

# Programs of Assertive Community Treatment (PACT) & Systems of Care (SOC)

Evidence-Based & Promising  
Practices:  
Shaping Mental Health Services  
Toward Recovery

# Program Description

## PACT

- Delivers services to individuals with a severe mental illness who have needs that have not been well met by traditional approaches to delivering services so they may live successfully in the community and sustain a quality life.
- a multidisciplinary team organized as an accountable, continuous, community-based group who function interchangeably;

## Systems of Care

- is an organized group of state & local partners who come together to
- deliver & insure integrated/wraparound services for Oklahoma children, especially those with complex behavioral health needs.



# Our Mission

## PACT

- The mission of PACT has been to develop, provide, and investigate innovative mental health treatments for persons who have not had optimal treatment responses to existing forms of treatment.

## Systems of Care

- The mission is to create a unified support system that is unique to the culture & linguistic needs of each individual child and family.

# History: Why PACT & SOC are needed

## **PACT-** “Hospital w/o Walls”

- Individuals were readmitted to inpatient care relatively soon after discharge;
- Individuals were often unable to apply skills taught in the hospital once they were actually living in the community;

## **SOC-** Wraparound

- Children in need of mental health treatment were not getting the services they needed
- Services were often provided in restrictive out-of-home settings

# History: Why PACT & SOC are needed

## **PACT-** “Hospital w/o Walls”

- Individuals had an immediate decrease in the type/intensity of services available to people upon discharge & no one was available to help them apply for & access needed services

## **SOC-** Wraparound

- Few community-based services were available
- Service providers did not work together
- Families were not adequately involved in their child's care

# Unique Characteristics

## PACT

- Strengths based/consumer driven
- Primary Provider of Services
- 75% services provided in the community
- Highly Individualized Services
- Assertive “Can Do” Approach
- Continuous Long-Term Services
- Hours of operation/on-call
- 10:1 client to staff ratio

## SOC

- Family Driven
- Culturally & Linguistically Competent
- Community Based
- Youth Guided
- Individualized
- Collaborative
- Outcomes driven
- 24 hour on call crisis support

# Who is appropriate for PACT & SOC? Nationally & in Oklahoma

## **PACT:**

Individuals who have

- numerous inpatient stays &/or arrests/incarcerations
- not been able to participate in traditional office-based services
- the poorest quality of life

## **SOC Wraparound:**

Youth Diagnoses or Diagnosable

- Severe Emotional Disturbance (SED)
- 0- 21 that have a MH, SA, Trauma ,or Co-Occurring
- @ risk of abuse, neglect &/or out of home placement

# Who is appropriate for PACT & SOC? Nationally & in Oklahoma

## **PACT:**

Individuals who have

- difficulty performing the range of practical ADL tasks required for basic functioning in the community
- persistent & recurrent symptoms

## **SOC Wraparound:**

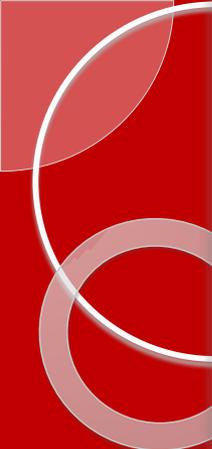
Youth Diagnoses or Diagnosable

- who have a variety of physical, mental, social, emotional, educational, & developmental needs
- In OJA-DHS custody
- 16-24 Transition Age



# **Integrated Treatment: PACT Services Nationally & in Oklahoma**

- Crisis intervention
- Symptom assessment & management
- Individual/group supportive therapy
- Medication, prescription, administration and monitoring
- Advocacy for legal issues
- Vocational/employment
- Housing
- Support during a hospitalization or incarceration



# **Integrated Treatment: PACT Services Nationally & in Oklahoma**

- Rehabilitation services
- Substance abuse services
- Services to support activities of daily living
- Collaboration with Families/significant others & children
- Social and interpersonal relationships
- Everything else as needed



# **Integrated Treatment: SOC Wraparound Services Nationally & in Oklahoma**

- Counseling  
(individual & group)
- Crisis Calm Centers
- Mobile Crisis
- Day treatment
- Family support
- Advocacy
- Screening, Referral & Assessment
- Residential treatment
- Respite care
- Self-help or support groups



