Date:April 18, 2019Present:Makesha Jones-Chambers, Romalis Taylor, Dario Tejeda, Jasmine Coleman, Tanesha Johnson, Tiffany Garcia, Raul<br/>Aguirre, Amber Barker, Senait Admassu, Karen S. Gunn, Vincent Holmes

**DMH Staff:** Mirtala Parada-Ward, Anna Yaralyan, Keacha Stewart, Jim Sales, Belanie Brown, Ana Suarez

Participants via conference call	Brittany H	linton, Erica Melbourne,	Wend	y Cabil, Lisha Singleton
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Agenda Items	Comments/Discussion/Recommendations/Conclusions	Action Item	Person(s) Responsible
Welcome &	Welcome and Introductions.		AAA UsCC
Introductions	Romalis Taylor provided a brief description of the Code of Conduct. He informed all members that everyone must review and sign the Code of Conduct form. The Membership Code of Conduct is for every member that joins the subcommittee. This is to establish expectations for all committee members, guests and presenters.		membership
Review of Minutes	Minutes approved from 3/21/19 meeting.		Co-chairs/ Romalis Taylor
Home Team Presentation	<ul> <li>The Home Team was developed about 10 years ago to serve the homeless who are mentally ill.</li> <li>It was created to work with individuals who are suffering from severe mental illness.</li> <li>Mental Illness is the cause and reason they are not able to secure safe housing.</li> </ul>		Dario Tejeda

	<ul> <li>It is a challenge to secure resources that are needed for day to day functions.</li> </ul>	
	<ul> <li>The Homeless Outreach and Services has been historically disorganized.</li> </ul>	
	<ul> <li>By this summer, the home team efforts will increase substantially.</li> </ul>	
	• We attended a lot of meetings and found out that service providers were duplicating services. The	
	result of this would cause the individuals to shop around for services.	
	• The County and City has created LA HOP, which is a centralized referral system that allows anyone	
	from the community and business owners to make a referral online.	
	• The Home Team is not a part of LAHOP, because the Home Team is a specialized Mental Health	
	outreach team.	
	• The Home Team is called when the individual is severely mentally ill, yelling, screaming, signs of	
	defecation and/or in a state of psychosis.	
	<ul> <li>The Home Team receives referrals from business owners, but the majority of the referrals come</li> </ul>	
	from the outreach teams that are already out in the community.	
	• The Mental Health Homeless Service Team was considered to be part of the SB82. They are the first	
	responders and they are a part of DMH.	
	• We assist individuals who needs to be conserved or need to go through the court system. We also work	
	in collaboration with other agencies like FSP Homeless, FSP, VALOR etc.	
	• Our team is made up of community workers, medical case workers, psychiatric social workers, and	
	registered nurses. Currently we are hiring psychiatric technicians and a street medicine team.	
	• Street Medicine is a new concept where a doctor on staff will be able to go out into the community to	
Home Team	prescribe medications to individuals that are severely mentally ill and are unable to come	Dario Tejeda
Presentation	into the clinic or hospital.	
	<ul> <li>This program is in the planning phase, but the teams are growing.</li> </ul>	
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	• The Home team has been approved to hire 42 new staff members. We are trying to establish at least	
	one team for every two service areas. The Home Team is looking to hire a total of 100 staff members.	
	• He recommended to use the LA HOP referral system, and if they are not capable of meeting that	
	individual's needs then they are referred to the Home Team.	
	• He will make sure to keep Anna Yaralyan updated on any changes so that she can share with the group.	
	• The Home Team is a countywide program and we service all the Service Areas.	
	• The Home Team has developed a team specifically for Skid Row, because the need is higher.	
	Homeless services is not an immediate response.	
	<ul> <li>If there is a crisis, please call the access hotline at 800 854-7771.</li> </ul>	
	If there is an emergency situation occurring, please call 911.	
	Questions	
	1. Is there a flyer that you can share? The flyer is being updated at this time, he will share it with	
	Anna Yaralyan once it is completed, and the website will be emailed so she shares it with the	
	group.	
	2. How a referral is handled? You log into the website. I will send that information to Anna Yaralyan	
	to forward to the group	
	3. What is the difference between LAHOP and SB82? There is a slight difference, they do housing	
	retention, where we focus on the individuals who are unable to advocate for themselves, hiding in	
	the bushes or isolated. SB82 works with higher functioning individuals.	
Home Team	4. What is the timeframe and process to get someone to connect with that individual? You will	Dario Tejeda
Presentation	get an email that your referral was received immediately after you submit it, and they will respond	
	within 24 to 48 hours. Once a team responds and engages they will do their own assessment in	

	determining the level of services the individual may need.	
	5. Can you call LAHOP to make a referral, or do you have to log into the website? You can go	
	online to the LAHOP website to submit a referral, or you can call any homeless outreach program to	
	assist you.	
	6. Your developing teams for each service area, How many people would that be per service	
	area? Each team will consist of 12 people.	
	7. If someone is interested in volunteering is that possible, or seeking employment with the	
	Home Team what is the process? They are working on establishing a program for the peers, but	
	the details have not been disclosed as of yet.	
	8. Can you tell us about the language capacity of your team? Are there language experts in	
	other languages besides Spanish? We have Tagalog and Korean. When we don't have the	
	capacity to communicate, we use our contracted phone interpreters that DMH has provided.	
	9. Do you have those interpreters available for the African Communities also? I believe so.	
	10. Does anybody have to have a particular qualification? Do they have to be on medi-cal or is	
	this a free service to the community for that population of homeless people? The services	
	are free and ongoing, we do not bill medi-cal.	
Home Team	11. What happens when someone needs to be stabilized, how will you work with getting them	Dario Tejeda
Presentation	off the street? When a referral is made to LAHOP, there will ve different categories to choose	

