



# Telecare's ACT Programs

As of **November 30, 2005**, Telecare enrolled approximately **1,586 members** in its ACT programs. Of those, **92% had a primary diagnosis of schizophrenia, bipolar disorder or depression**. All programs exist to help individuals recover from mental illness, reduce harm and hospitalization, and live successfully in the community by providing wraparound services and strong staff-member relationships. All ACT programs have a **staff-client ratio of at least 1:10**.

Name	City	State	Region	Years in Operation	Primary Population	Population Nuances	Member Capacity	Program Accomplishments
Alameda STRIDES	Oakland	CA	California (North)	12	Adult SMI	History of high inpatient utilization, primarily subacute and long-term care. Significant co-occurring substance abuse. History of involvement with criminal justice system is common. Risk bearing contract for hospitalization.	108	Over the first four years, the program provided net savings to Alameda County of \$2,151,024. Over the same four years, comparison clients spent seven times as many days as STRIDES clients in institutions rather than in the community. STRIDES is a capitated program, and has developed a warmline for consumer-to-consumer telephone support, has a very active drop in center that provides lunch, and has partnered with a medical group to provide medical care for STRIDES and STAGES members.
LA ACT 4	Los Angeles	CA	California (South)	10	Adult SMI	History of institutional utilization, co-occurring substance abuse, criminal justice involvement. Program was transitioned from L. A. Partners program.	70	ACT 4 has consistently reduced acute hospital days by over 80% from bed days prior to admission to program.
LA ACT 7	Los Angeles	CA	California (South)	10	Older Adults	History of institutionalization; medically fragile. Program was transitioned from L.A. Partners program.	100	During the first year of the program, the net savings to Los Angeles County was \$1,966,548. On average, individuals received a mean average of 3.9 contacts (3.5 hours) per week. ACT 7 received the 2004 Mental Health Commission Special Award for its older adults program. This is the only full fidelity PACT model program in California, and the only known full fidelity PACT model for older adults in existence.
San Diego Access	San Diego	CA	California (South)	10	Adult SMI	Program developed as part of inpatient Medi-Cal consolidation and includes a targeted population of Medi-Cal eligible individuals who are the highest 100 users of acute and emergency rooms in the system. Significant comorbidity.	180	This program worked closely with the County & other providers on an ongoing project to give additional attention to individuals that require special help and are at risk. (S.H.A.R.I.) The program did this with no added resources. Within the first 6 months the project worked with 7 clients and saved the County approximately \$500,000.
Santa Maria Support Services	Santa Maria	CA	California (South)	10	Adult SMI	History of high inpatient/IMD utilization.	70	55% of program members have stable housing for over a year. 69% of members have between 1 to 9 years out of the hospital.
Solano STRIDES	Vallejo	CA	California (North)	10	Adult SMI	History of high utilization of inpatient and institutional settings, primarily state hospitals and IMDs. Risk bearing contract for hospital utilization. Some co-occurring substance abuse. Includes a Day Program for County Conditional Release Clients.	55	In 2005, members used a total of 33 inpatient days (60% reduction from 2004). Program services up to 55 STRIDES members and up to 12 CONREP clients.
Alameda STAGES	Oakland	CA	California (North)	9	Older Adults	History of high inpatient utilization, primarily subacute and long-term care. Significant medical comorbidity. Risk bearing contract for hospitalization.	38	85% of the members are admitted from long-term care facility and had not lived in the community for many years. STAGES has successfully maintained members in the community at a lower cost to the county. Program helps manage members' money through County sub-payee program.



