

Transition-Age Youth System of Care and Gap Analysis/Unmet Needs DRAFT Framework/Discussion Only



Prevention	Early Intervention	Intensive Intervention				
V	\checkmark		\checkmark	\checkmark	\checkmark	
Prevention Projects	Early Intervention Programs	Non-Intensive Services	Community Services and Supports	Child Welfare	Therapeutic Services	System Support
Partners in Suicide Prevention (PSP)/Anti-Stigma and Discrimination (ASD) - PEI- Funded Program Increase public awareness of suicide and reduce stigma associated with seeking mental health and substance abuse services. The team offers: - Education - Appropriate tools and	PEI Funded Evidence- Based/Community- Defined/Promising Practices - PEI-Funded Program Various Evidence- Based/Community- Defined/Promising Practices as part of the PEI plan. Implementation of the practices was fast-tracked due to transformation and reduction of County General	Probation Camp Services - CSS- Funded Program Provides services to youth ages 16-25 who are residing in Los Angeles County Probation Camps; particulary SED/SPMI youth, those with co-occurring substance abuse disorders and/or those who have suffered trauma. Camp Assessment Units assess the youth's needs and services are	Transition Age Youth Full Service Partnership (FSP) - CSS-Funded Program Intensive services with 24/7 staff availability to help individuals (age 16-25) address emotional, housing, physical health, transportation, and other needs to help them function independently in the community.	Wraparound (Intensive) - MHSA, EPSDT and Katie A. Funded Program A program utilizing principles organized around three main elements: family strengths/child need-based approach; multi-agency collaboration in the community; and cultural competence. Program objectives include assisting	Therapeutic Behavioral Services (TBS) - MHSA, EPSDT and Katie A. Funded Program TBS is an intensive, individualized, one-to-one behavioral mental health service available to children/youth with serious emotional challenges and their families, who are under 21 years old and have full-scope Medi-Cal.	Outreach and Engagement - CSS-Funded Program Service Area-based staff who provide outreach and education to communities on MHSA services. Service Area Navigation - CSS- Funded Program Service Area-based teams that provide referral and linkage services and oversee the
resources such as evidence-based practices - Linkage and referral to appropriate services	Funds (CGF) during FY 2010- 2011. PEI practices target the following TAY sub- populations: - Trauma exposed - Onset of serious psychiatric illness - Stressed families - At risk for school failure - At risk for school failure - At risk of experiencing juvenile justice involvement - Underserved cultural populations (including LGBTQ)	provided by Multi-Disciplinary Teams. Juvenile Hall Services - Non- MHSA-Funded Program Comprehensive mental health screening/evaluation, and assessment of all newly admitted youth. Mental health treatment is provided to those in need of mental health services.	Transition Age Youth Field Capable Clinical Services (FCCS) - CSS-Funded Program FCCS addresses the needs of individuals (age 16-25) who are SED/SPMI, but do not have the intensive service needs of individuals who qualify for FSP. FCCS provides a way of to transition FSP clients to less intensive programs as they meet their recovery goals. Urgent Care Centers (UCCs) - CSS-Funded Program UCCs provide intensive crisis	youth in returning home and maintaining their placements.		coordination of service referrals through the Service Area Impact Units. Housing Specialists - CSS- Funded Programs Develop comprehensive housing resources, assist SED/SPMI TAY with completing applications for rental subsidies, and prepare youth for their interview with prospective property owners or housing managers.



