

▶▶ Mental Health Services Act Update

- MHSA Plan Approval Process, Current Adjustments, Update and Plan Forward
- Redesigning Stakeholder Engagement Strategies and the Community Planning Process
- Innovations Proposals



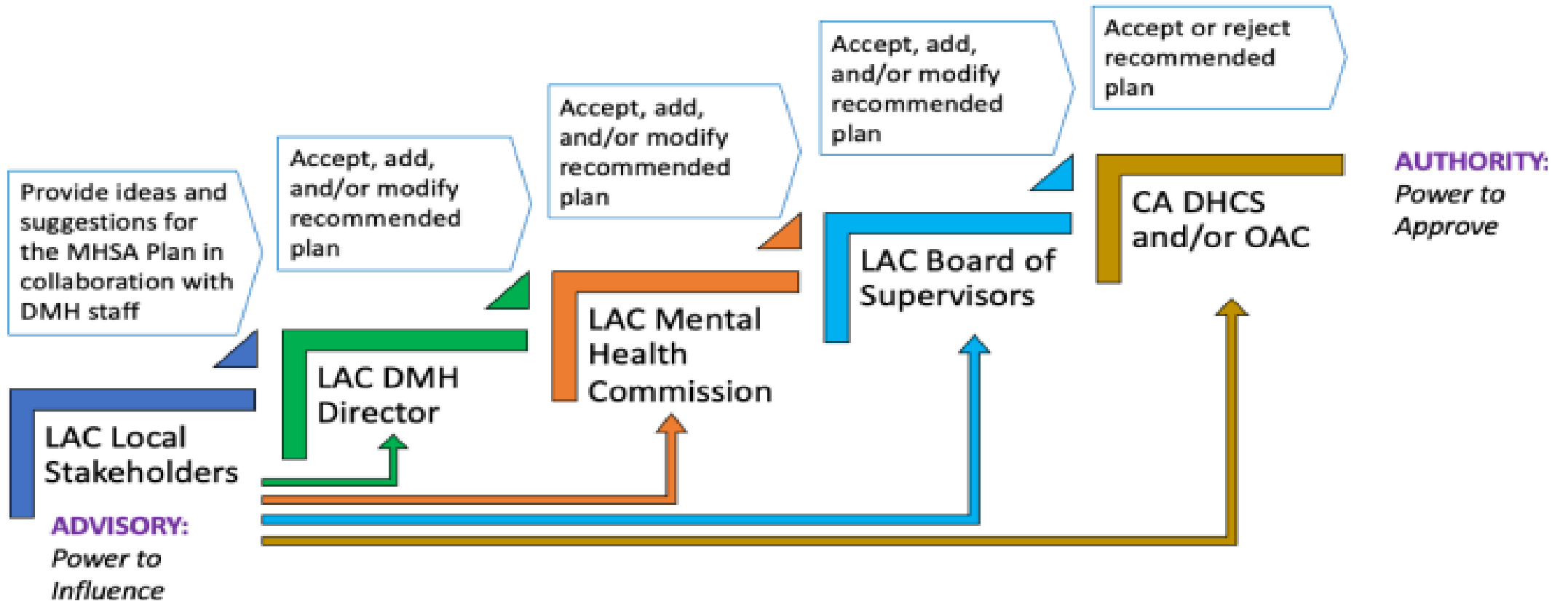
▶▶ Mental Health Services Act Update

MHSA Plan Related Actions and Purpose

Action	Purpose
Three Year Plans	To execute a plan for the development, implementation and evaluation for MHSA funded programs and services over three fiscal years. Programs and services selected to be reflected in each Plan are endorsed by DMH, community stakeholders, including the MH Commission and the Board as addressing DMH/community priorities/needs, Board/legislative mandates, unmet needs to address gaps in service delivery and equity. Next Three Year Plan – FY 24-25
Annual Updates	To engage and update stakeholders, Board and OAC in the 2 nd and 3 rd year of an approved Three -Year Plan on data and implementation status of programs and services included in the Plan and changes that must be made due to mid-year adjustments, needed expansion or priorities. Currently in Annual Update Year FY 23-24
Mid Year Adjustments	To engage stakeholders on immediate adjustments that need to be made to an already approved 3-Year Plan and/or Annual Update due to DMH administrative/budget/operations needs, DMH and/or Board priorities/legislative mandates or unexpected emergent occurrences (e.g. COVID pandemic) and to receive Board and OAC approval of these changes. For the Current Year FY 22-23

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Local MHSA Plan Approval Process



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Next Essential MHSA Actions and Timeline for Planning:

Action	Stakeholder Review and Community Planning Process	30-Day Public Posting	Proposed Public Hearing
Mid Year Adjustment FY 2022-23	12/22/22, 01/20/23	01/20/23 - 02/20/23	Update 2/22/23
Annual Update FY 2023-24	1/20/23, 01/23/23, 01/31/23, 02/17/23, 02/21/23	03/24/23 – 04/24/23	Proposed April 27
3 Year Plan FYs 2024-25 thru 2025-26*	05/2023 thru 01/2024	03/2024 – 04/2024	Proposed April Commission Meeting

