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**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles Program Work Plan #: C-01	Program Work Plan Name: Children's Full Service Partnerships Estimated Start Date: January 1, 2006
<p>Responsibility of this program is to describe in this program how the program will help achieve the goals of the program.</p>	<p>All service partnerships are the result of the community service and supports plan individuals are where appropriate their families enroll in a voluntary program with a single point of responsibility to ensure that the parents' required services receive the range of supports they need to meet their child's needs and to develop a long-term plan of support. Each enrolled individual provides for the responsibility of a plan that is focused on recovery and wellness. Each enrolled individual has a single point of responsibility   Personal Service Coordinators for adults; case managers for youth and children. Each FSP case manager has a plan through case management 24/7 availability. Services are coordinated through the FSP for adults or case managers will directly coordinate with adult and/or child case managers. The FSP for adults or case managers will directly coordinate with adult and/or child case managers. The FSP for adults or case managers will directly coordinate with adult and/or child case managers. The FSP for adults or case managers will directly coordinate with adult and/or child case managers.</p>
<p>Priority Population Describe the additional characteristics of the priority population.</p>	<p>Children (0 to 3) who have a behavioral disturbance and their families who:                  * have had or are at risk of being removed from their homes by the County                  * have families affected by substance abuse issues                  * are experiencing extreme behaviors at school                  * are involved with the criminal justice system.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Adult Full Service Partnerships							
• Any and all appropriate strategies under "Implementation" section							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: C-02</p>	<p>Program Work Plan Name: Children: Family Support Services                  Estimated Start Date: January 1, 2006</p>
<p>Description of Program                  Describe how this program will help serve the needs of the target population</p>	<p>Supportive services are a key component of other services by providing parents/caregivers of a child with self-accessible mental health services for the child. Treatment will be delivered and integrated with the treatment of the child and family. Program will have a well-structured support services program, including a period of pre-treatment, treatment, and post-treatment. Treatment will incorporate the concept of flexibility. Strength-based approaches and those focusing on enhancing problem-solving skills will be utilized. Developing positive parenting relationships with family and community resources will be emphasized. Values of respect and dignity will be provided and reinforced through training, monitoring, and job retention, and tracking outcomes.</p>
<p>Priority Population                  Describe the situational characteristics of the priority population</p>	<p>Parents and caregivers with mental health needs whose plans are unmet/underfunded with their ability to care for their child but who are without other family resources are not covered under the child system plan, and for whom collateral services are insufficient.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Children: Family Support Services</p> <ul style="list-style-type: none"> <li>Individual therapy, case management, parenting education, peer support groups, substance abuse and domestic violence counseling</li> <li>Treatment will be strength-based and solution-focused. Interventions will focus on symptom reduction and providing coping strategies to deal with internal and external stressors.</li> <li>Substance use and mental health services to be provided.</li> <li>Services will be culturally competent and providing treatment to the priority population. Cultural strengths of the family will be utilized in service delivery. Los Angeles County will help identify community, university, and other potential service providers populations by service areas address ethnic disparities.</li> </ul>	1			1			