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Name	City	State	Region	Years in Operation	Primary Population	Population Nuances	Member Capacity	Program Accomplishments
LA HOP 4	Los Angeles	CA	California (South)	7	Homeless	Significant history of homelessless, co-occurring substance abuse, and criminal justice involvement. Because of risk of homelessness, clients can be referred by County for admission directly upon discharge from Patton, Atacadero, Metropolitan or other state hospitals.	50	HOP 4 was one of the initial AB34 pilot programs in California. Program has met or exceeded AB2034 criteria for housing and education, generating marked decreases in homeless days and high participation in further schooling.
LA HOP 7	Norwalk	CA	California (South)	7	Homeless	Significant history of homelessless, co-occurring substance abuse, and criminal justice involvement.	135	HOP 7 was one of the initial AB34 pilot programs in California. Program has consistently met the AB2034 outcome threshold for percentage of members employed, in school, and safely housed. Recognized by L.A. County for providing excellent, seamless services for people with co-occurring disorders.
Stanislaus Homeless Outreach Program	Modesto	CA	California (North)	7	Homeless	High percentage of co-occurring substance abuse; history of homelessness and criminal justice involvement. Multiple residential needs; high expectation for employment and education.	140	SHOP was one of the initial AB34 pilot programs in California. Program met or surpassed all AB34 outcomes measures and surpassed Medi-Cal billing expectations. Includes OT/employment program collaboration which provides training for peers to train other consumers in ADL skills. Also doing initial AOD, medical, and OT assessments on all new admits to help determine level of care needs.
Telecare San Antonio	San Antonio	TX	Texas	7	Adult SMI	Developed as part of Texas best practice ACT initiative. Emphasis on persons with significant histories of state hospitalization.	145	Eliminated over-use of state hospitals by local MH/MR authority. Members used (on average) 75.2 days in the state hospital prior to joining the program; during first year of operations, average state hospital days dropped to 32.4 days; during second year of operations, it dropped to an average of 9.8 days
San Diego ACT	San Diego	CA	California (South)	6	Adult SMI	History of homelessless, significant co-occurring substance abuse and criminal justice involvement. Clients transition from IMD's with significant institutionalization and high risk of hospitalization.	109	Program was re-engineered from Structured Day Treatment program to provide majority of services in vivo using ACT model. In both 2003 and 2004, at the request of the County, the program immediately transitioned 19 high-risk IMD clients to the community. Of those clients 95% have not returned to an IMD.
Santa Barbara HOMHES (North and South)	Santa Barbara	CA	California (South)	6	Homeless	Significant co-occurring substance abuse, history of homelessness and local criminal justice involvement.	100	In 2005 the program increased employment by 2,627 days over days of employment for 2004. This represented a 46% increase in employment days. Program serves homeless individuals and locates affordable housing in one of the country's most expensive housing makets.
CHANGES Dual Recovery Program	Oakland	CA	California (North)	5	MI/SA	Designed specifically for persons with co-occurring substance abuse and SMI.	250	CHANGES has decreased psychiatric emergency room contacts by 35%; decreased psychiatric hospitalizations by 40%; decreased average length of stay during hospitalizations by 31%; decreased IMD admissions by 34%; reduced IMD length of stay by 54%, and generated an estimated cost savings \$898,629 to the County.



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Houston STRIDES	Houston	TX	Texas	5	Adult SMI	Population is part of Mental Health Carve out. History of high acute hospital use and inability to access MH/MR ACT services.	30	The program was created in response to Managed Care Carve Out and the need to reduce high use of inpatient and emergency room services by a subset of enrollees. Members had 967 hospital bed days in year prior to joining program. During the first contract year, hospital bed days were reduced to 247.
San Mateo Transitions	Menlo Park	CA	California (North)	5	Homeless	History of homelessness, significant co-occurring substance abuse and criminal justice involvement. History of high inpatient hospitalization and medical issues.	75	84.8% reduction in hospital days; 85.8% reduction in homelessness; 91.5% reduction in incarceration; 17.6% increase in full-time employment; 240% increase in part-time employment. These performance outcomes have been relatively consistent since May 2001. Started a licensed/bonded janitorial service and recently started a licensed/bonded packing/moving/apartment cleaning service.
Durham ACTT	Durham	NC	North Carolina	3	Adult SMI	Co-occurring substance abuse	98	One of the first ACT programs developed in North Carolina in response to best practice legislation initiatives. Prior to being engaged in the program, members had greater usage of hospitals and emergency rooms. Since program inception, there has been a decrease in total days of incarceration, and all customer contract expectations have been met or exceeded. An example of this is the program doctor does home visits, which is a value-added service compared for program members.
San Bernardino ACT	San Bernardino	CA	California (South)	3	Adult SMI	History of high inpatient utilization, primarily IMD and County hospital.	100	During first 13 months, the program transitioned 91 individuals from IMDs and Augmented Board and Cares to lower levels of care. County customer indicated that program helped achieve savings of over \$100,000 per month.
Casa de Esperanza & Sueños	Camarillo	CA	California (South)	0	Adult SMI	Program includes an adult residential and a case management component.	45	Program was opened in December 2005; results will be made available over the coming year.