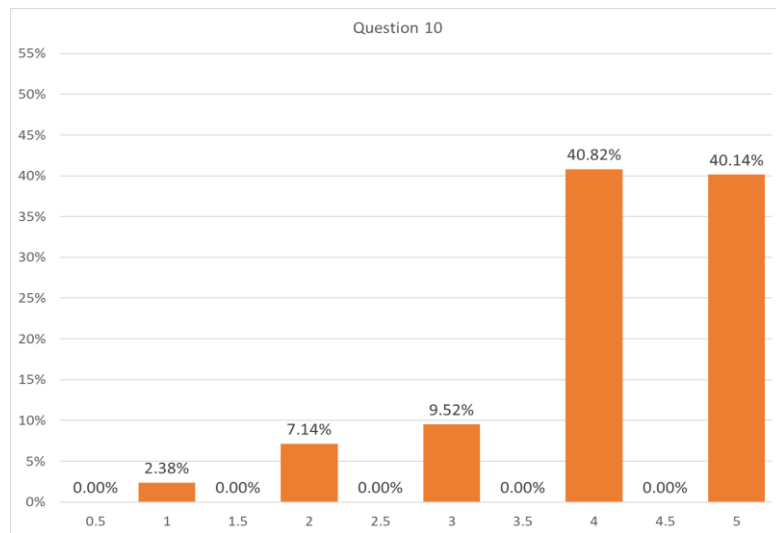
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Question 9: Follow up treatment was explained to me



82.6% of respondents reported a favorable response, resulting in an average score of 4.15 with a standard deviation of 0.92.

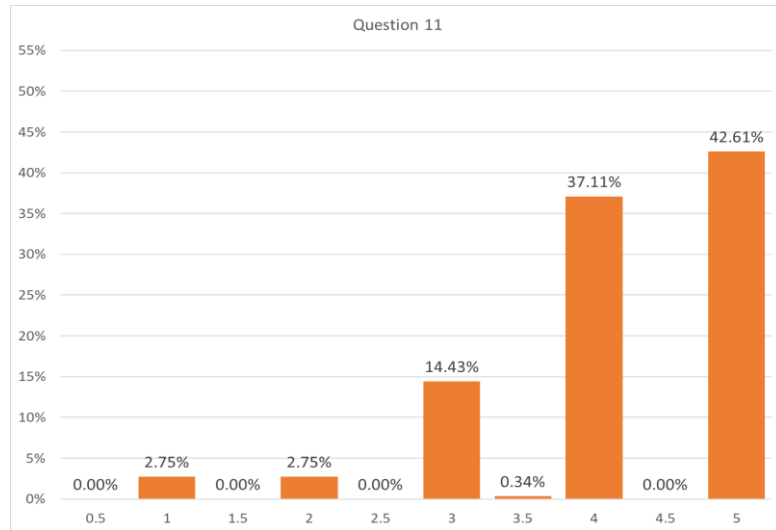
Question 10: Doctors were friendly



81.0% of respondents reported a favorable response, resulting in an average score of 4.09 with a standard deviation of 1.00.

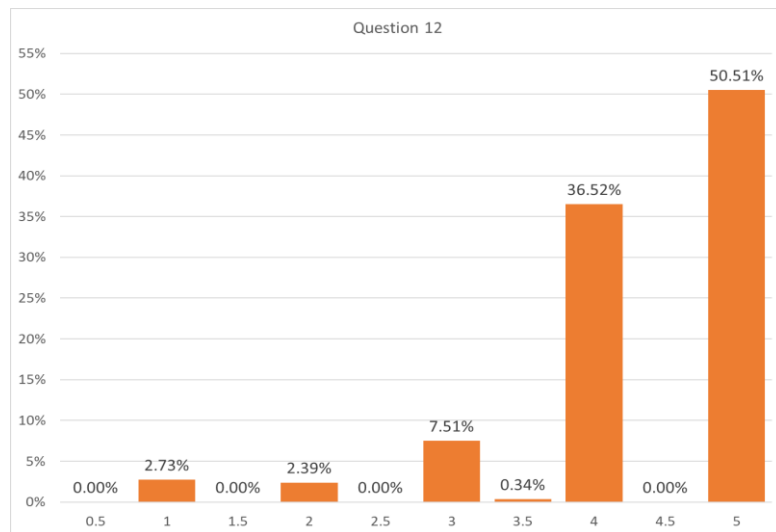
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Question 11: My condition improved from admission to discharge



80.1% of respondents reported a favorable response, resulting in an average score of 4.14 with a standard deviation of 0.95.

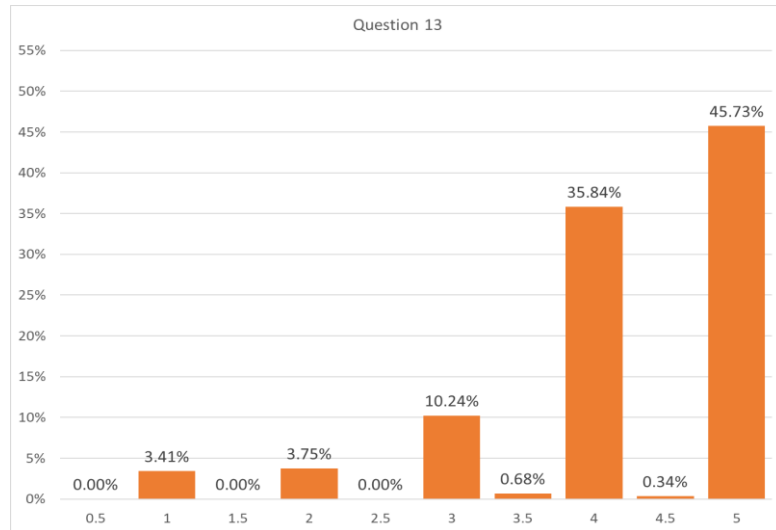
Question 12: Security staff were friendly



87.4% of respondents reported a favorable response, resulting in an average score of 4.30 with a standard deviation of 0.91.