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: C-03</p>	<p>Program Work Plan Name: <b>Children: Integrated Mental Health/Co-Occurring Disorders (COD) Services</b>                  Estimated Start Date: January 1, 2006</p>
<p>Description of Program: This program will help provide the youth of the city...</p>	<p>Full continuum of services that meet the treatment needs of children and adolescents with COD and establish other service linkages to help maintain and sustain the child's ability to recover to supportive effective people management of full service partnership. Program will help children/youth: engage meaningful use of their life; enjoy a supportive environment with family and service providers; enjoy a network of supportive relationships through prevention services; enjoy risk and resiliency factors for COD and education of services; experience timely access to needed help and technical information through prevention and early intervention services; and experience coordinated clinical and community services with high quality and cost-effective placements through coordinated integrated comprehensive continuum of care and services for children and youth with COD, including aftercare.</p>
<p>Priority Population: Describe the situational characteristics of the priority population</p>	<p>In order of priority: 1) youth with COD in the foster care and juvenile justice systems; 2) homeless youth; 3) youth and adolescents with COD and substance abuse disorders and programs in care and parents with COD; 4) underserved ethnic minority populations with emphasis on culturally and linguistically appropriate outreach.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Children: Integrated Mental Health (COD) Services</p> <ul style="list-style-type: none"> <li>• Replicate and expand effective coordinated/integrated COD prevention and treatment program models.</li> <li>• Improve mental health and substance abuse treatment services provided to best practices prevention and health care services with COD using coordinated/integrated program models.</li> <li>• Coordinate activities/programs shared and other long-term assets with external staff who are well-positioned to deliver support care centers and other facilities with additional programmatic approaches, community-based care and self-help groups.</li> <li>• Expand capacity for placement of COD and COD referrals in community-based programs</li> <li>• Comprehensive approach that calls for addressing all children's mental health needs of developing children and youth. Program will be holistic, individualized and community-based and culturally competent</li> <li>• Family focused treatment services; residential treatment services; and psychiatric emergency services that address the needs of persons with COD in crisis.</li> <li>• Training for clinical supervisors and professionals including professionals with COD</li> <li>• Cross training of mental health professionals and substance abuse counselors with equal ability and competency</li> </ul>							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: <b>Children: Family Crisis Services: Respite Care</b>
Program Work Plan #: C-04	Estimated Start Date: January 1, 2006
<p>Respite care supports the achievement of Full Service Partnership outcomes by providing support for families and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care.</p>	<p>Respite care supports the achievement of Full Service Partnership outcomes by providing support for families and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care.</p>
<p>Family Population</p> <p>Describe the situational characteristics of the priority population</p>	<p>Respite care supports the achievement of Full Service Partnership outcomes by providing support for families and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care. Respite care is a service that provides temporary relief to caregivers and children who are in need of respite care.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Children: Family Crisis Services - Respite Care	1	1	1	1			
• Budget for services will be allocated based on service availability, as needed, for up to 1 year							
• Families will be prioritized for services based on the severity of the situation and the need for respite care services. Families who are unable to care for their children at home will be prioritized for respite care services.							
• Cultural and linguistic competence is ensured by employing family members who speak the same language as the clients.							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: T-01</p>	<p>Program Work Plan Name: Transition Age Youth Full Service Partnerships                  Estimated Start Date: January 1, 2006</p>
<p>Description of Program:                  Description of this program will help                  prioritize the needs of the youth</p>	<p>Full service partnerships are the heart of the community services and supports plan. Individuals are where appropriate their families enroll in a voluntary program with a single point of responsibility to ensure that the personalizing services receive the range of supports they need to achieve their recovery and develop a long-term plan of recovery. Each enrolled individual participates in the recovery plan of a plan that is focused on recovery and wellness. Each enrolled individual has a single point of responsibility   Personal Service Coordinators for adults; case managers for youth and children). Each PSC or case manager has a plan through case management 24/7 availability. Services are coordinated through the PSC for adults or case manager for children as defined by the client and/or family consultation with the PSC for adults or case manager for children youth services are focused on "what works" takes on a client and are judged effective by how well the individual is able progress to concrete outcomes of well-being.</p>
<p>Priority Population:                  Describe the situational characteristics                  of the priority population</p>	<p>Transition Age Youth (TAY) suffering from serious mental health issues, who are:                  * Struggling with substance abuse disorders                  * In crisis or at-risk of becoming homeless                  * Aging out of the child or youth mental health, child welfare or juvenile justice system                  * Leaving long-term institutional care                  * Experiencing their first psychiatric break</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Transition Age Youth Full Service Partnerships							
* All other appropriate strategies under "Community Services Support"							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: TAY Drop-In Centers
Program Work Plan #: T-02	Estimated Start Date: June 1, 2006
Description of Program	Tropi centers are located in city public health system for youth living on the street and homeless youth. The target sub-population for drop centers is the "service-resistant" homeless youth who have been sheltered by most of the service providers and offer other non-disorders - (substance use, mental health, etc.) services. Drop centers provide a safe and high tolerance environment where youth can find temporary safety and help in building relationships with staff and peers who are connected youth. -to be extensive public ready and willing -to services and supports services.
Priority Population	Transition Age Youth who are 16-24. The vast majority of the target sub-population youth are either former foster youth or youth who are living in the public system. Most are disconnected from their families. The unique and separate challenges they face compared to the children and adult populations who interface with their family are: difficulty connect with the program and receiving assistance they need to be able to address their educational, financial, and other individual needs.

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
TAY: Drop-In Centers		X			X		
As city public health system, drop centers provide a safe, high-tolerance environment where youth can find temporary safety and help to build relationships.							
In some cases, drop centers will be co-located with Transitional Resource Centers (TRCs), which function as "drop centers" where youth are eligible for a probation and TRCs can be provided with support and resources they need to establish the necessary stability in the community.							
Integrated housing centers offer essential health substance abuse, employment and mental health services can be accessed.							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: TAY Housing Services
Program Work Plan #: T-03	Estimated Start Date: June 1, 2006
<p>Respite services are provided to help people with disabilities live independently. Respite services are provided to help people with disabilities live independently. Respite services are provided to help people with disabilities live independently.</p>	<p>Housing provides a fundamental level of stability for young people to achieve their goals of wellness and recovery. The lack of affordable housing options, including shelter, supportive, and permanent options, is a major barrier for transition age youth who need support and services for recovery. Three systems of care interventions are proposed to meet the following housing strategies: (1) rapid re-housing for youth who are homeless; (2) permanent supportive housing for youth who are homeless; (3) project-based rental options for youth who have been homeless; (4) transitional housing; and (5) a range of housing specialists to develop local resources and help the most vulnerable youth.</p>
<p>Priority Population: Describe the situational characteristics of the priority population</p>	<p>These investments apply primarily to youth ages 12-24, particularly for TAY who are homeless, living on the streets and in dire need of immediate shelter. TAY who have been in long-term institutional settings (e.g., level 4 group homes) including those TAY who are unable to qualify for level 4 group homes but were being discharged, hospital discharges of Mental Health, Co-occurring Treatment Facilities and Probation centers; TAY who require structured supports; and TAY who are experiencing their first psychiatric break.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
TAY: Housing		X			X		
<ul style="list-style-type: none"> <li>Total investments for affordable housing for TAY who are homeless, living on the streets and in dire need of immediate shelter</li> <li>Permanent housing subsidies for TAY who are homeless, living on the streets and in dire need of immediate shelter for TAY who have been in long-term institutional settings</li> <li>Level 4 housing specialists effectively addressing housing-related services to assist TAY in obtaining housing, which provides a fundamental level of stability to achieve wellness and recovery.</li> </ul>							



## EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY

County: Los Angeles	Program Work Plan Name: <b>Probation Services</b>
Program Work Plan #: T-04	Estimated Start Date: March 1, 2006
<p>Responsible for this program will help coordinate the goals of the T-04</p>	<p>Services in the Probation Center are critical in assisting this portion of the T-04 population with mental health needs to ensure their return to potential alternative confinement facilities within the criminal justice system as soon as possible. The program with disability, intellectual issues will provide an array of services that are successfully transitioning youth out of the Probation setting. Long-term recovery approach, which uses mental health services as a condition for which individual can recover and live a healthy and productive life, these services will be provided by parent/peer advocates, clinicians and Probation staff who will provide a variety of treatment and support services including: assess needs for mental health services, coordinate substance abuse services and medications; ongoing treatment services; peer support; parent support; community; behavior management; discharge planning; funding benefits establish and transition planning with respect to education, employment and family, if appropriate.</p>
<p>Youth Population</p> <p>Describe the situational characteristics of the priority population</p>	<p>With appropriate stability, the youth services provided by the Probation Department's Juvenile Hall staff will be targeted at most of 3 year old of ongoing mental health services. These screenings also revealed that 10-15% of the youth are substance abusers. Mental health services are provided in juvenile halls with an average overall daily population of 1,100 youth, with a high concentration in the overall daily population of 1,100 youth.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<b>TAY: Probation</b>		X			X		
• Public defender, integrated teams will be utilized to provide pre-arrest, diversion, and probation staff will provide a variety of treatment and support services.							
• Treatment and support services will be strength-based and family directed in nature, with a combination of assessment and ongoing treatment group, individual and family, and other collaborative services.							
• Family and peer advocates will provide a range of educational and support services to the juvenile center and family.							
• Discharge planning and community linkage services will be critical components of the program.							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: A-01</p>	<p>Program Work Plan Name: <b>Adult Full Service Partnerships</b>                  Estimated Start Date: January 1, 2006</p>
<p>Respite services are a critical component of the community services and supports plan for individuals and where appropriate their families and in a voluntary program with a single point of responsibility to ensure that the persons receiving services receive the range of supports they need to maintain their safety and health and to help them remain in their homes. Each county has a different paradigm for the delivery of a plan that is focused on recovery and wellness. Each county also has a single point of responsibility (Personal Service Coordinators for adults; case managers for youth and children). Each FSP or case manager has a plan for each individual (24/7 availability). Services do not have to be provided at all needed services to benefit the client. The client will be consulted with the FSP for adults or case manager for children/youth. Services are provided in a collaborative manner to meet and are judged effective by the well-being of the client and the progress of concrete outcomes of well-being.</p>	<p>Full service partnerships are the heart of the community services and supports plan for individuals and where appropriate their families and in a voluntary program with a single point of responsibility to ensure that the persons receiving services receive the range of supports they need to maintain their safety and health and to help them remain in their homes. Each county has a different paradigm for the delivery of a plan that is focused on recovery and wellness. Each county also has a single point of responsibility (Personal Service Coordinators for adults; case managers for youth and children). Each FSP or case manager has a plan for each individual (24/7 availability). Services do not have to be provided at all needed services to benefit the client. The client will be consulted with the FSP for adults or case manager for children/youth. Services are provided in a collaborative manner to meet and are judged effective by the well-being of the client and the progress of concrete outcomes of well-being.</p>
<p>Vulnerability population                  Describe the situational characteristics of the priority population.</p>	<p>Adults (65+) who have severe and persistent mental illness and who are:                  * suffering from substance abuse or other co-occurring disorders, either who have suffered from or are in need of                  * are in need of                  * are in need of                  * are frequent users of hospitals and emergency rooms                  * are cycling through different residential and transitional settings                  * are being treated by facilities outside of residential setting</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Adult Full Service Partnerships	1					1	
* project all available through order of preferences by client							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: A-02</p>	<p>Program Work Plan Name: <b>Adult Wellness/Client-Run Centers</b>                  Estimated Start Date: January 1, 2006</p>
<p>Description of Program:                  Describe how this program will help advance the goals of the WSP</p>	<p>This program promotes recovery and sustained well-being through an emphasis on proactive behavioral preventive strategies, and self-responsibility. The Wellness Centers provide mental and physical health through a self-help, recovery peer support and medical and psychosocial support structure that program participants conduct in their recovery and personal goals for a healthy life. The Client-Run Centers are committed to increasing the capacity of the community through all dimensions of diagnosis, treatment, recovery, and community life through offering a variety of self-help, educational and social/recreational activities</p>