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TAY Mobile Resource Library - PEI-Funded Program Mobile resource library designed to provide TAY with resources and information regarding mental health services, supports, vocational assistance, housing resources, and other community-based resources.	Juvenile Justice Transition Aftercare Services (JJTAS) - PEI-Funded Program Focuses on youth transitioning from Probation Camp settings back to their home communities by utilizing evidence-based practices and linkage services. JJTAS works to identify mental health issues as early as possible and provide early intervention services to assist youth successfully remain in the community. Assembly Bill 129 (Dual- Status 241.1) - Non-MHSA- Funded Program DMH staff placed in Delinquency and/or Dependency Courts to conduct mental health assessments and case planning of "at risk" youth. Multi-Disciplinary Teams provides linkage to appropriate mental health services.	Wellness/Client-Run Center - CSS-Funded Program Wellness/Client-Run Centers are targeted for clients who are stable in treatment and are looking to further their progress toward their recovery goals.	 individuals who otherwise would be brought to psychiatric emergency rooms. UCCs provide up to 23 hours of immediate care and linkage to community-based services, including integrated services for co-occurring substance abuse disorders. Crisis Resolution Services (CRS) - CSS-Funded Program Mental health crisis intervention to divert utilization of inpatient services. Provides rapid psychiatry medication evaluation and prescription services. Institutions for Mental Disease (IMD) Step-down - CSS-Funded Program Provides supportive on-site mental health services. Targets individuals in higher levels of care who require on- site mental health and supportive services. 		Institutions for Mental Disease (IMD) - Non-MHSA- Funded Program IMDs are long term care psychiatric facilities, licensed by the State, that are contracted by DMH to provide care for persons who no longer meet the criteria for acute care but are not clinically ready to live in a board and care facility or to live indpendently.	TAY Housing Programs - CSS- Funded and Non-MHSAFundedProvides a variety of housing options to address the long- term and immediate/urgent housing needs of theSED/SPMI TAY population Permanent Supportive Housing/Project-Based Operating Subisidies for Permanent Housing - Independent Living Program (Non-MHSA; exiting DCFS or Probation foster care)- Enhanced Emergency Shelter Program (EESP)Transition Age Youth Drop-In Centers - CSS-Funded Program Drop-In Centers provide temporary safety and basic supports for Seriously Emotionally Distrubed (SED) and Severe and Persistently Mentally III (SPMI) TAY . Housing CSS Funded Program



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Gap/Unmet Need Analysis	Gap/Unmet Need Analysis	Gap/Unmet Need Analysis	Gap/Unmet Need Analysis	Gap/Unmet Need Analysis	Gap/Unmet Need Analysis	Gap/Unmet Need Analysis
Currently, there is a lack of	With the transformation of	Lack of co-occurring mental	As FSP is the most intensive	Currently there is a gap in	TAY (especially 16-17) are	EESP, Independent Living
services for youth that do not	CGF into PEI services which	health and substance abuse	MHS and highest level of care,	services for clients who are	limited.	Programs, and Permanent
meet Medical Necessity but	encompasses various EBPs	services for TAY.	there is often a gap in services	transitioning out of the Child		Supportive Housing resources
would benefit from treatment.	with varying eligibility criteria,		for clients that are	Welfare system that continue	Need additional TAY crisis	are currently not available in
	target symptoms/behaviors,	Wellness/Client-Run Centers	transitioning to lower levels of	to need MHS.	services.	all Service Areas.
	length of stay and treatment	are geared more toward the	care from FSP to FCCS. There			
	modalities, there left a gap in	adult population.	are no other services or	Similar with PEI and CSS	Lack of specifically designed	Limited housing resources for
	services to clients that		'traditional' outpatient	programs, there is a gap in	IMD resources for TAY.	TAY.
	complete an EBP but continue		services.	services for clients who only		
	to need services (i.e.			need medication support		Lack of supportive
	medication only). Currently		Limited number of FSP slots	services.		employment services for TAY.
	there isn't a program that		and FCCS service capacity.			
	provides "meds only" or			DCFS is reducing the number		TAY Drop-In Centers are not
	counseling for these clients.		UCCs are not currently	of slots available for WRAP		currently available in all
			available in all Service Areas.	and the number of WRAP		Service Areas.
				providers which could create		
			Lack of specifically designed	an additional burden on		
			IMD Step-down resources for	FSP/FCCS services.		
			TAY.			
				Gap in services for older TAY		
				(18-25) who are exiting from		
				Probation.		