## SUNNY HILLS SERVICES TRANSITIONAL AGE YOUTH (TAY) — FULL SERVICE PARTNERSHIP CQI DATA COLLECTION AND OUTCOMES January 1 — June 30, 2015

1. <u>FSP Objective</u>: By June 30<sup>th</sup>, 2015, the TAY Program will have served at least twelve (12) Full Service Participants (FSPs) with the capacity for twenty (20) FSPs.

Results: We opened the TAY Program on January 1, 2015 with 16 FSPs. We admitted another FSP in late February, and three more in May, reaching the full FSP client load of 20. Thus this objective has been exceeded. All FSPs have completed, up-to-date client plans in Clinician's Gateway. They are all receiving intensive case management services. Some also receive individual therapy. A core group of FSPs also participates regularly in drop-in activities. The demographics of the 20 FSP's include: 2 African American females, 3 white females, 2 Latino females and 1 bi-racial female. Our male demographics are: 1 African American male, 4 white males, 2 Latino males, 2 bi-racial males and 2 Vietnamese males. FSP ages ranged from 19-25 with the median age of 22. We also have one female FSP that has a child age 1 month.

2. <u>Drop in Center Objective</u>: By June 30, 2015, the program will have served at least twenty five (25) Partial Service Clients.

Results: From January 1, 2015 until June 30, 2015, we offered drop-in activities every day, Monday through Friday, almost 135 activities total. We served 27 partial service drop-in clients during this time, so we did meet this objective. Attendance is much stronger for FSPs. There was a total participation of 260 drop-in visits by our FSPs, averaging about 2 FSPs per day.

Community-based outreach and engagement by peer partners and staff has been active and varied, including health education, educational support, medication support, independent living skill practice and development, referrals to other community resources, housing support and advocacy, as well as a strong emphasis on social and recreational activities both at the drop-in center and in the community. The drop-in center is the hub and strength of safety and connection for FSPs and we hope to engage even more partial clients in the year ahead.

3. <u>School/Work Engagement Objective</u>: By June 30, 2015, 50% of FSPs will have engaged in work, vocational training, or school.

<u>Results</u>: While there are mixed results, with a few FSPs who are working *and* going to school and a few who are doing neither, exactly half, 10 out of 20, were *either* working or going to school by the end of June, so this objective has been met.

4. <u>Independent Living Skills Objective</u>: By June 30, 2015, 50% of Full Service Partners in the TAY Program will have attended activities designed to improve independent living skills (ILS).

Results: We offered 24 specific ILS activities in the first six months of program operation. On average, 4 FSPs attended one or more of these activities. There are some FSPs, perhaps 6 out of 20, who rarely participate in drop-in center activities or ILS activities. The case managers and peer partners do more community outreach and engagement with these youth who don't come to the center for help. We believe we met this objective but will focus on engaging these more difficult-to-reach FSPs in the year ahead.

ILS activities offered included budgeting, employment skills workshops, resume writing, food preparation, college preparation, community food resources, Driver's license test practice, and goal setting, to name a few. We are working on utilizing a better pre- and post-survey of current levels of independent living skill needs and improvements.

5. A) By June 30, 2015, 100% of FSP clients will receive drug and alcohol screening. B) Clients identified with possible substance use issues will receive further assessment, and when indicated, intervention and treatment services. C) At a minimum, weekly group and individual treatment will be provided.

Results: We have had some difficulty hiring a part-time Alcohol and Other Drug Counselor with a CAADAC certification for the TAY Program. We advertised and made a job offer to someone who later declined, and there were very few other applicants from which to choose. Our solution was to have an existing TAY staff member pursue AOD certification. Although this certification can take up to 270 hours of school study/credits, this particular staff member was able to utilize many of her undergraduate and graduate credits toward certification. She has completed the remaining coursework and the examination process. She is currently in the process of completing her direct service hours while serving TAY clients. Substance screenings actually began after June 30 and will be fully reported in the next submission of outcomes.

During the first six months of our program operation and before we put the above AOD process in place, we were learning more about the clients who transferred to us from the previous TAY program. We utilized Motivational Interviewing techniques to assist the clients in assessing how "partying", use of alcohol, marijuana and other drugs might affect stability in school, ability to work, and/or in relationships. From these observations/interventions, previous known history, and individual case management work with our current 20 FSPs, we believe that 5 out of 20 have significant issues with alcohol or other drug use. One of these is actively working on staying clean and sober, one denies an alcohol problem, and the other three continue to use and minimize how use of drugs and alcohol is adversely affecting their lives. In addition, several of these TAY live with parents who are in denial and/or enable their children to continue to use and not work on this.

Due to age and maturity levels, TAY tend to be at a pre-contemplative stage of use and recovery. Part (A) of this objective will be met with on-going screening of all FSPs while (B) and (C) will continue to be a challenge which we will continue to work on. We will intensify assessment, intervention and treatment around alcohol and other drug use, utilizing a harm reduction model, with our FSPs in the coming year and will continue to engage also with involved parents around this issue.

## OUTCOME OBJECTIVES FOR JULY 1, 2015 THROUGH JUNE 30, 2016:

- 1. Maintain 90% or higher (18 clients) of capacity of FSP clients by active outreach and engagement.
- 2. Continue with adjusted objective of reaching 60 partial clients by June 30, 2016; By December 2015 in collaboration with county MHSUS will identify additional outcome measure for clients participating in drop in services.
- 3. Increase school/vocational/work engagement from 50% to 55% of FSPs by June 30, 2016 (note that severe symptoms/diagnosis, adherence to medications, family issues, etc., greatly affect the success of our FSPs in engaging in school work, and despite our best efforts, some will not make much progress in these areas);

- 4. Increase FSP participation of drop-in activities from 50% to 60% by June 30, 2016, recognizing that some FSPs are not highly motivated, social and/or group-oriented. For the upcoming FY1516, at least 50% of FSP clients will attend 2 or more ILS activities during the year.
- 5. Continue engagement and participation of 100% participation of FSPs in drug/alcohol screening and make continued, intensified efforts to introduce/encourage harm reduction to TAY and their families by providing one on one counseling/groups/and/or psych education regarding substance abuse to 25% of FSP clients by June 30, 2016.