# **Integrated Treatment: SOC Wraparound Services Nationally & in Oklahoma**

- Medication management
- Independent living
- Case management
- Service coordination
- In-patient psychiatric care
- Therapeutic foster care
- Transportation
- Education and Training
- Mentoring
- Flexible Funding
- 24 hour on call crisis support

# **PACT: Wellness & Trauma Informed Care Nationally & in Oklahoma**

## **Wellness:**

- 75%- 90% of our members have goals/objectives related to wellness on their treatment plan
- RSS's- Wellness Coach trained
- Whole Health Action Plan (WHAM)

## **Trauma:**

- 50%-75% of our members have goals/objectives related to trauma on their treatment plan
- Individual therapy
- TF-CBT
- Seeking Safety



# **PACT: Wellness & Trauma Informed Care Nationally & in Oklahoma**

## **Wellness:**

- **Exercise/Nutrition**  
Individual & group rehab
- **Leisure/Hobbies**  
Individual & group rehab
- **Holiday Celebrations**
- **Art/Music**  
Individual & group rehab

## **Trauma:**

- **DBT groups**
- **Recovery groups**
- **Anger Management**  
Individual/Group Rehab
- **Coping mechanisms**  
Individual/Group Rehab



# **SOC Trauma-informed Care: Strengthening Individuals, Families and communities..**

Trauma Treatment Services (TFEBT, Seeking Safety, etc.)

## Parental Resilience

- Parents historical & resolved ACE'S
- Resilience (security, esteem, efficacy, coherence)