<p>Priority Population:                  Describe the situational characteristics of the priority population</p>	<p>These programs offer substance abuse and mental health services to individuals affected by the WSP program who may be receiving services for homelessness, substance abuse and other co-occurring conditions increasing responsibility for their own wellness and recovery. The Wellness Centers' priority populations will include ethnic populations who may be more responsible for substance health care settings, individuals with co-occurring ethnic and/or mental health conditions, individuals who are frequent users of hospital emergency rooms. Attention will be given to developing Client-Run Centers in areas with underserved or underserved ethnic minority populations that have been underserved by other community centers and services.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Adult Wellness Centers: Client-Run Centers</p> <ul style="list-style-type: none"> <li>Wellness Centers: Client-Run Centers</li> <li>Wellness Centers: Integrated physical and mental health services coordinated ethnic centers to provide health, care, diagnosis, coordinated services</li> <li>Integrating services to clients who are high-risk; buildings are centrally located, near other community organizations, rather than part of an independent clinic or health program site</li> <li>Culturally appropriate services to reach persons of racial/ethnic cultures who may be underserved and/or more responsible for substance-specific culture-based activities</li> <li>Ethnic-specific outreach strategies to reach ethnic populations to eliminate disparities in care. Clients are to address from the targeted communities are expected to develop strategies and messages</li> <li>Open to members with co-morbidities; provides co-morbidities treatment with activities and messages from Wellness Centers and coordination of persons with mental illness.</li> <li>Classes and interventions for clients regarding what clients need to know for good health and successful living in the community</li> </ul>							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: A-03                  Program Work Plan Name: Adult IMD Step-Down Facilities                  Estimated Start Date: January 1, 2006</p>	
<p>Respite services will be provided to eligible individuals with mental health needs and related operational costs, when necessary, at selected licensed Adult Residential Facilities (ARF), crisis nurseries, assisted living, congregate housing or other appropriate settings. The program will assist clients for residential and intensive residential settings within the community following discharge from highly structured settings.</p>	<p>The program will serve individuals 18 years of age and above, the majority of whom are ready for discharge from institutions for mental disease. The program will target those individuals with the highest needs of care who require supportive mental health and supportive services in transition from a locked or highly structured setting to the community phase and prepared for independent living. The program will also serve vulnerable persons being discharged from acute psychiatric inpatient units into intensive residential facilities in order of being placed in the highest levels of care, when appropriate for this service.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Adult Step-Down Facilities</p> <ul style="list-style-type: none"> <li>Supportive residential mental health program provided by licensed mental health professionals, mental health workers, certified drug and alcohol counselors, and family and peer advocates</li> <li>24/7 availability for emergencies and scheduled programming</li> <li>Operational and support needs if necessary</li> <li>Highly focus on peer support and family involvement, including direct care support groups for participants, providing community reintegration for the target population.</li> <li>Collaboration with Alcohol and Drug Program providers and the County's Adult Facility Alternative treatment units of program participants.</li> <li>Workage with vocational and employment services</li> <li>Capacity for participants over for the 24-hour per cent housing in residentially congregate or alternative residential settings affiliated with the ARF and congregate supportive mental health services if needed</li> <li>Workage with Full Service Partnerships for directly supporting the level of care over (encompassing) Step-Down Facilities</li> </ul>							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles Program Work Plan #: A-04a</p>	<p>Program Work Plan Name: Adult Housing Services: Housing Specialists Estimated Start Date: January 1, 2006</p>
<p>Description of Project: Describe how this program will help achieve the goals of the WSP.</p>	<p>Addresses the recovery of individuals with a mental illness who have co-occurring disorders of mental illness and substance abuse by helping them obtain and retain housing with a particular emphasis on independence. The housing specialists will collaborate with providers in the private sector and community housing developers to find housing solutions for individuals who are at high risk of homelessness. They will also be available to be housing options for clients. Promoting direct client housing options. They will also be available to be respect to landlord concerns and direct cases. The expected outcomes of this program include increased number of days individuals are housed in stable and affordable housing.</p>
<p>Priority Population: Describe the geographical area, characteristics of the priority population.</p>	<p>Adults between the ages of 18 and 64 many of whom are homeless or have a history of homelessness incarcerated or have a history of homelessness in locked psychiatric facilities or are at risk of hospitalization in Adult Residential Care facilities and other settings which are often costly, unsafe and unaffordable. Many of these individuals have been traditionally invisible, underserved and inappropriately served and have had multiple barriers to finding appropriate housing such as poor credit histories, criminal backgrounds, co-occurring substance abuse problems and the acute need of supportive services in order to retain housing.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
[Redacted]							
[Redacted]							
Adult Housing Services: Housing Specialist							
• Supportive housing for people with mental illness, recovery, and resilience							
• Culturally appropriate services							
• 24/7 support services for housing program clients							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles  
 Program Work Plan Name: **Adult Housing Services: Safe Havens**  
 Program Work Plan #: A-04b  
 Estimated Start Date: January 1, 2006

