

Measures, Outcomes, and Quality Assessment (MOQA) At A Glance

California Counties Increase Mental Health Outcomes and Drive Down Costs.

California counties are the engine that powers the transformation of states mental health programs. Counties, in partnership with the state, have responded to increased understanding of behavioral health issues by deploying new models of care, including Full Service Partnerships (FSPs), that improve the lives of Californians living with mental illness and their families, while cutting costs for taxpayers.

Misunderstanding about mental health continues to be a barrier to creating a complete safety net. At the same time, counties work to maintain California's network of hospital-based institutional acute mental health services, provide outpatient mental health services, and offer other forms of supportive services to assure an efficient use of scarce resources to maximize effective services while minimizing costs. Evidence-based practices demonstrate that outcomes for individuals experiencing behavioral health issues are improved when they receive appropriate care as early as possible.

Adult Full Service Partnerships Improve Outcomes and Reduce Costs

Full Service Partnerships (FSPs) bring together a mix of services – from housing and employment supports to 24-hour 7-day a week service access during crisis periods. Tailored to each individual's needs, success is enhanced when they are invested in their success and empowered to make choices. FSPs deliver intensive services targeted to individuals that are high utilizers of inpatient, justice programs, and often have lengthy histories of homelessness.

A survey of California counties found dramatic reductions in the number of FSP participants in 2011 who experienced homelessness, hospitalization, or incarceration. There were also significant reductions in the duration of their days homeless, in hospitals, or in jails. Individuals targeted for FSP services are among the hardest to serve, making the success of FSPs all the more striking.

Homelessness

66% reduction in days homeless58% reduction in people homeless

Hospitalization

35% reduction in days hospitalized39% reduction in people hospitalized

Incarceration

48% reduction in days in jail **47%** decrease in people jailed

As dramatic as these improvements are, they take on even greater importance when the real, life-saving changes made by individuals are considered.



FSPs do not just improve the lives of people served. They also decrease taxpayer expenses:

Total Full Service Partnership Services – Costs and Cost Savings (FY 2009-10 New Enrollees only)*

	Number of New Enrollees in FY 09-10	Total Cost for FY 09-10 New Enrollees	Total Cost Savings FY 09-10	Percent Savings FY 09-10
TAY - Transition Age Youth (16-25)	2,977	\$18,681,553.50	\$27,501,007.94	147.2%
Adults (26-64)	4,702	\$56,212,502.95	\$56,120,875.82	100%
Older Adults (65+)	645	\$5,325,034.73	\$3,857,684.17	72.4%
Total	8,324	80,219,091	87,479,568	109%

The Mental Health Services Oversight and Accountability Commission (MHSOAC) contracted with the University of California, Los Angeles (UCLA) to perform a cost analysis of FSP programs in each California county comparing per-client program expenditures with cost savings realized through the program.

The cost savings are not exhaustive, and they only include reductions in expenditures for:

- Inpatient psychiatric hospitalizations
- Skilled Nursing Facilities
- Long term psychiatric care
- Emergency Room use
- Juvenile Hall and Camp involvement
- Jail

TAY and Adult results account for 93% of the costs and 96% of the savings, which reflects the greater risk for hospitalization and incarceration that exists in these age groups.

Reducing Re-hospitalization, Increasing Access to Services, and Timely Follow-up

Research proves that timely client access to follow-up mental health care after leaving a psychiatric hospital reduces the likelihood of future hospital admissions. The importance of increasing client access to care is a key indicator of the success of a behavioral health system. Most counties now track post-psychiatric hospitalization follow-up in outpatient programs, the percent of clients re-hospitalized within 30 days, and time-to-first mental health contact, with the following results:

Post-hospitalization Follow-Up

- **8** Average number of days for children to receive an outpatient appointment after hospitalization
- **11** Average number of days for adults to receive an outpatient appointment after hospitalization

Re-hospitalization for Adults and Children

16% of children are re-hospitalized within 30 days 16% of adults are re-hospitalized within 30 days

Access to Services

14 days - Time to first appointment for children

14 days - Time to first appointment for adults



<u>Improving the Children's' Lives - Trauma-Focused Cognitive Behavioral Therapy</u>

- **51%** of parents reported an improvement in their child's mental health, including symptom reduction and improved interpersonal relationships
- **48%** of children reported improvement in their mental health. The reduction in symptoms was so dramatic that after participation in the program, most of the children were no longer clinically classified as impaired

The successful treatment of childhood trauma is critical to reducing the incidence and severity of mental illness in adulthood. California County Behavioral Health programs reduce trauma symptoms for children ages 3-18 engaged in Trauma Focused Cognitive Behavioral Therapy (TFCBT). Programs serving over half the state's population, in partnership with almost 70 provider organizations, 16,080 children have received TFCBT. Pre- and post- treatment outcomes were tracked by the California Institute for Mental Health (CiMH).

Individuals Receiving Services Report Success and Satisfaction

California county behavioral health department survey the people served to regularly assess the quality of services provided. User satisfaction informs continuous quality improvement and increases likelihood of improved mental health of individuals served.

Adults and Older Adults:

- **90%** of adult clients reported that they are satisfied with their behavioral health outpatient services
- **60%** of adult clients reported doing better in work and/or school

Youth:

- **88%** of youth and/or their families reported that they are satisfied with their behavioral health outpatient services
- **75%** of youth and/or their families reported that they were better at handling daily life including getting along better with friends and family, doing better in school, and better coping skills