## Parental Knowledge & Skills

- Child development
- Specific traumas

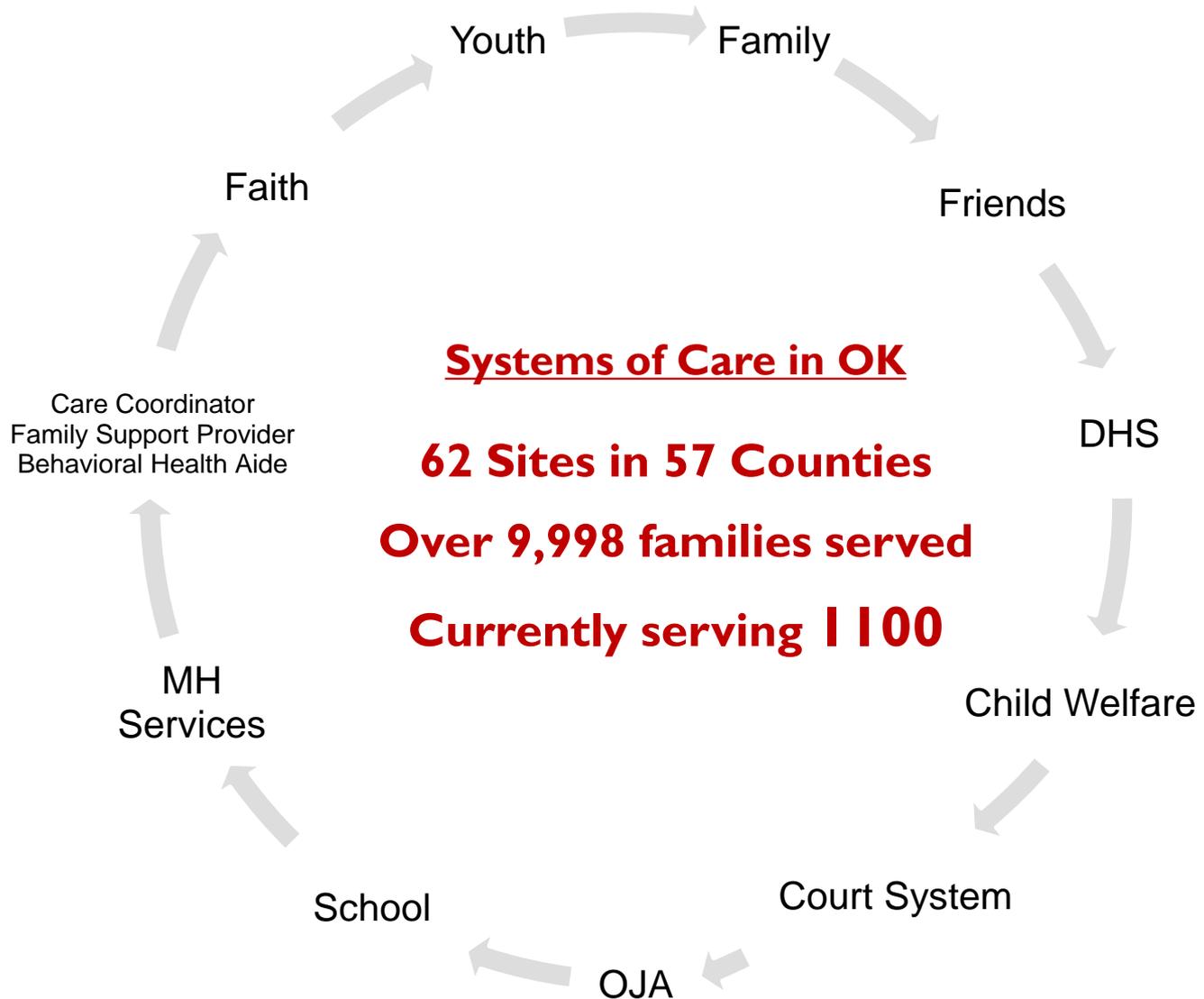
## Family/Community Connectedness

- Social Support

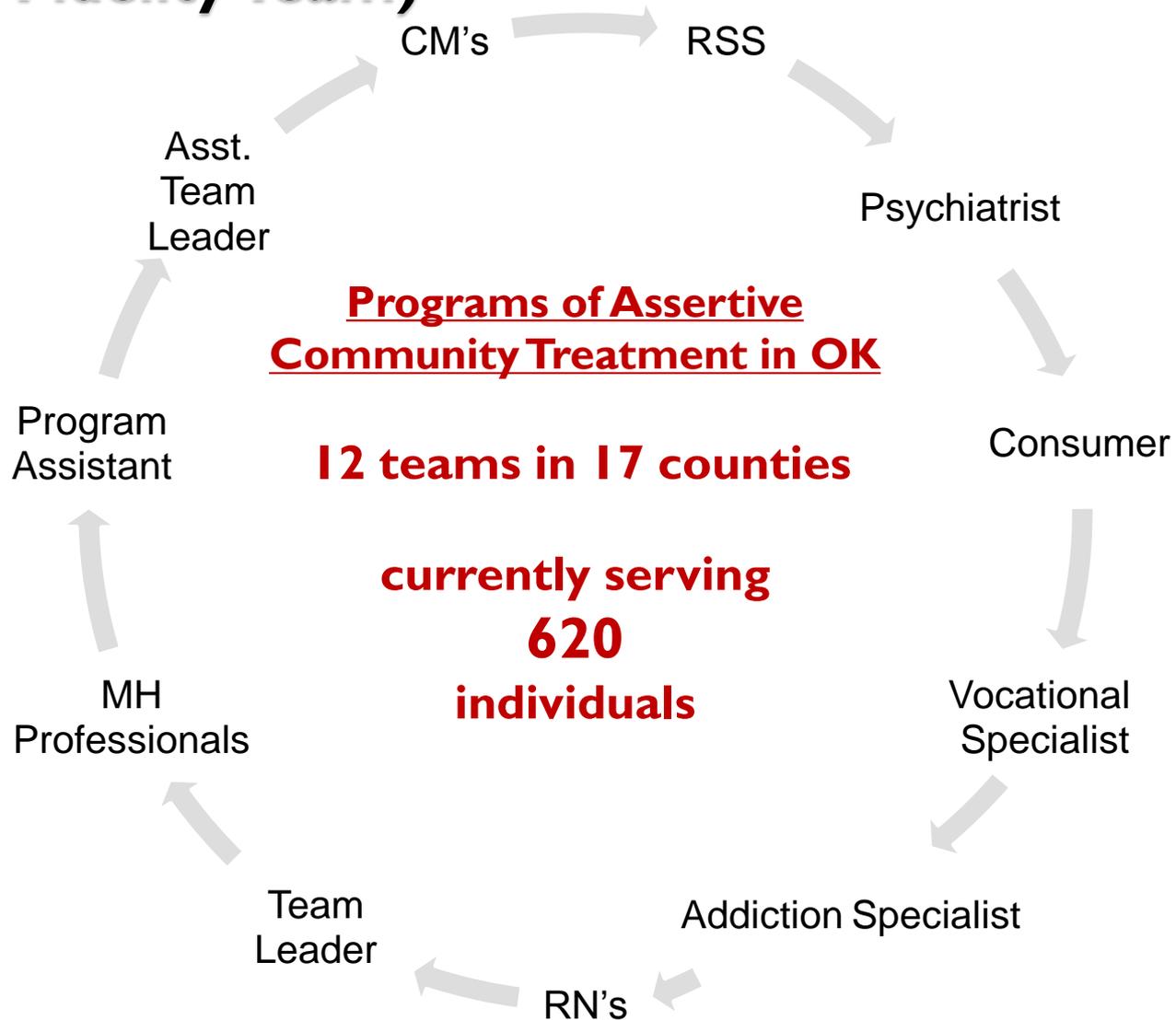
## Family Access to Resources

- Financial, housing, transportation, social services, etc.

# Workforce: Wraparound Team Composition



# Workforce: Multi-disciplinary Team Composition (Full Fidelity Team)





# PACT: Struggles with Workforce- Affect Access Nationally & in Oklahoma

All teams, especially those in rural areas have difficulty finding

- Psychiatrists
- Nurses
- Case managers
- Licensed therapists

- **We've seen positions vacant for over a year.**

- Many qualified staff prefer not to go to individual's homes.
- Cost of advertising vacant positions is very costly



# PACT: Struggles with Workforce- Affect Access Nationally & in Oklahoma

Difficulty hiring & retaining staff:

- the intensity of PACT (on-call/weekends/holidays)
- not being compensated for on-call time
- salary often doesn't compete with a comparable salary with less “responsibility” of a traditional outpatient position

## **When teams aren't fully staffed it**

- Hinders & slows the admission process
- Causes individuals to receive less services.



## PACT: Struggles with Access Nationally & in Oklahoma

- Nationally, PACT programs continue to struggle to keep their doors open.

Many states have

- altered the fidelity of the model by decreasing
  1. The number of required staff
  2. Their hours of operation
  3. Availability of on call &/or weekend coverage
