

Crisis Residential Program-Henrietta

ANNUAL REPORT

July 2023 - June 2024

WHAT WE DO

CRISIS RESIDENTIAL PROGRAM is a comprehensive, short-term residential program that provides a less restrictive alternative to hospitalization. CRP provides treatment for adults experiencing a mental health crisis who require 24-house support in order to return to community living. The services provided are time-specific, member-focused, and strength-based. Services routinely avert the need for hospitalization through teaching clients to successfully manage their symptoms, addressing psychosocial stressors and empowering clients to become agents of change in their recovery.

SERVICES PROVIDED

WE PROVIDE PSYCHOSOCIAL REHABILITATION SERVICES FOR INDIVIDUALS IN ACUTE PSYCHIATRIC CRISIS. THESE INCLUDE:



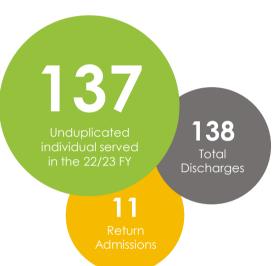
24/7 staff support, medication stabilization



Psychosocial and therapeutic aroups

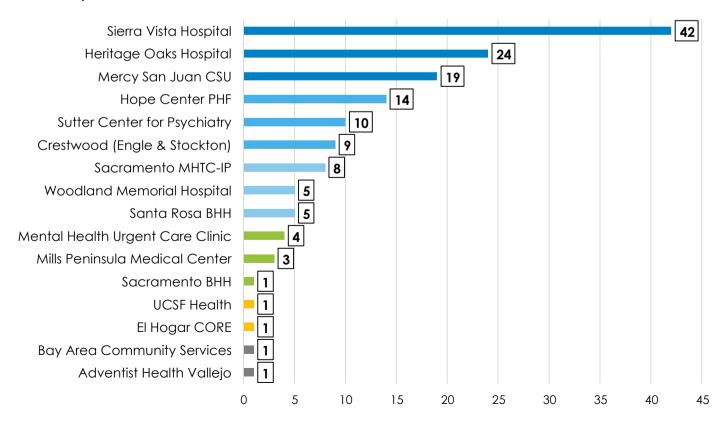


Connection to community resources, treatment and discharge planning



REFERRALS

Referrals by Source



DEMOGRAPHICS

All demographics below include all unduplicated admitted clients (N=137)*.

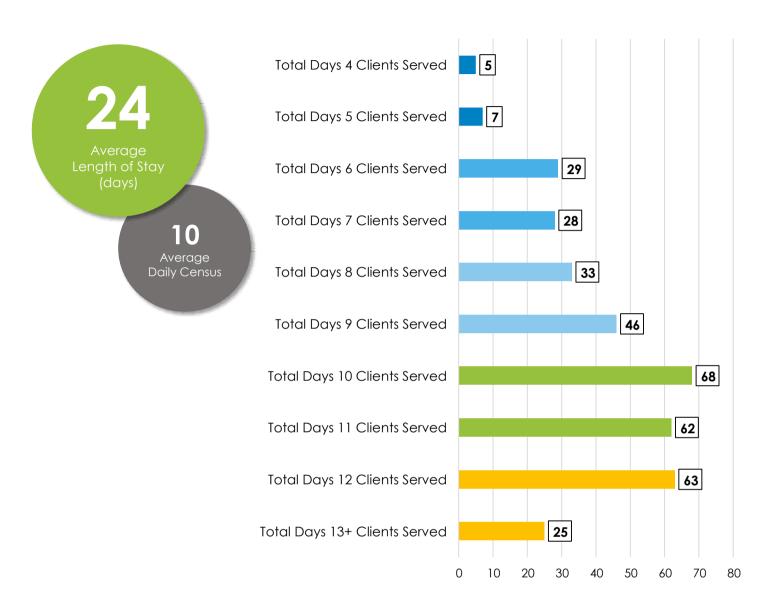
	#
Age Group	
TAY (18-25)	3
Adult (26-59)	123
Older Adult (60+)	11
Gender	
Female	44
Male	93
Sexual Orientation	
Bisexual	5
Gay/Lesbian	3
Heterosexual	109
Unsure/Questioning	1
Declined to State	6
Data Not Available/Unknown	13
Race	
American Indian/Native Alaskan	1
Asian/Pacific Islander	11
Black/African-American	37
Multi-Racial	11
Other	17
White/Caucasian	55
Data Not Available/Unknown	5

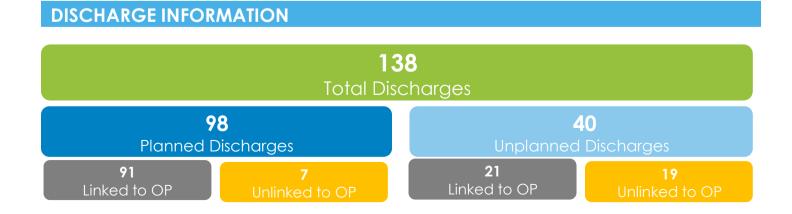
	#
Ethnicity	
Filipino	1
Hispanic/Latino	5
Japanese	2
Mexican/Mexican American	4
Multi-Ethnic	6
Not Hispanic	78
Other	16
Other Hispanic/Latino	11
Samoan	1
Vietnamese	1
Declined to State	1
Data Not Available/Unknown	11
Language	
English	130
Other	3
Russian	2
Spanish	2
Primary Diagnosis	
Bipolar and Related Disorders	28
Depressive Disorders	37
Schizophrenia Spectrum and Other Psychotic Disorders	75
Substance Abuse and Addictive Disorders	1
Trauma and Stressor Related Disorders	5