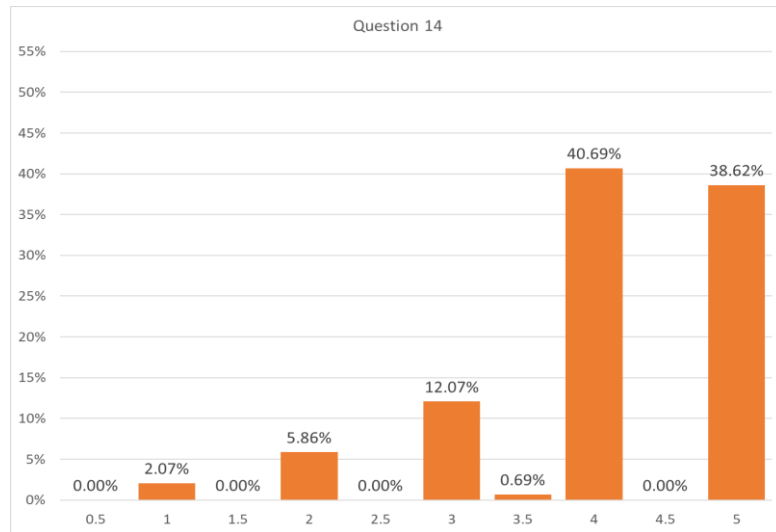
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Question 13: Doctors were friendly



82.6% of respondents reported a favorable response, resulting in an average score of 4.18 with a standard deviation of 1.00.

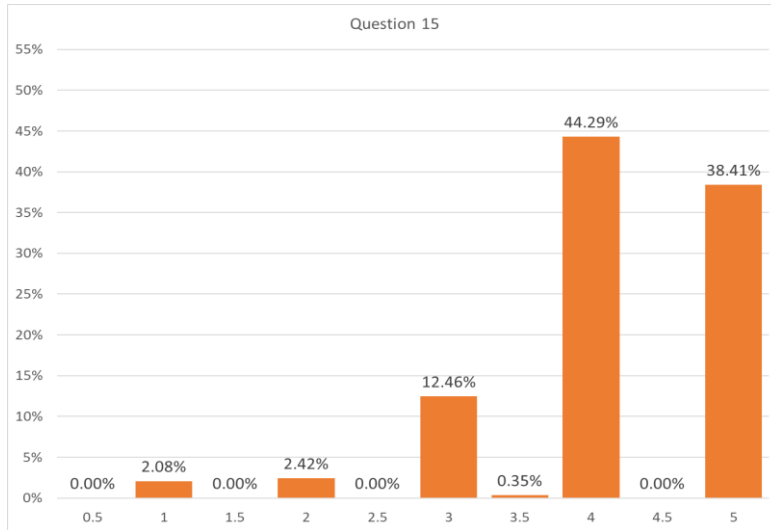
Question 14: I was provided education about my situation



80.0% of respondents reported a favorable response, resulting in an average score of 4.08 with a standard deviation of 0.96.

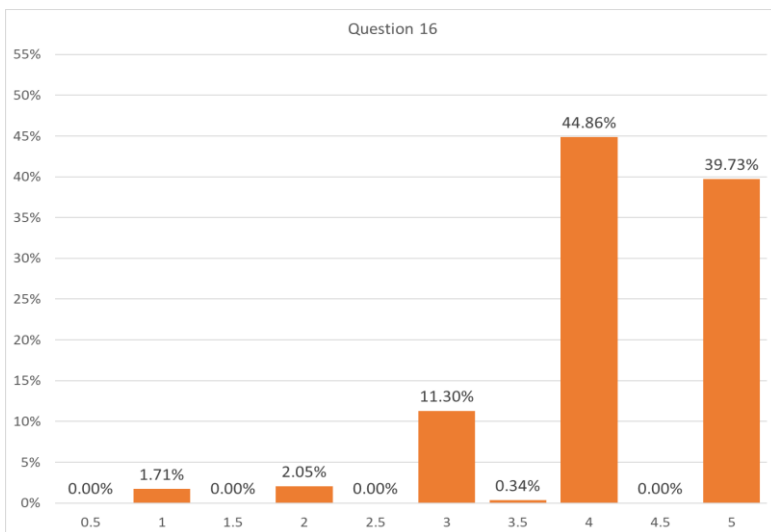
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Question 15: My needs were met while at the facility



83.0% of respondents reported a favorable response, resulting in an average score of 4.15 with a standard deviation of 0.88.

Question 16: Staff provided services promptly



84.9% of respondents reported a favorable response, resulting in an average score of 4.19 with a standard deviation of 0.84.

DEPARTMENT RECOMMENDATION(S):

Click here to enter text.