  4. Reducing the number of admissions.
- Closed  $\frac{1}{4}$ -  $\frac{1}{2}$  of their PACT teams.



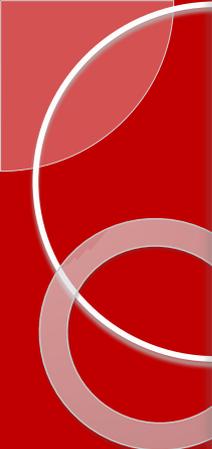
# Full Fidelity vs. Low Fidelity Teams

## **Individuals in the high-fidelity PACT programs**

- Have greater reductions in alcohol and drug use and attained & rates of remission were less than the individuals in the low-fidelity programs and
- have higher rates of retention in treatment and fewer hospital admissions than those in low-fidelity program.

## **Conclusion:**

- modifications of the PACT model or failure to comply with it may jeopardize program success
- Rigorous economic studies have found that when teams adhere closely to the program model, the costs are offset by reducing ER, hospitalization & incarceration costs.



## PACT: Struggles with Access Nationally & in Oklahoma

Oklahoma has experienced the same challenges.

- In **2008**, MHSSO PACT team closes.
- In **2009**, Oklahoma PACT teams **served 822** individuals & Bill Willis PACT team closes.
- In **2010**, Oklahoma PACT teams **served 778** individuals.
- In **2011**, Oklahoma PACT teams **served 759** individuals.
- Currently, our 12 teams are **serving 620 individuals**. This leaves an opportunity for us to serve **310** more.

# EXISTING PACT PROGRAMS

Currently in the state of Oklahoma, there are **12** PACT teams.

**6** teams that have the capacity to serve **up to 50** individuals.

**6** teams that have the capacity to serve **over 50**.

TIP:  
agency/location/capacity are listed to the right.

