## COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU - MHSA IMPLEMENTATION AND OUTCOMES DIVISION

Mental Health Services Act (MHSA)
Community Services and Supports Plan
Three Year Program and Expenditure Plan
Fiscal Year 2014-15 through 2016-17
Program/Service Expansion

The Department's Executive Management Team identified a trend of under-spending within the Community Services and Supports (CSS) Plan and asked the System Leadership Team (SLT) for an age group allocation methodology for \$30 million in each of the next 3 Fiscal Years (2014-15 through 2016-17). After reserving \$10 million for Board of Supervisor expansion program priorities, the SLT approved the following age group percent distribution of net CSS dollars: Child, 13%, TAY, 13%, Adult, 61% and Older Adult, 13%. This resulted in an additional \$2.6 million allocation for child, TAY and Older Adults and \$12.2 million for adults for each of the Fiscal Years 2014-15, 2015-16, 2016-17. Below are the programs/services identified for expansion:

Program	MHSA Work Plan	Service Area
Implementation of Laura's Law/Assisted Outpatient Treatment <sup>1</sup> Assisted Outpatient Treatment/Laura's Law: Three hundred slots will be added in FY 2014-15 to the Adult FSP program. IMD Step-down Facilities will increase their capacity to serve 60 additional clients.	Adult Full Service Partnership (A-01) IMD Step-Down Facilities (A-03) Planning, Outreach & Engagement (POE-01)	All
IMD Step Down Programs  To help decompress Los Angeles County Hospital Psychiatric Emergency Services, twenty-two beds will be added to the IMD Step-Down program.	IMD Step-Down Facilities (A-03)	All
Service Component of SB82 California Health Facilities Financing Authority (CHFFA) Grant <sup>2</sup> Request funds from the SB82 CHFFA grant to develop three (3) Urgent Care Centers to be located on the campus of Harbor-UCLA Medical Center, the Antelope Valley and the San Gabriel area to serve 72 individuals at any given time and 35 new Crisis Residential programs to increase capacity by 560 beds countywide.	Alternative Crisis Services (ACS-01)	1,3,8
Child Field Capable Clinical Services (FCCS) Expand to serve an additional 330 clients for each FY 2014-15, 2015-16 and 2016-17	Child Field Capable Clinical Services (C-05)	All
Family Wellness/Resource Centers (FWRC) FWRCs are designed to act as a welcoming and family-friendly center within the community where families with children in need of mental health services can go to obtain information and resources to navigate the mental health, physical health and educational systems and participate in self-help meetings and workshops.	*Family Wellness/ Resource Centers	TBD
Family Crisis Services: Respite Care Program Respite Care Services are positive, supportive services intended to help relieve families from the stress and family strain that result from providing constant care for a child with Severe Emotional Disturbance (SED), while at the same time addressing minor behavior issues, implementing existing behavioral support plans, and assisting with daily living needs.	*Family Crisis Services: Respite Care Program (C-04)	All
Self-help Support Groups for Children  This funding will be used to establish self-help support groups for four evidence-based self-help programs: 1) Rainbows for children (4-15) who have experienced trauma, death, divorce, violence, removal from home and other losses; 2) La Leche League for at risk children 0-5 to establish healthy parental attachment; 3) Alateen for children (13-15) who have parents with mental health, substance abuse or other dysfunction in their families; 4) Because I Love You for parents of Children (10-15) with ADD, mental health and other behavioral issues.	*Self-help Support Groups for Children	TBD