For purposes of address and recovery, individuals that have a mental illness and a history of substance abuse are typically in crisis, many of whom have co-occurring disorders of mental illness and substance abuse. By helping the individual and their caregiver to improve their health, safety and well-being, the program offers a safe haven for an individual living with a mental illness. The program provides a safe haven for individuals with a mental illness that are unable to address the needs of their program of mental illness and substance abuse. Supportive services are available to address the needs of the residents and should result in the following outcomes: decreased number of days individuals are homeless in shelters and in institutional care and increased number of days individuals are in permanent safe and affordable housing and increased days that people are employed. The Safe Havens will be expected to collaborate with many community agencies and programs such as law enforcement, business associations and residential and drug and alcohol program providers. Residents will be identified through outreach and engagement. Individuals who were formerly in crisis will be hired as outreach workers.

Individuals between the ages of 18 and 65 who are chronically homeless, many of whom are unaccompanied, self-reliant and have long histories of homelessness. These individuals typically have a history of homelessness, hospitalizations, poverty and multiple medical problems. For most of these individuals the traditional mental health system has not been effective. This population has multiple barriers to finding appropriate housing such as poor credit history, lack of income, criminal backgrounds, and co-occurring substance abuse problems. Individuals who are in need of supportive services in order to obtain housing.

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Adult Housing Services: Safe Havens							
Supportive housing to improve housing stability, recovery, and resilience							
Outreach and engagement to address housing needs							
Community support through multiple agencies and groups							
Culturally appropriate, value-driven services available 24/7 that are integrated with mental health service planning and support housing, including substance addiction							

**COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles Program Work Plan #: A-05</p>	<p>Program Work Plan Name: Adults Jail Transition and Linkage Services Estimated Start Date: January 1, 2006</p>
<p>Description of Program: Describe how this program will help achieve the goals of the WSP.</p>	<p>For males the values of wellness and recovery for individuals that have a mental illness and have intensive mental health services. This program is designed to address and engage all incarcerated individuals in appropriate levels of mental health services and support including housing and employment services prior to their release from jail. Collaborations with Jail Mental Health Services, Mental Health Court Workers, Attorney's family members, and other stakeholders and the unified case management boards/Resource Centers will be key to the success of this program. The goal of this program is to provide release for the jail and to address the needs of individuals in finding jobs that allow the re-entry of the community and to address the appropriate psychological services. Additional goals include linkage with full service Partnership programs and providing the supports needed to help people promote their quality of life.</p>
<p>Priority Population: Describe the situational characteristics of the priority population.</p>	<p>Adults between the ages of 18 to 65 who are incarcerated and at risk of re-arrest in circumstances where they are typically not appropriately served by existing community-based mental health programs. These individuals typically have a long history of incarceration, hospitalizations, employment and family. For most of these individuals the traditional mental health system has not been effective. This population has multiple barriers finding appropriate housing such as poor credit histories, lack of income, criminal backgrounds, and co-occurring substance abuse problems. Individuals have not been able to find appropriate services or treatment housing.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Adult Jail Transition and Linkage Services							
• Direct self-directed care plans							
• Integrated services including collaboration with criminal justice system, family members, and substance resource centers for the purpose of crisis prevention							
• Intensive community services and supports							
• Culturally appropriate services							
• Integrate appropriate services including full Partnership programs for housing and employment services							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: Older Adult Full Service Partnerships
Program Work Plan #: OA-01	Estimated Start Date: January 1, 2006
<p>Respite services are the heart of the community service and supports plan for individuals and where appropriate their families and in a voluntary program with a single point of responsibility to ensure that the persons requiring services receive the range of supports they need to maintain independence and control in their own lives. Each county financial plan states in the majority of a plan that it focuses on recovery and wellness. Each county financial plan has a single point of responsibility for personal service coordinators for adults; case managers for youth and children. Each FPO case manager has a plan for each client to insure 24/7 availability. Services are coordinated through the FPO for adults or case manager for children. Services are provided on a voluntary basis and are not subject to budgeted restrictions by the well-being of the progress or concrete outcomes of well-being.</p>	<p>Older adults (65 years) who have severe and persistent mental illness and who are:</p> <ul style="list-style-type: none"> <li>Not currently being served and have unmet functioning</li> <li>In crisis or at risk of being in crisis</li> <li>Institutionalized, or at risk of being institutionalized</li> <li>Without caring homes, including hospital or emergency services</li> </ul>
<p>Older Adult Full Service Partnerships</p>	<p>Older adults (65 years) who have severe and persistent mental illness and who are:</p> <ul style="list-style-type: none"> <li>Not currently being served and have unmet functioning</li> <li>In crisis or at risk of being in crisis</li> <li>Institutionalized, or at risk of being institutionalized</li> <li>Without caring homes, including hospital or emergency services</li> </ul>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Older Adult Full Service Partnerships							