** OAC and DHS directed DMH to complete a 2-Year Plan (in lieu of a 3-Year Plan) for FYs 24-25 and 25-26 to realign with State calendar. Previous approved Plan was extended an additional year (4 years) due to COVID pandemic. DMH will submit Annual Update in FY 2025-26 and submit a new 3-Year Plan for FYs 2026-27, 2027-28 and 2028-29*

2022 | 2023

Nov	Dec	Jan	Feb	Mar	Apr	May	June
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- FOCUS 1:**
1. MHSa Mid-Year Adjustment - FY 22-23
 2. MHSa Annual Update - FY 23-24

MHSa Mid-Year Adjustment FY 22-23: Stakeholder Input

MHSa Mid-Year Adjustment: 30-Day Public Comment Period

LAC MHC: Review & Adoption

LAC BOS Review & Adoption

File with State & OAC

MHSa Annual Update FY 23-24: Stakeholder Input

MHSa Annual Update: 30-Day Public Comment Period

LAC MHC: Review & Adoption

LAC BOS Review & Adoption

File with State & OAC

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CLT

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graph TD; CLT((CLT)) --- UCC[Underserved Cultural Communities]; CLT --- SALT[Service Area Leadership Teams];
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Underserved Cultural Communities

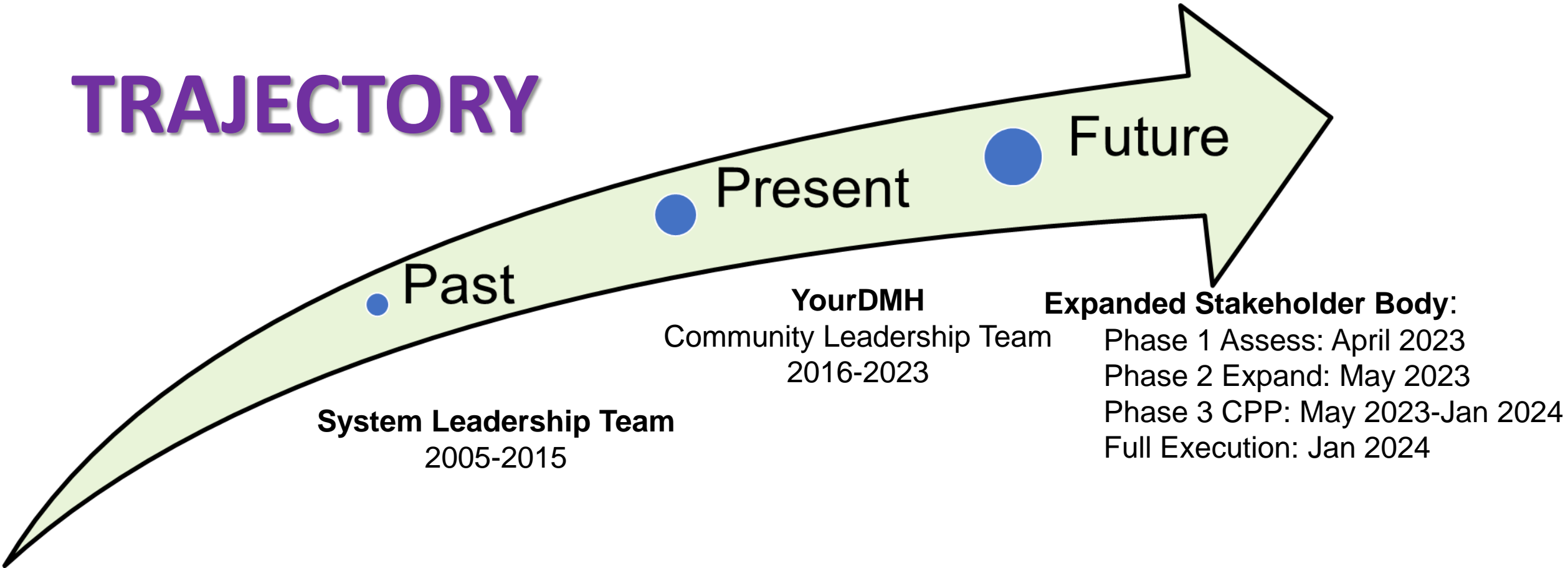
1. ACCESS (Deaf, Hard of Hearing, Blind, and Physical Disabilities)
2. American Indian/Alaska Native (AI/AN)
3. Asian Pacific Islander (API)
4. Black/African Heritage (BAH)
5. Client Coalition
6. Cultural Competency Advisory
7. Eastern European/Middle Eastern (EE/ME)
8. Latino
9. LGBTQIA2-S

Service Area Leadership Teams

1. SALT 1 Co-Chairs
2. SALT 2 Co-Chairs
3. SALT 3 Co-Chairs
4. SALT 4 Co-Chairs
5. SALT 5 Co-Chairs
6. SALT 6 Co-Chairs
7. SALT 7 Co-Chairs
8. SALT 8 Co-Chairs