## May 2001

- North Care Center- OKC (110)
- Red Rock BHS- Tulsa (110)

## July 2002 started 4 partial teams

- Central Oklahoma CMHC- Norman (100)
- Jim Taliaferro CMHC- Lawton (50)
- Carl Albert CMHC- McAlester (50)
- Bill Willis CMHC- Tahlequah **CLOSES 2009**

## January 2004

- Red Rock BHS- Oklahoma County (110)
- University of Oklahoma/Tulsa (110)

## 2005

- Carl Albert CMHC- Ada (50)
- Family and Children's Services- Tulsa (90)
- North Care Center- Stillwater (50) **CLOSES 2013**

## 2006

- Edwin Fair CMHC- Ponca City (50)
- Red Rock BHS- Shawnee (50)
- ~~MHSACSO~~- Ardmore **CLOSES 2008**

## 2013

- Edwin Fair CMHC- Stillwater (50) **OPENS**



# OKLAHOMA SYSTEMS OF CARE

*Children, Youth, and Family Services*



# Effectiveness of PACT

## Study:

- Only **12 of 65 PACT** clients were hospitalized at all during the first year, compared to **58 of 65 in the non-PACT** treatment group
- **PACT clients** who were re-hospitalized, their **stays were significantly shorter than** that of the **non-PACT group**
- Economic advantage over institutional care

## PACT Clients:

- Spend more time in independent living situations
- Have less unemployment
- Earned more income
- Revealed more positive social relationships
- Expressed greater satisfaction with life
- Were less symptomatic

# ODMHSAS Evidence Based Practices

## Programs of Assertive Community Treatment (PACT)

Two major goals of PACT are to reduce consumer time in jail and in inpatient care by providing assistance with basic needs, *increasing medication adherence, keeping families together,* and *securing competitive employment.*

Over the **last 5 years**, with PACT assistance:

The number of days in inpatient care decreased by **78.4%**

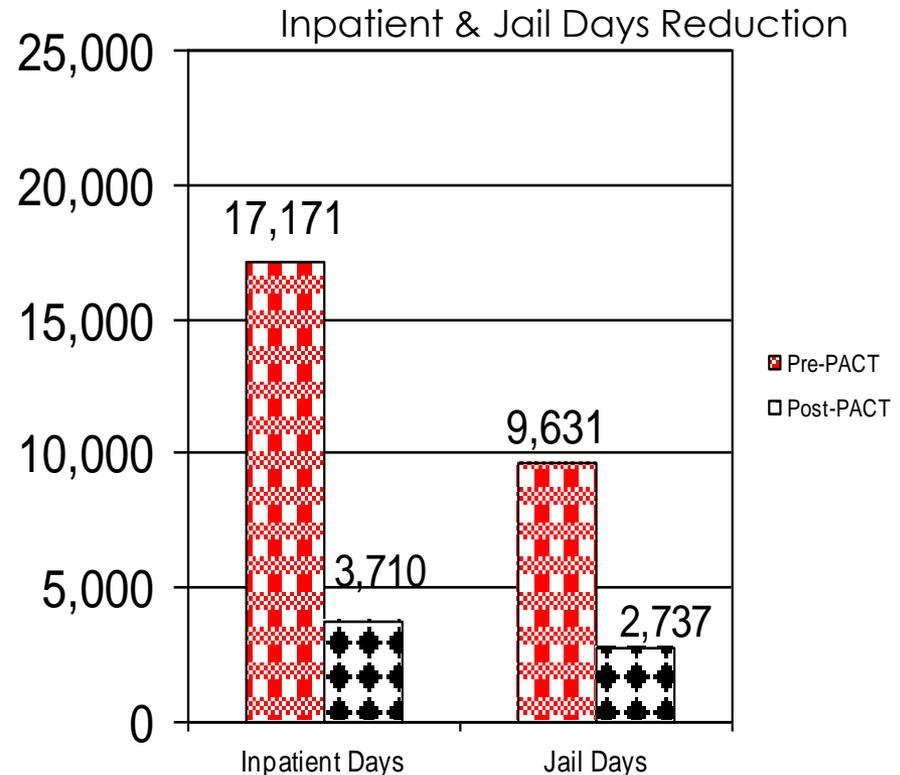
(17,171 @ 650/day= \$11.2 million)  
(3,710 @ 650/day= \$2.4 million)

Estimated Savings- \$8.8 million

The number of days in jail decreased by **72.0%**

(9,631 @ 125/day= \$1.2 million)  
(2,737 @ 125/day= \$342,125)

Estimated Savings- \$861,750



\*\*\* Nationally the annual reduction in inpatient days is 58.0%- 85% & Jail days is 50.0%- 92%.