**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: Older Adult Transformation Design Team
Program Work Plan #: OA-02	Estimated Start Date: January 1, 2006
Describe the program or activity	Create a true coalition of services for older adults to ensure full access to needed help; generate and evaluate relevant data; collaboratively develop and evaluate an address-based, culture-based, culturally appropriate program; providing physical program as well as other special needs of older adults.
Describe the geographical characteristics of the priority population	Older adults throughout the ages of 60 and 64, especially those who are 65 years and older, as program is funded, specialized services for those who are over 75 of age will become a focus. Older adults who have been traditionally underserved or otherwise disadvantaged, efforts will seek to give them access and obtain services. Individuals who are severely cognitively disadvantaged, self neglective, abuse and/or neglect; individuals with dementia and/or multi-injectable drug abuse; individuals with substance abuse and/or alcoholism.

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Older Adult, System Transformation Team							
• Recovery-oriented approaches specific to older adults, including employment, education, and continuing education opportunities							
• Evidence-based, integrated treatment of co-occurring disorders in older adults							
• Culturally sensitive, evidence-based or problem-based practices for assessment and treatment of older adults, including assessment strategies that integrate primary healthcare professionals and mental health professionals							
• Best practices for transition of older adults and highly specialized needs of older adults 75+							
• Evaluation of current and proposed services including social, psychological, and legal							
• Expand funding options and strategies, including support for local residential settings							
• Provide clients and family members planning and oversight efforts							
• Build or contract with existing providers; City and County Department of Aging, senior center counseling programs, Public Service Senior Centers, County Adult Protective Services, and others							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: Older Adult Field-Capable Clinical Services
Program Work Plan #: OA-03	Estimated Start Date: January 1, 2006
<p>Respite services will help decrease the burden on family caregivers of the frailty population.</p> <p>Respite services will help decrease the burden on family caregivers of the frailty population.</p>	<p>Create field-capable, specialized, clinical services for older adults who need specialized clinical services provided by direct professionals trained to work with older adults. These services will be provided in locations preferred by clients in collaboration with other service providers such as primary medical providers.</p> <p>Older adults who need the types of care and services that are not provided through existing programs such as specialized services for those who have cognitive impairment will receive services. Older adults who have been traditionally underserved or underserved including for example, clients who need more specialized services and health services, individuals who are severely mentally ill, individuals with complex needs, those with dementia, and those with multiple chronic conditions will receive additional services through this program.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Older Adult, Field-Capable Clinical Services							
Field-capable, specialized programs will be provided in community. They will coordinate care with available other adult appropriate psychiatric emergency services and community support resources to help access needed help.							
Collect and engage with, bi-psychosocial assess need, individualized and fully treatment, treatment support, linkage and care management support, peer counseling, family education and support							
Specialized treatment for CO, substance abuse and physical health problems							
Coordination by older adult specialists such as geriatricians and geriatric psychiatrists							
Facilitate access to mental health and supporting services and procedures to be available and accessible to the health care.							
Services will be provided through interdisciplinary teams as geriatricians, geriatricians, and support professionals for family, caregivers, and direct							
Working with mental health providers with coverage of older adult service providers							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: OA-04</p>	<p>Program Work Plan Name: Older Adult Service Extenders                  Estimated Start Date: January 1, 2006</p>
<p>Description of Program:                  Describe how this program will help advance the goals of the WSP</p>	<p>As part of the program, clinical staff, service providers, peer counselors, peer educators, and family members will address the primary concerns of older adult clients and their families in a highly sensitive and culturally appropriate manner. Staff will be trained in various areas such as the resident's abilities and care requirements.</p>
<p>Priority Population:                  Describe the geographical characteristics of the priority population</p>	<p>Older adults between the ages of 60 and 74, especially those who are in programs leading to residential services for those who are over 75 of age will be the focus. Older adults who have been traditionally underserved or underserved including for example, clients who need more support services and mental services; individuals who are severely mentally ill; individuals with self-harm, abuse, and hoarding; and those who do not qualify for other available support services.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Older Adult Service Extenders</p> <ul style="list-style-type: none"> <li>• Have supported vulnerable older adult clients to support wellness and recovery</li> <li>• Have supported family members to support strength and work of relationships</li> <li>• Have supported individual achievement when older adults are at risk of abuse, neglect or disability to increase safety of for clients</li> <li>• Grouping and conducting trainings to strengthen relationships and improve services</li> <li>• Have supported individuals through the identification of unsafe housing conditions such as hoarding, neglect or abuse in substandard housing</li> <li>• Service providers as models for recovery and health especially for clients who struggle with mental health</li> <li>• Service providers meet with local community to reflect the cultural needs and linguistic needs of the clients. Strategies will be constructed effectively for clients' all language and capabilities</li> <li>• Have supported in various discussions regarding different needs of men and women who are at risk of homelessness</li> </ul>							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: Older Adult Training
Program Work Plan #: OA-05	Estimated Start Date: January 1, 2006
<p>Respite services are provided to help individuals with disabilities and their families. This program will help provide the services of the respite services.</p>	<p>Providing respite services to individuals with disabilities, their families and community professionals help change attitudes and increase knowledge regarding integrated treatment recovery, peer support and a variety of best practices for services. Over time, providing direct services to support direct goals for culturally diverse older adults training will be provided to help care providers and other health providers increase coordination and integration of mental health, primary care, and other health services. Staff providers direct family members and community partners.</p>
<p>Priority Population: Describe the situational characteristics of the priority population.</p>	<p>Older adults have the ages of 65 and 64, and those who are 65 years and older as programs lead to specialized services for those who are over 75 of age will become a focus. Older adults who have been traditionally underserved or underserved including for example, adults who need such as people with access and mental health, individuals who are severely mentally ill, individuals with self-harm, abuse, and substance use, and those who are in separate and/or multiple abuse situations. Rights to insurance and retirement.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p><b>Older Adult, Training</b></p> <ul style="list-style-type: none"> <li>Training that supports the address the priorities of the individuals affected by these activities, evidence-based and promising practices for culturally diverse populations; recovery models for older adults; integrated treatment of co-occurring disorders among older adult populations; challenges for transition to adulthood; employment and volunteerism for older adults; housing options for older adults; understanding of benefits and benefits established with the state and helps to understand the needs, needs, and family level mental and life cycle assessment; assess and address self-harm and substance use; and finally, ethnically and linguistically diverse groups</li> <li>Training and education focused on creating additional support of peer counseling and peer support groups</li> <li>Direct and family members employed as service providers will be provided training programs for the respite recovery model</li> <li>Community partners will be provided training offering first responder, safety and care services and public health staff provide services across the fully members categories and professional, community, professional organizations, institutions and county departments.</li> </ul>		X					X

