COUNTY OF LOS ANGELES

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BOARD OF SUPERVISORS

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DEPARTMENT OF MENTAL HEALTH

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May 31, 2011

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Dear Supervisors:

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

#24

JUNE 7, 2011

SACHI A. HAMAI EXECUTIVE OFFICER

AUTHORIZATION TO FILL POSITIONS TO IMPLEMENT MENTAL HEALTH SERVICES ACT-PREVENTION AND EARLY INTERVENTION COUNTYWIDE JUVENILE JUSTICE TRANSITION AFTERCARE SERVICES PROGRAM (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Request approval and authorization to fund and fill 27 budgeted positions to implement the Countywide Juvenile Justice Transition Aftercare Services Program to deliver the Mental Health Services Act - Prevention and Early Intervention Plan.

IT IS RECOMMENDED THAT YOUR BOARD:

Authorize the Department of Mental Health (DMH) to fund and fill 27 Full-Time Equivalent (FTE) positions (Attachment) necessary for the implementation of the Mental Health Services Act-Prevention and Early Intervention (MHSA-PEI) Countywide Juvenile Justice Transition Aftercare Services Program. These positions are in excess of what is provided for in DMH's staffing ordinance, and pursuant to Section 6.06.020 of the County Code is subject to allocation by the Chief Executive Officer (CEO).

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Board approval of the recommended actions will fund and fill new ordinance positions for a new, directly-operated program to deliver the Countywide Juvenile Justice Transition Aftercare Services Program (Program), while implementing the MHSA-PEI Plan.

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The California State Department of Mental Health (SDMH) has designated the Children and Youth Involved In or At Risk of Juvenile Justice Involvement as one of the six priority populations for PEI services, as they are particularly vulnerable to mental illness and/or at risk of not receiving mental health services due to social, economic, and cultural barriers. DMH took a leadership role and formed a MHSA-PEI Stakeholder Delegates Group, developed an overall MHSA-PEI Services Plan, and submitted it to the SDMH for approval. The MHSA Mental Health Services Oversight and Accountability Committee approved the MHSA-PEI Plan in August 2009 and allocated funding for the implementation. With the MHSA-PEI Plan being allocated \$2,000,000 for FY 2010-11, there is sufficient appropriation in the FY 2010-11 Final Adopted Budget for this action. Program funding for future fiscal years will be requested through DMH's annual budget process.

Consistent with DMH's vision of partnering with clients, families and communities to create hope, wellness, and recovery, a new directly-operated DMH program will implement the MHSA-PEI Plan to deliver integrated, comprehensive PEI services to this vulnerable population through early mental health interventions and collaborative efforts with the Probation Department, impacted families and local community partners. The goals are to re-integrate these youth back into the community to live quality lives, to reduce juvenile delinquent behavior, recidivism and mental health illness throughout Los Angeles County and to enrich the target population's lives through effective and caring PEI services.

Implementation of Strategic Plan Goals

The recommended actions are consistent with County's Strategic Plan Goal 2, Children, Family, and Adult Well-Being, and Goal 4, Health and Mental Health.

FISCAL IMPACT/FINANCING

Sufficient appropriation is included in the FY 2010-11 Final Adopted Budget for this action. Funding for future fiscal years will be requested through DMH's annual budget process.

There is no net County cost associated with this action.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The directly-operated aftercare Program will implement the MHSA-PEI Plan. The Program will engage individual youth before their release from the Probation camp settings, outreach to their families, and involve their families in the treatment planning. Program staff will coordinate linkage to services and arrange case management in the local community. The Program will deliver PEI services to difficult-to-engage children and youth or those already involved in the juvenile justice system, utilizing Evidence-Based Practices (EBPs). Services sites include non-traditional sites such as Probation's Juvenile Day Reporting Center(s) and area offices, community agencies, schools, parks and recreation centers. The Program will collaborate with the Probation Department to identify youth who show signs of behavioral/emotional difficulties and are at-risk of continued contact with the juvenile justice system. The Program will track outcomes, coordinate ongoing training for the provision of the PEI specialized EBPs, Promising Practices and Community Evidence Defined Practices.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

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The aftercare Program is anticipated to serve 1,000 youth/families annually. Additionally, approval of this request will enhance DMH's service capacity through the provision of early intervention services in non-traditional and non-branded community mental health facilities. The Program will collaborate with the Probation Department to collect outcome data and report the outcome information to the Board offices on a quarterly basis to provide Program progress and accountability. The outcome data collected and tracked will include the number of youth referred to the aftercare Program, the number of youth linked to aftercare services, the timeframe for the linkage to occur, the number of youth completing the evidence based practice programs and the number of youth who discontinue their participation and reasons. The long term goal is to look at recidivism rates for Program participants. In addition, the Program will utilize standardized instruments designed to assess, measure, and track mental health symptom reduction and treatment progress. The Program will work closely with the Probation Department's Camp to Community Transition Program to develop and deliver comprehensive services that follow youth as they transition from a residential treatment facility to the community to ensure a coordinated effort that results in prompt access to services. Timely access to necessary and early mental health interventions, along with the collaborative efforts between DMH and the Probation Department, including community partners, are anticipated to lessen the total County cost of care while simultaneously reducing the impact of mental illness on juvenile justice youth and their families.

Respectfully submitted,

MARVIN J. SOUTHARD, D.S.W.

Director of Mental Health

MJS:SDT:LMW

Enclosures

c: Chief Executive Officer County Counsel Probation Department Executive Officer, Board of Supervisors Chairperson, Mental Health Commission

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH MENTAL HEALTH SERVICES ACT PREVENTION AND EARLY INTERVENTION COUNTYWIDE JUVENILE JUSTICE TRANSITION AFTERCARE SERVICES PROGRAM LIST OF ITEMS

ITEM # & SUB LETTER	17	TITLE OF POSITION		ORDINANCE POSITIONS	FTE's	
02216a	SENIO	R TYPIST-CLERK		2	2.0	
09038a	SUPVG PSYCHIATRIC SOCIAL WORKER			1	1.0	
09038a	SUPVO	PSYCHIATRIC SOCIAL WORKE	R	1	1.0	
09035a	PSYCH	HATRIC SOCIAL WORKER II		2	2.0	
09035a	PSYCH	HATRIC SOCIAL WORKER II		2	2.0	
09035a	PSYCH	HATRIC SOCIAL WORKER II		2	2.0	
09035a	PSYCHIATRIC SOCIAL WORKER II			2	2.0	
09035a	PSYCHIATRIC SOCIAL WORKER II			1	1.0	
09035a	PSYCHIATRIC SOCIAL WORKER II			1	1.0	
09030a	MENTA	AL HEALTH CLINICIAN		2	2.0	
09030a	MENTAL HEALTH CLINICIAN			2	2.0	
09030a	MENTAL HEALTH CLINICIAN			1	1.0	
08149a	MENTA	AL HEALTH SERVICES COORD II		1	1.0	
02102a	SENIO	R SECRETARY III		1	1.0	
08697a	CLINICAL PSYCHOLOGIST II			1	1.0	
04727a	MENTAL HEALTH ANALYST I			1	1.0	
08103a	COMMUNITY WORKER			1	1.0	
08103a	COMM	UNITY WORKER		1	1.0	
02214a	INTERMEDIATE TYPIST-CLERK			1	1.0	
01865a	TRAINING COORDINATOR, MH			1	1.0	
				27		27.0