# Effectiveness of SOC Wraparound

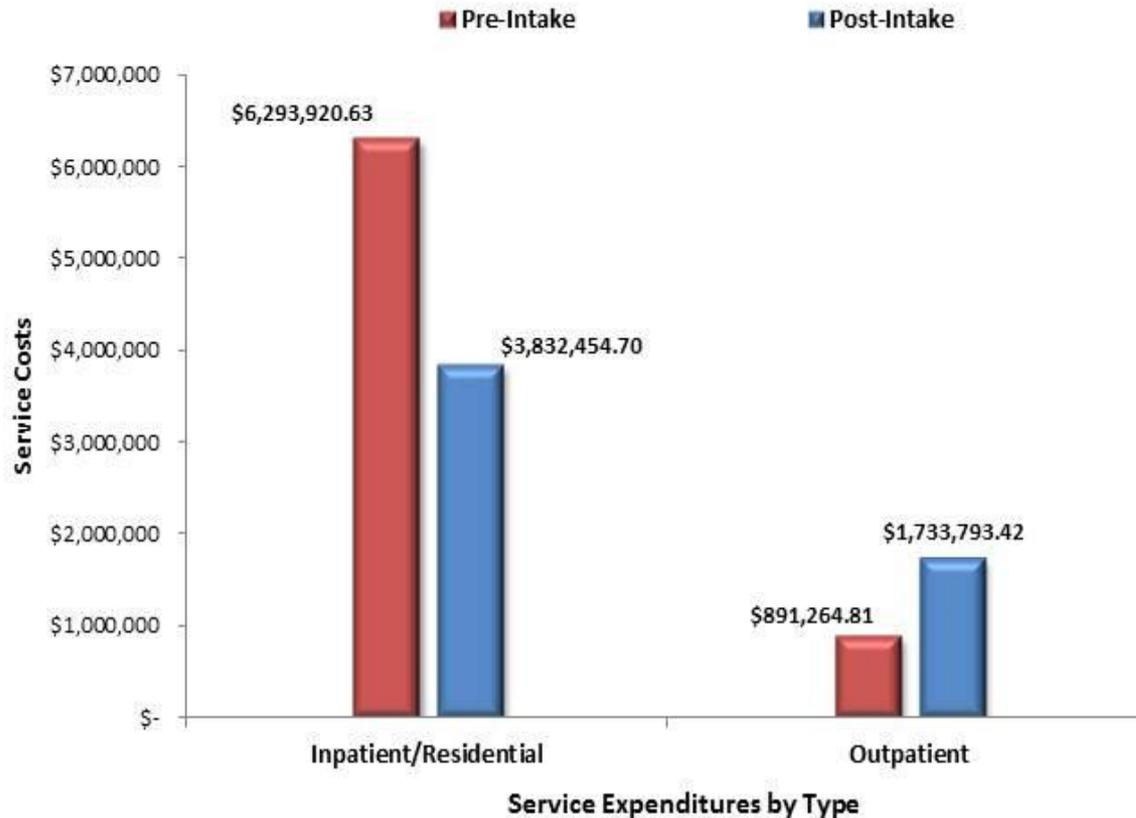
After 6 months with System of Care Wraparound FY 2012  
(n=800)

<b>Outcome Measure</b>	<b>Reduction</b>
Out-of-home Placement Days	35%
School Detention Days	73%
Number of Youths Self -Harming	38%
Number of Arrests	67%
Number of Contact w/ Law Enforcement	65%
Days Absent from School	51%
Days Suspended from School	64%

# FY 2011 OSOC Youths Served

## Service Dollars Paid & Average Savings per Child

### 180 Days before & 180 Days after OSOC Enrollment



**Overall Savings (6 months): \$ 1,618,937    # Youths Receiving Services: 664    Savings per Youth: \$2,438**

- Services counted are Medicaid services.
- Per-youth savings are heavily influenced by movement of services and costs from inpatient/residential to outpatient.
- Overall use of Outpatient services increased, as did the number of youths receiving billable services (from 515 to 664).