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles		Program Work Plan Name: Service Area Navigator Teams	
Program Work Plan #: SN-01		Estimated Start Date: January 1, 2006	
<p>Responsible for this program will help coordinate the goals of the program.</p>	<p>Service Area Navigator Teams will be a crucial structure to help people find the formal and informal supports they need. We will begin by establishing one team in each of the eight service areas. Cross teams and family members will be part of this and may serve as advocates when system barriers are encountered. Team members address the following goals:</p> <ul style="list-style-type: none"> <li>Engage with people and families to identify community available services including supports and services tailored to the particular cultural, ethnic, age and generational diversity of those seeking them;</li> <li>Recruit community-based organizations and professional service providers to become part of an active locally-based support network for people in the service areas, including those with challenges by mental health issues;</li> <li>Follow-up with people who they have engaged to ensure that they have received the help they need;</li> <li>Develop and use technology and other means to map and keep up to date about the current availability of services and supports in the service area;</li> <li>Engage in joint planning efforts with community partners, including community-based organizations, other County Department independent mental health service providers, faith-based organizations, other publicly and privately groups, with the goal of increasing access to mental health services and strengthening the network of services available to clients with mental health issues;</li> <li>Provide awareness of mental health issues, address common mental health concerns, wellness, and self-help.</li> </ul>		
<p>Priority Population: Describe the situational characteristics of the priority population.</p>	<p>All people with mental health issues in a service area, with a beginning focus on the priority local populations for the full service partnerships for all language groups, underserved and underserved ethnic communities, special populations, and others.</p>		

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Service Area Navigator Teams</p> <ul style="list-style-type: none"> <li>Design of each team will reflect the needs of each local area with a balance of professional skills, community-based skills and lived experience, as well as job make for mobility and community-based supports and services.</li> <li>Supports service integration through bridges to mental health and supportive services. Trouble shoots when system barriers are encountered.</li> <li>Collaboration with the full service partnership regarding the service areas to appropriately outreach engage and refer appropriate individuals to these services</li> </ul>							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: <b>Alternative Crisis Services: Urgent Care Centers</b>
Program Work Plan #: ACS-01a	Estimated Start Date: January 1, 2006
Description of Project	The Urgent Care Centers (UCC) will provide intensive crisis services to individuals who otherwise would be hospitalized. The Department of Health Services Psychiatric Emergency Services, that are presently required to provide hospitalization or residential care for individuals with mental health problems, are providing these services. Funding opportunities for these services include program services for co-occurring substance abuse disorders in UCC with a focus on recovery and linkage to ongoing community-based services will impact necessary and appropriate community-based treatment as well as provide crisis voluntary treatment settings that are recovery oriented.
Priority Population	Substance characteristics of clients to be served in UCC include who are requesting and high utilization of emergency department services, those with co-occurring substance abuse, those needing medication management and those whose presenting problems can be met with shorter inpatient or urgent care services. Community-based substance abuse treatment services will be coordinated with those of housing.

