LAC DMH
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TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director

SUBJECT: **ASSISTING HOMELESS INDIVIDUALS WITH MENTAL ILLNESS**

During the March 19, 2013, meeting of your Board, Supervisor Antonovich directed the Chief Executive Officer to work with the Directors of Mental Health (DMH), Health Services (DHS), Public Health (PH), and Public Social Services (DPSS) and report back on modifications to streamline the process by which individuals with mental illness are assisted with General Relief and other social service entitlements. Departments were further asked to analyze the application process to implement efficiencies that might streamline the procedure. This memorandum will summarize strategies currently in place to efficiently connect homeless individuals with mental illness with needed benefits. We will also outline planning efforts underway to more efficiently and meaningfully coordinate benefits and services throughout Los Angeles County.

Background

The four County Departments named above provide an array of supportive services for homeless individuals with mental illness; assisting with access to benefits and entitlements is an important part of this service array. Our goal is to provide the right amount of assistance at the time these interventions are best received by clients. For this reason, outreach, engagement and case management strategies vary based on factors that include the individual's ability and desire to independently access services and geographic or administrative challenges associated with obtaining these benefits. Examples of the different strategies for benefits establishment at differing levels of service intensity are described below.

Initial Assistance with Access to Benefits: No Wrong Door to DMH or DPSS

- Integrated Services offered in DPSS District Offices. At the time of an initial application for General Relief, DPSS caseworkers may determine that a homeless individual is unable to pursue employment due to suspected mental health disabilities. Under these circumstances, the DPSS caseworker currently schedules the participant for a mental health clinical assessment which could result in designating the client as having "Needs Special

Assistance" (NSA) status. DMH psychiatric social workers co-located in 14 DPSS district offices throughout the County assist individuals who need special assistance by conducting an evaluation and linking them with mental health treatment. Simultaneously, DPSS Eligibility Workers (EW) arrange for benefits including General Relief, CalFresh and access to shelter bed programs. DPSS makes similar arrangements for individuals who have medical disabilities, linking them to Federally Qualified Health Centers (FQHC) for assistance while establishing benefits (CalFresh and General Relief).

- Coordination of Services: DMH linkage with DPSS. At the time new clients seek assistance at any DMH outpatient mental health facility, DMH staff conducts an assessment of the person's benefit status via a financial screening. Those clients who may potentially qualify for General Relief benefits are given a referral form identifying DPSS General Relief Districts throughout the County where they may apply for benefits. Depending on the client's level of independence, support such as transportation and case management assistance may also be offered. Clients enrolled in Full Service Partnership (FSP) programs, for example, may be accompanied to appointments at DPSS offices.

Access to Health Benefits: DPSS, DHS, and DMH Collaborate on Healthy Way LA

Individuals who are living on the streets without access to adequate nutrition and regular or preventive health care may become physically vulnerable. Adopting a "no wrong door" approach, County Departments have made a concerted effort to ensure indigent individuals are promptly enrolled in Healthy Way LA (HWLA), assigned to medical homes and connected to mental health and other social service benefits by utilizing the following strategies:

- DMH staff directly enrolls homeless individuals with mental illness into HWLA, assists with the selection of a medical home, and links clients with needed medical services.

- DHS staff enrolls clients into HWLA and links individuals with mental illness to DMH clinicians co-located within DHS Comprehensive Health Centers or with DMH clinics, through navigators employed by DMH to connect individuals with care.

DPSS staff directly enrolls General Relief applicants into HWLA and makes referrals to either DMH or DHS facilities, i.e., mental health clinics or DHS comprehensive Health Centers as described in the above two bullets.

Intensive Integrated Treatment Teams: Care Coordination for Highly Vulnerable Individuals

While the majority of homeless individuals with mental illness access health, mental health, substance use disorder, and benefits establishment through the mechanisms identified above, others require an intensive interdepartmental effort. Two approaches to the delivery of integrated services have evolved: One-Stop Centers (e.g., Magnolia Place) and intensive integrated treatment teams which bring services to homeless individuals including enrollment in various benefit programs. Some examples of intensive integrated treatment teams include:

- Street to Home: A team comprised of DHS staff at LAC+USC, DMH and mental health contract agency staff, Public Health's Substance Abuse Prevention and Control (SAPC) staff, and DPSS work together to identify homeless individuals with mental illness on the campus of LAC+USC. As a team, they engage clients to deliver seamless integrated care while also accessing housing supports.

- Project 50 and its replications: The four County Departments, mental health contract agencies, and FQHCs work as an integrated team to address the multiple health, mental health, substance use disorder, and social service needs of homeless individuals deemed to be the most vulnerable. Rather than expecting these highly vulnerable individuals to access services sequentially and in different sites, the services are "wrapped around" individuals and offered in the housing location to which homeless individuals are transitioned.

- MHSA Innovations Projects: The Integrated Mobile Health Teams developed and sited throughout the County bring together health, mental health, substance use disorder, and benefits specialists. Housing developers are an integral part of this comprehensive program, enabling clients to rapidly move into housing with on-site service delivery to maintain stability once housed.

Facilitating Collaboration: Streamlining the DPSS-DMH Process

As indicated in the March 11, 2013, memorandum to your Board, the Directors of DPSS and DMH conferred about mechanisms for streamlining the process by which individuals with mental illness are assisted with General Relief and other DPSS entitlements. The particular case brought to their attention by the Board was used as

an example to determine if there were immediate or longer term actions that should be taken. They determined that DMH co-located staff may reduce duplication of effort by coordinating with DPSS' EWs to prioritize homeless individuals who present to DPSS. For homeless participants who present with a referral from a County mental health program and/or who have self-identified as having a mental health issue and current linkage to treatment, EWs will flag and expedite these cases to the DMH's co-located clinicians in order to validate their NSA status and provide employability information.

Furthermore, the more lengthy assessment conducted for new referrals can be waived for those already engaged in mental health treatment. This modification will streamline the process of being determined as NSA (the category that is exempt from the work requirements of General Relief to receive continuing benefits) for many homeless individuals. Further, DPSS directed their staff to analyze the application process to see if there are other efficiencies that might be undertaken. This analysis is currently ongoing.

Future Efforts to Streamline and Integrate Care

In addition to working on administrative efficiencies noted above, all four Departments are currently exploring a broader concept for integration of care: the concept of a health neighborhood. In anticipation of the implementation of the Affordable Care Act, during April through June, DMH is convening a series of planning meetings to explore strategies for more meaningful coordinated care across Los Angeles County.

MJS:RK:CW:dd

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