<sup>\*</sup> Indicates new MHSA work plan

Program	MHSA Work Plan	Service Area
Transitional Age Youth (TAY) Full Service Partnership (FSP) Expand the number of slots by 18 over the three (3) fiscal years	TAY Full Service Partnership (T-01)	2,3,6
TAY FCCS Increase capacity by 36 clients over the three (3) fiscal years.	TAY Field Capable Clinical Services (T-05)	2,3,6
Self-Help Support Groups for TAY <sup>3</sup> Provide peer-led self-help support groups for TAY at TAY Drop-In Centers and for TAY living in permanent supportive housing.	*Self-Help Support Groups for TAY	All
TAY Supported Employment Services  Train current TAY mental health providers in implementing supportive employment services within their existing mental health delivery system.	*TAY Supported Employment Services (T-06)	All
Adult FSP 25 slots will be added in FY 2014-15. 100 slots will be added for FY 2015-16 and FY 2016-17. 75 additional slots to be added to providers who demonstrated success with their Innovation program, which ends June 30, 2015. Psychiatric capacity expanded by four psychiatrists across the directly operated FSP system.	Adult Full Service Partnership (A-01)	1 and 5
Adjunct Services for Clients in Wellness Centers  Adjunct services for clients in Wellness Centers who are not in need of intensive services as part of this model will include medication management, non-intensive case management, and peer support. Estimated to serve an additional 29,000 clients in FYs 14/15, 15/16 and 16/17.	Wellness/Client Run Centers (A-02)	All
Supported Employment in Wellness Centers  Expand staffing to implement Supported Employment, an Evidenced-based Practice, which assists clients to obtain and maintain employment. 150 clients to be served in FY 14/15 and 300 clients in Fiscal Years 2015-16 and 2016-17.	Wellness/Client Run Centers (A-02)	All
Housing Specialists Add one Housing Specialist per program. 1,500 clients to be served in each of Fiscal Years 2014-15, 2015-16, and 2016-17.	Wellness/Client Run Centers (A-02)	All
Peer Staff The addition of 35 peer staff to directly operated Wellness Centers and to contract Client Run Centers to serve an additional 1,750 clients.	Wellness/Client Run Centers (A-02)	All
Client Run Centers  Expand Client Run Centers to ensure availability in every service area. In FY 14/15 an additional 500 clients would be served while in Fiscal Years 2015-16 and 2016-17, an additional 2,000 clients would be served.	Wellness/Client Run Centers (A-02)	3 and 6
Adult FCCS Increase clients served by 50 for FY 2014-15. For FY 2015-16, increase clients served by 200. Providers who demonstrated success with their Innovation program, ending June 30, 2015, will have their contracts amended to serve collectively an additional 132 clients.	Adult Field Capable Clinical Services (A-06)	4 and 5
Housing Trust Fund  Extend the current five (5) year contracts which are ending for some agencies. The funding will allow for the expansion of supportive services to more permanent supportive housing programs.	Adult Housing Services (A-04)	All
Adult Housing Services  An investment in capital development and operating subsidies to expand the number of affordable, permanent supportive housing units for Department of Mental Health clients.	Adult Housing Services (A-04)	All

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Program	MHSA Work Plan	Service Area
Older Adult FSP Expand slots by 122 over the three (3) fiscal years.	Older Adult Full Service	All
and slots by 122 over the three (3) liscal years.	Partnership (OA-01)	
Older Adult FCCS Increase capacity by 456 clients over the three (3) fiscal years	Field Capable Clinical Services (OA-03)	All
Community Mental Health Promoters		
Roll out of Promoters/Health Navigator Teams in each Service Area, following an established and tested model, including initial training, coaching and presentations for a small core group of participants. Translate all prepared and available presentations from Spanish to English. Train in-house trainers with the help of Training Consultant to assure sustainability.	*Mental Health Promoters (MHP-01)	All

<sup>&</sup>lt;sup>1</sup>Originally, the MHSA work plan, Service Area Navigation, was allocated dollars for outreach and engagement services. It was decided Outreach and Engagement would be done by the FSP team and billed to Planning, Outreach and Engagement. The money allocated for Service Area Navigation will be added to the PO&E plan. October 2015.

<sup>&</sup>lt;sup>2</sup>Originally, DMH proposed the development of four Urgent Care Centers (UCC). South-East Los Angeles will no longer be a location of a UCC due to the funding cap by the State. July 2014.

<sup>&</sup>lt;sup>3</sup>Originally, it was proposed funding would be used to establish self-help support groups for four evidence-based self-help programs. As presented at SLT, when TAY clients residing in permanent supportive housing were surveyed, they indicated a strong interest in groups that focused on the arts.