



Sachi A. Hamai
Interim Chief Executive Officer

COUNTY OF LOS ANGELES
Department of Mental Health
550 S. Vermont Avenue
Los Angeles, California 90020



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

PRESS RELEASE

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CONTACT: Kathleen Piché
213-738-3700

kpiche@dmh.lacounty.gov

Karen Zarsadiaz-Ige

213-351-5297

kzarsadiaz@dmh.lacounty.gov

LACDMH RESPONDS TO LITTLE HOOVER REPORT

Los Angeles County sees MHSA as transformative to public mental health system.

Los Angeles, CA – In the wake of the release of the misleading Little Hoover Commission Report on spending and efficacy of the Mental Health Services Act (MHSA) in California, the Los Angeles County Department of Mental Health (LACDMH) would like to highlight the transformation of public mental health services and offer outcome data, made possible as a direct result of MHSA implementation in Los Angeles.

“MHSA has been absolutely essential and transformative for mental health services in Los Angeles County. Working with our community partners, we have been able to both create measureable outcomes in treatment of the seriously mentally ill as well as remarkable outcomes for early intervention in mental illness using evidence-based practices. We were able to do this because the collaborative and inclusive process required by MHSA allowed us to adapt to the recession without any cuts to services as we improved our systems of care,” said Marvin Southard, D.S.W., LACDMH Director.

Senator Darrell Steinberg has made a commitment to have a full and robust Statewide evaluation of MHSA outcomes released within six weeks. Los Angeles County will fully cooperate to assist in these efforts.

Indicative of what has been done over the past ten years, LACDMH has developed MHSA programs that provide services for all ages in new and innovative programs, including:

Full Service Partnership Programs, resulting in:

- Dramatic reductions in days spent homeless (in excess of 69% reductions for children, adults and older adults served)
- Dramatic increases in days clients live independently in their own home (in excess of 59% increases for transition age youth and adults)

(More)

- Dramatic reductions in days incarcerated (in excess of 49% for transition age youth and adults)
- Reductions in the days psychiatrically hospitalized (in excess of 25% reductions for child, transition age youth and adults)
- Increase in the number of days clients are employed
- Dramatic cost offsets at the client level due to reductions in institutional care after entering the program (in excess of 184% of the costs offset for transition age youth, adults and older adults)

Mental Health Urgent Care Centers (UCC):

- On average, only 9% of clients seen at a UCC are psychiatrically hospitalized within 30 days of that UCC visit.

Field-Based Services:

- Over 70% of clients report increasing their involvement in community activities (a key indicator of recovery) as a result of these services.

Prevention and Early Intervention Services, utilizing time-limited practices with a body of evidence to support their effectiveness, resulting in:

- Dramatic reductions in child mental health symptoms that result in interpersonal distress, social problems, somatic concerns and behavioral dysfunction
- Increased parenting skills and abilities
- Reductions in trauma experienced by children
- Reductions in depression
- Reductions in child disruptive behaviors that impact school performance
- Reductions in risk factors associated with violence in school settings

Primary Care – Mental Health Integrated Care Programs (MHSA Innovation) resulting in:

- Significant reductions in mental health, physical health and substance use symptoms
- Reductions in homelessness for chronically homeless, vulnerable individuals with mental health and physical health conditions
- Reductions in psychiatric hospital use

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