^{*}Primary diagnosis counts are duplicated as primary diagnosis can change between admissions

SERVICE INTENSITY

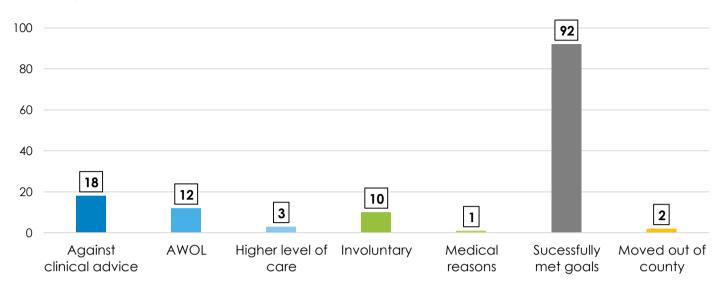
Due to the fact that a client can be admitted on the same day another client discharges, it is possible for more than 15 clients to be served on any given day.





DISCHARGE INFORMATION (CONTINUED)

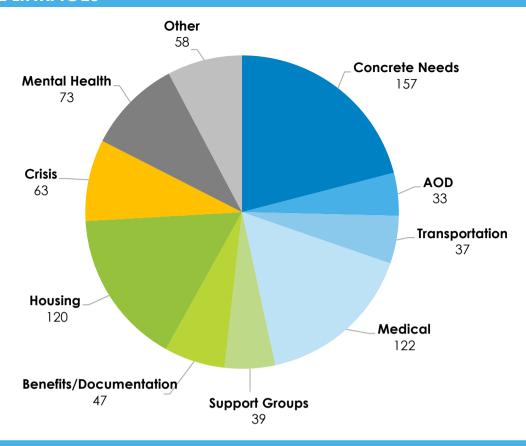
Discharge Reason



Outpatient Provider at Discharge

	#
Advanced Psychiatry Associates	2
Asian Pacific Counseling Center	2
Adult Psychiatric Support Services	1
Bay Area Community Services CORE	33
Capital STAR	2
El Hogar CORE	16
Hope Cooperative (CORE & New Direction)	24
Mind Path Health	1
Peach Tree Health	2
Placer County System of Care	1
Sacramento Native American Health Center	3
Telecare (Arise, Oasis, and Soar)	11
Turning Point Community Programs (CORE, ISA, Pathways)	14

ADDITIONAL LINKAGES



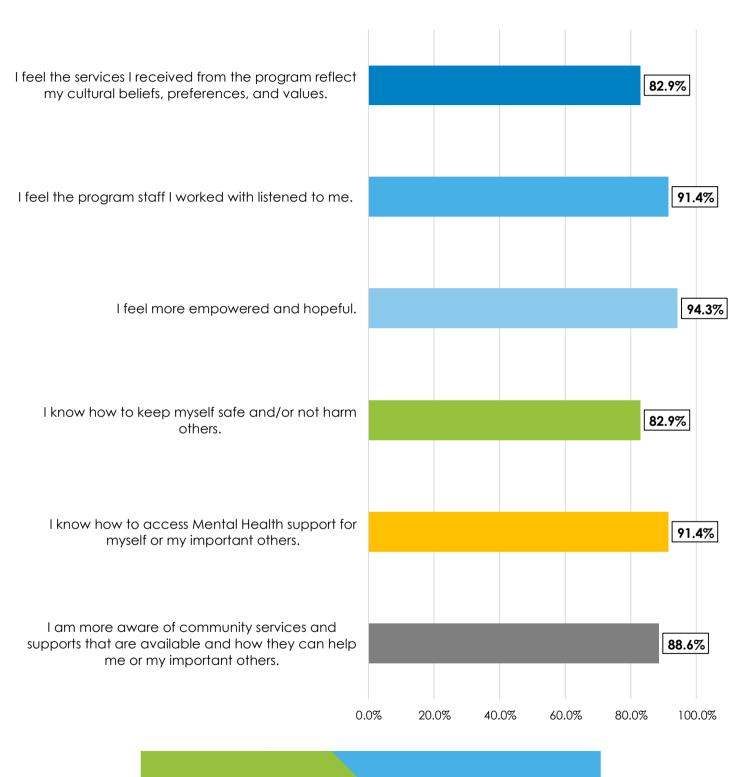
LIVING SITUATION AT ADMISSION AND DISCHARGE

The housing data below includes all discharges (duplicated) as housing status can fluctuate between admissions.

Living Situation at Intake	Living Situation at Discharge	
		Remained Homeless: 13
86	Became Housed: 39	Higher Level of Care: 2
	Temporarily Housed: 24	Out of County: 1
Homeless		Unknown: 7
Temporarily Housed	Became Housed: 1 Remained Temporarily Housed: 1	Out of County: 1 Unknown: 2
47 Housed	Remained Housed: 31 Temporarily Housed:11	Became Homeless: 1 Unknown: 4

CLIENT SATISFACTION

Of the 138 discharges in the reporting period, 16.7% (n=23) have a client satisfaction survey on file. Of those with a client satisfaction survey on file, 30.4% (n=7) were completed, and 69.6% (n= 16) were declined by the client. The chart below includes only those 7 individuals who completed the survey.



Overall Satisfaction Rate

88.6%

This report was developed and distributed by Turning Point Community Program's Outcomes & Evaluation Department



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