2pm-4pm

from. It's a centralized system, the referral will be assigned to the appropriate outreach team that has the ability to provide that service.

12. What's the aspect or involvement of those struggling with addiction? We've worked with people who suffers from co-occurring disorders, and we work with community agencies to help address those issues. When LAHOP receives the referral, it is broken down into three categories based on the information that you submit. If substance abuse is an issue, it will go into a MTD which is a multi disciplinary treatment that has a substance abuse counselor.

#### **Suggestions:**

Dr. Karen S Gunn stated that if the Department is adding 42 new staff members to the Home Team, she suggested the team should think about some of the emergent languages, particularly in the African Immigrant community.

Senait Admassu suggested that the Home Team can also parter with the community based organizations, as there are a lot of them that provide to the African and Carribean immigrants.

Below is the information to refer homeless individuals:

Welcome to LA-HOP – <u>https://www.lahsa.org/portal/apps/la-hop/</u> LAHSA – Los Angeles Homeless Services Authority – <u>https://www.lahsa.org</u>

Mental Health Promoters Presentation	Ana Suarez presented to the group regarding the Mental Health Promoters Program. DMH has developed a prevention model that encourages community members to be trained on engaging with the community and educate them about basic mental health educations and how to access those services.	Ana Suarez
	<ul> <li>We started a Mental Health Promoters program in SA7 in 2012. It was a discrepancy and disparity in the access to care for the Latino population.</li> </ul>	
	• We piloted the Promoters Program in service area 7. An outside consultant was hired to train people from the community on mental health issues.	
	<ul> <li>Mental Health Promoters do a variety of things such as; Educate, provide door to door public health information and facilitate community presentations at churches, community centers, etc.</li> </ul>	
	• The idea is to strengthen and empower people to have a voice, to learn how to ask for the things they need from the community or the schools or health centers and not be afraid to speak up.	
	• We educate the promoters because they are community members. Some are parents of clients, some are clients, some of them are leaders in the schools from the PTA.	
	<ul> <li>In the past, people would not talk about mental health. Via this program we empower community members to talk about mental health as an avenue to help families to be emotionally supportive to community members.</li> </ul>	
	• There are promoters in other areas like, Domestic Violence, HIV, Substance abuse, etc.,	
	<ul> <li>They are good at facilitating presentations. They posess the skills to outreach and they have learned the signs and symptoms related to mental health illnesses.</li> </ul>	
	<ul> <li>It's a model where it's very egalitarian. You use different kinds of instructional techniques to learn. We use what works for the community.</li> </ul>	
	• The Promoters had to learn how to present, primarily through outreach and education. Last year we had about 1,000 presentations per Service Area, so that's about 4,000 presentations in 4 different Service Areas.	

	2pm-4pm	
Mental Health	SA1 have 24 promoters waiting to start training on April 23, 2019; It's a 3 week training	Ana Suarez
Promoters Presentation	• We are not targeting individuals with a mental illness, We are targeting families in schools, people in churches, parks, senior centers, etc.	
	<ul> <li>We give workshops and educate the community and empower them to seek help if needed.</li> <li>There is a series of modules that we train on. The modules include mental health stigma, depression, anxiety disorders, suicide and suicide prevention, domestic violence, drug and alcohol, grief and loss, child abuse, trauma and childhood disorders.</li> </ul>	
	• We have a group of Mental Health Promoters that will go into the community, conduct presentations and they empower the community to help themselves, and help others get connected to services.	
	<ul> <li>We are trying to target individuals to prevent them from getting overwhelmed with life, and not knowing what to do and not knowing how to get help, educate them before things get bad for them.</li> <li>The Mental Health Promoters are educators, who educate the community with the hope that the</li> </ul>	
	<ul><li>community will educate others.</li><li>The group decided to vote via survey monkey on the promoters program.</li></ul>	
Future Meeting Times & Dats	Thursday June 20, 2019 2pm to 4pm Thursday July 18, 2019 2pm to 4pm	

2pm-4pm

Location of	Lennox Library	
Meetings	4359 Lennox Blvd Lennox, Ca 90304 2 pm - 4 pm	

#### 5/15/19 final

Respectfully Submitted

Anna Yaralyan, Psy.D. Clinical Psychologist Office of the Deputy Director of Strategic Communications AAA Underserved Cultural Communities Liaison