

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU - MHSA IMPLEMENTATION AND OUTCOMES DIVISION
MHSA 3 Year Program & Expenditure Plan Fiscal Years 2017-18 through 2019-20**

**Community Services and Supports (CSS) Plan Consolidation
Full Service Partnership (FSP) (Intensive) vs. Non-FSP (Non-Intensive)**

Children's System of Care Work Group Recommendations

Full Service Partnership Services

1. How do we operationalize what "at risk" means? What are the characteristics of "at risk"?

Children and adolescents identified as Seriously Emotionally Disturbed (SED) are eligible for FSP (Intensive) services. Eligible SED Children as a result of the mental disorder has substantial impairment in at least two of the following areas:

- Zero to five year-old (0-5) who:
 - is at risk of expulsion from pre-school (e.g. past suspensions)
 - parent/Caregiver involved in Domestic Violence
 - has a parent/caregiver who has SED or a severe and persistent mental illness, or have a substance abuse disorder or co-occurring disorder

- Child/Youth who is unable to function in the home and/or community setting:
 - has psychotic features
 - has suicidal and/or homicidal ideation
 - has violent behaviors
 - has recent psychiatric hospitalization (s) within the last six months
 - has Co-Occurring Disorder (e.g. substance abuse, developmental or medical disorder)
 - is transitioning back into less structured home/community setting (e.g. from Juvenile Hall and/or Group Home placement)
 - has a parent/caregiver who has SED or a severe and persistent mental illness, or have a substance abuse disorder or co-occurring disorder
 - is at risk of or currently being homeless (e.g. eviction, couch surfing, domestic violence, parent unemployment)

- Child/Youth who is experiencing the following at school:
 - truancy or Sporadic attendance (e.g. tickets, SARB)
 - suspension or Expulsion
 - failing classes

- Child/Youth who:

- is at risk of or has already been removed from the home by DCFS (e.g. Seven day notices or multiple placement history)
- is at risk of or is currently involved with the Juvenile Justice system (e.g. contact with law enforcement and/or Juvenile Hall entries)
- is at risk of or currently a victim of Commercially Sexually Exploited Children (e.g. youth having multiple sexual partners)
- has a Parent/Caregiver involved in Domestic Violence

2. What methodology, if any, will be used to determine the levels of care within FSP?

While CSS workgroup members recognize the need to identify specialize programs such as Katie A., they strongly believe that the needs of children and families change rapidly and children's services should be as broad and flexible as possible. Based on this belief, workgroup members recommended avoiding the creation of levels of care within FSP and instead focus on meeting the unique needs of individual children and families.

3. What will be used to determine the level of need for each Service Area? How do we ensure the need is met?

There was a thorough exploration of the needs of each Service Area over the course of the CSS Workgroup meetings. It was evident each Service Area shared the desire for increased FSP (intensive) services and increased flexibility to better serve their unique communities.

CSS workgroup participants indicated that all Service Areas had the following similar needs:

- Housing
- Bilingual staff
- Translation services (specifically for indigenous languages)
- Increased intensive mental health services capacity
- Increased residential placement and psychiatric beds

4. What are the markers for success for this age group? What outcomes should we track?

Outcomes will be tracked through the Outcomes Measure Application (OMA).

Placement stability:

- Number of days in an out of home placement
- Number of days in an acute psychiatric hospital
- Number of days in Juvenile Hall

Education

- School Attendance
- School Grades
- Age appropriate involvement in school activities

Social Support

- Socializes with others

- Receives spiritual support, if appropriate
- Experiences age appropriate positive peer and family relationships

Non-Full Service Partnership Programs

1. What services are currently available for this age group?

Moderately intensive services are currently available based on client need. An array of mental health services is available to children and families receiving Field Capable Clinical Services. The services include:

- Individual and Family Therapy
- 24/7 Telephone Crisis Response
- Specialized COD Assessment and treatment interventions for the child
- Case Management/Linkage
- Medication support as needed
- Family Education & Support

2. Are there currently any gaps in services for this age group?

The CSS Workgroup identified several gaps throughout LA County for this age group. These gaps include, but are not limited to:

- Non-intensive outpatient services
- Housing support
- Access to residential placement
- Lack of psychiatric beds
- Immigration services
- Indigent funding
- Community resources (housing, medical, transportation, etc.)
- Consistent use of a Parent Partner
- Lack of bilingual staff
- Services for Unaccompanied Minors
- Substance abuse services
- FCCS flex fund restrictions

3. What types of services should this age group expect to receive?

The Non-Intensive service array should include the following:

- Community Outreach Services (COS)
- Individual and Family Therapy
- 24/7 Telephone Crisis Response
- Specialized COD Assessment and treatment interventions for the child
- Case management / linkage

- Medication support as needed
- Family education and support
- Flex Funds
- Respite Care services

4. What outcome measures will adequately assess the success of a client? Symptom-based outcome measure? Functional outcomes relevant to the program?

- The CSS workgroup recommends using a modified version of the current FCCS OMA to adequately assess client success.
- The possibility of utilizing the YOQ was discussed in the CSS workgroup; however, CSOC Administration must first research other symptom-based outcome measures that will assist in gaging client progress. CSOC Administration will also explore outside outcome measures which may be imposed by outside agencies (i.e. EPSDT)
- The following functional outcomes will be used to assess the success of the program:
 - Education/Vocational
 - School attendance
 - Improved grades
 - Appropriate involvement in school activities
 - Social Interactions
 - Age appropriate positive relationships with peers and family members
 - Appropriate involvement in the community
 - Placement Stability
 - Justice System Involvement