educational training • evaluation • assessment • measurement



# How are we Funded?

## **PACT**

- Medicaid
- State Funding

## **SOC Wraparound**

- Medicaid
- State Funding
- Federal Grants
- DHS



# PACT: Struggles with Funding- Affect Access Nationally & in Oklahoma

The current Medicaid billing system is not aligned with

1. How PACT services are provided- **especially in rural areas.**
2. The high-fidelity of the PACT model & does not compensate for vital services i.e.
  - *medication delivery/prompts/set-up*
  - *when the team goes to visit the individual while they're in the hospital*
  - *well- checks/visits that lasts less than 8 minutes &*
  - *morning meetings where staff discusses and make plans for the day for all the individuals they provide services for.*



## PACT: Struggles with Funding- Affect Access Nationally & in Oklahoma

Groups are very beneficial for PACT consumers. However,

1. The compensation rate is too low. In Oklahoma the rate is \$5.99/15 min.
2. Many teams-**especially rural** have decreased or eliminated them.
3. They spend 2 hours in travel (picking up/taking home )for a one hour group.



# SOC Wraparound Funding Difficulties

- Limited services billing through Medicaid
- Respite
- Flexible spending
- Rural access (travel distance)

# What If PACT Didn't Exist?

- If PACT teams continue to struggle with funding and have to close or lower their fidelity, the consequences will ripple through the nation and our state.

We would see an increase in:

- hospitalizations
- use of psychiatric crisis services
- emergency room visits for psychiatric needs & untreated physical illnesses
- evictions and other loss of housing, leading to increases in homelessness
- involvement in the criminal justice system, including costly incarceration

# What if SOC Didn't Exist?

- Increased hospitalizations
- Increased numbers for OJA and ODHS
- More youth with MH diagnoses incarcerated
- Increased arrest
- Increased school suspensions
- Families struggling to support needs of youth
- Cost increase for higher levels of care
- Cost increase on health care system
- Depleting resources across multiple service systems
- “Domino Effect”

# What we know....

## PACT

- Oklahoma ranks #2 nationally for serious psychological distress in the adult population
- In our state, 70% of those needing treatment for a SMI serious mental illness & 77% of adults in need of SA treatment are not receiving appropriate care.
- Mental Illness disrupts an individuals ability to maintain employment, perform ADL's and often cause the loss of relationships.

## SOC Wraparound

- A very large number of Oklahoma children and teens (90,000+ in 2009) suffer from mental or behavioral impairments.
- Emotional disturbances disrupt a child's ability to interact effectively with family members, teachers, friends and others in the community.

# What we know....

## PACT

- Individuals that have a mental illnesses have a high recovery rates, ranging from a 60% rate for schizophrenia to an 80% plus rate for major depression and bipolar disorder.
- Programs like PACT are more cost effective & more importantly allow individuals to live in the community & have a more fulfilling life.

## SOC Wraparound

- When kids enter Wraparound Services showing clinical impairment within 6 months they show significant improvements.
- Systems of Care help children, youth and families thrive better at home, in school, in the community and throughout life!

# Oklahoma's Goals

## **PACT**

- Maintain the 12 teams we currently have
- Expand PACT services across the state
- Develop & start a transitional youth PACT team & a forensic PACT team

## **SOC Wraparound**

- Local Systems of Care statewide
- Wraparound statewide for all children and youth with complex mental health needs and their families
- Oklahoma Systems of Care as the catalyst for integration and change
- Improved outcomes for children, youth, and families



# Collaboration: We Must Work Together

## State Level

- Collaborative and Integrative Strategies, Activities and Processes
- Statewide measures in place to capture overall state improvement
  - ***Increase Collaboration, funding, strategies, and sustainability***

## Community Level

- Collaborative and Integrative Strategies, Activities and Processes
- Local communities determine which outcomes are most important to them and evaluate own performance
  - ***Increase Community Capacity, Reducing Disparities, Positive Outcomes***

## Adult, Youth & Family Level

- Individual family measures in place to capture increase in mental health, support systems and positive behaviors
  - ***Improved outcomes***

**Technical Assistance, training, evaluation, feedback, and communication at all levels**