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Alternative Crisis Services: Urgent Care Centers							
UCC provides services for individuals requiring community-based services							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

<p>County: Los Angeles                  Program Work Plan #: ACS-01b</p>	<p>Program Work Plan Name: <b>Alternative Crisis Services: Countywide Resource Management</b>                  Estimated Start Date: January 1, 2006</p>
<p>Description of Program                  Describe how this program will help achieve the goals of the WSP</p>	<p>This program will provide overall administrative, financial, integrative, and fiscal management functions for the department including not only budgeting, personnel, and other administrative and support services, but also financial resources and fully support for all programs. This comprehensive management approach will support the department and regional services through a system that will increase the goals of the WSP by reducing costs, increasing accountability, increasing the effectiveness of the system, and increasing the potential for cost efficiency and recovery.</p>
<p>Priority Population                  Describe the situational characteristics of the priority population</p>	<p>The population served by this program is all TAY, adults and older adults who utilize any of the types of facilities and programs listed above. In instances where the population served will have preparation for or membership in communities with accessibility needs, the population served will include persons from all ethnic groups and social identifiers.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
<p>Countywide Resource Management</p> <ul style="list-style-type: none"> <li>Coordination of resources to maximize efficiency between departments of care and community-based health services and supports.</li> <li>Coordinating planning and implementation of programs that provide transitional services for individuals requiring transitional care to community-based programs that provide and sustain recovery.</li> <li>Management of the residential and ongoing services and the full transition and discharge services to enhance coordination of resources.</li> <li>Collaboration with Service Area Managers (adult and older adult programs) and System Managers (children and 18+ program)</li> <li>Extensive collaboration with Full Service Partnership providers and the Evidence Based Medical projects to ensure that persons requiring the services of care are effectively linked and served.</li> <li>Regulatory compliance and other services to ensure that services provided address the unique needs of diverse care including those with co-occurring behavioral disorders.</li> <li>Development of specialized programs within the residential facilities that are culturally relevant and meet specialized needs such as those of the hearing impaired and persons with the forensic mental health system.</li> </ul>							

**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: <b>Alternative Crisis Services: Residential &amp; Bridging Services</b>
Program Work Plan #: ACS-01c	Estimated Start Date: January 1, 2006
<p>Residential and Bridging Services will provide 111 program initiatives and peer education initiatives to assist in the coordination of psychiatric services and supports for individuals being discharged from a County hospital psychiatric emergency services and programs and County contracted private residential care beds for psychiatric individuals. The goal of the residential transition residential and supportive residential substance abuse, and other specialized programs. The program will promote the expectation that clients must be successfully reintegrated into the community after discharge so that all care providers must participate in a coordinated transition to the community. This coordinated linkage and integration of inpatient and residential services will enhance the goals of the County's ongoing psychiatric care and the need for a coordinated residential care and provide the potential for a community link.</p>	<p>The residential and bridging services will provide 111 program initiatives and peer education initiatives to assist in the coordination of psychiatric services and supports for individuals being discharged from a County hospital psychiatric emergency services and programs and County contracted private residential care beds for psychiatric individuals. The goal of the residential transition residential and supportive residential substance abuse, and other specialized programs. The program will promote the expectation that clients must be successfully reintegrated into the community after discharge so that all care providers must participate in a coordinated transition to the community. This coordinated linkage and integration of inpatient and residential services will enhance the goals of the County's ongoing psychiatric care and the need for a coordinated residential care and provide the potential for a community link.</p>
<p>Priority Population</p> <p>Describe the situational characteristics of the priority population</p>	<p>The populations served by this program are children, teens, adults and other adults who utilize any of the types of facilities and programs listed above. The populations served will be for successfully reintegrating the priority crisis residential care facilities. The population served will include persons from all ethnic groups and social orientations.</p>

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Alternative Crisis Services: Residential and Bridging Services							
• Crisis residential and supportive residential/bridged services, substance abuse, and other specialized programs							
• On-site services through providers							



**EXHIBIT 4: COMMUNITY SERVICES AND SUPPORTS WORK PLAN SUMMARY**

County: Los Angeles	Program Work Plan Name: <b>Alternative Crisis Services: Enriched Residential Services</b>
Program Work Plan #: ACS-01d	Estimated Start Date: July 1, 2006
<p>Respite services will provide a substitute, secure, short-term residential program for individuals who are ready for discharge from hospital care. The program is designed to provide community-based intensive residential services that are focused on treating the cycle of crisis, a primary and important component of a successful community reentry plan.</p> <p>The population to be served by this program are adults and juveniles ages of age, from County hospitals and other residential settings who still require structured, supported residential services and stability after their transition to levels of community-based care at the point of discharge. The population served will include persons from all ethnic groups and social demographics.</p>	

	Fund Type			Age Group			
	FSP	Sys Dev	OE	CY	TAY	A	OA
Alternative Crisis Services: Enriched Residential Services							
Community-based intensive residential services							