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TRAJECTORY



Foundation

▶▶ Mental Health Services Act Update

LOCAL MHSA PLANNING CALENDAR

2022 | 2023

2023 | 2024

Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb
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FOCUS 1:

- MHSA Mid-Year Adjustment FY 2022-23
- MHSA Annual Update FY 2023-24

FOCUS 2:

- Three-Year MHSA Program & Expenditure Plan
(10-Month Planning Process: May 2023-February 2024)

►► Midyear Adjustment Projects 12/22/22 and 1/20/23 Stakeholder Meetings

- Office of Diversion and Reentry (ODR)
 - ◁ \$25M CSS
- New Provider: Project Impact
 - ◁ \$2,447,473 CSS \$873,825 PEI
 - ◁ New Grassroots Service Provider for youth and families in SA 6
 - ◁ Funded with PEI and CSS Funds
- INN Proposal Public Posting
 - ◁ Kedren Restorative Care Village - \$109M over 5 years
 - ◁ Interim Housing Multidisciplinary and Assessment Teams - \$128M over 5 years
 - ◁ Peer Support for Care Court - \$12.7M over 5 years

▶▶ Innovations Proposals

Step 1: Stakeholder Discussion and Proposal Development and Posting for Comment

Step 2: Presentation to the MH Commission for Recommendations

Step 3: Secure a date for approval by BOS

Step 4: Submission and presentation to the Mental Health Services Oversight and Accountability Commission for final approval

Projects at Step 1:

Kedren Restorative Care Village - \$109M over 5 years

Presentation to Commission:

Interim Housing Multidisciplinary and Assessment Teams - \$128M over 5 years

Peer Support for Care Court - \$12.7M over 5 years

Interim Housing

▶▶ Multidisciplinary Assessment & Treatment Teams

Overview

The goal of this program is to create new regional, field-based, multidisciplinary teams dedicated to serving people experiencing homelessness (PEH) who are living in interim housing.

The project is designed to address current gaps in behavioral health and physical health services, substance use treatment, support interim housing stability, facilitate transition to permanent housing and prevent a return to homelessness.

This proposal was developed from recommendations established by the Homeless Initiative planning process.

Interim Housing

▶▶ Multidisciplinary Assessment & Treatment Teams

Housing & Homeless Incentive Program (HHIP)

HHIP Top Priorities for Investment through Stakeholder process included:

- Activities of Daily Living Expansion Strategy which will provide funding for:
 - ◁ DHS's physical health nurses that are part of the multidisciplinary teams
 - ◁ Caregiving services in interim housing for people with ADL needs
 - ◁ Enhanced services funding to support health plan members in Adult Residential Facilities and/or Residential Care Facilities for the Elderly

Interim Housing

▶▶ Multidisciplinary Assessment & Treatment Teams

Program Details

- The Interim Housing Multidisciplinary Assessment and Treatment Teams will serve all eight Service Areas in Los Angeles County and will be comprised of staff from DMH, DPH-SAPC and DHS-HFH in an effort to ensure the full spectrum of client needs can be addressed.
- Teams will be assigned to support interim housing sites. The current interim housing inventory in Los Angeles County is approximately 220 sites and 14,376 beds. The additional 11 interim housing sites in the pipeline provide an additional 1,037 beds to support PEH.

Interim Housing

▶▶ Multidisciplinary Assessment & Treatment Teams

The Innovation

The key elements that make this project innovative are:

- ◀ The implementation of dedicated field-based multidisciplinary teams that are specifically outreaching, engaging and providing direct mental health, physical health and substance use services to clients in interim housing at their interim housing location, which is an entirely new service setting. This includes 24/7 crisis response.
- ◀ The partnership with the managed care organizations that will allow the County to leverage private resources from local health plans to support interim housing client needs.

Interim Housing

▶▶ Multidisciplinary Assessment & Treatment Teams

Learning Questions

- By implementing this innovative project, LACDMH intends to learn if having dedicated field-based, multidisciplinary teams serving interim housing sites result in the following:
- Increased access to mental health services and co-occurring SUD services by interim housing residents? - Increased exits to permanent housing?
- Decreased exits to homelessness?

Interim Housing

▶▶ Multidisciplinary Assessment & Treatment Teams

Learning Questions (Continued)

- Interim housing provider staff increasing their knowledge and skills when serving individuals with severe mental illness and feeling more confident in being able to serve this population in their interim housing sites?
- Does on-site and timely access to substance use treatment in interim housing settings reduce the incidence of overdose related fatalities and increase substance use recovery outcomes for Interim Housing residents?

▶▶ Care Court Peer Support

Overview

- The goal of this program is to incorporate Peer Support and advocacy as part of a client centered support team for participants throughout the Care Court Process.
- The ultimate goal of this service is to have peers involved to support individuals and their voluntary participation in mental health services within their own communities to stabilize, heal, and thrive ultimately without the necessity of court updates.

▶▶ Care Court Peer Support

Background

- The implementation of SB1338—the Community Assistance, Recovery, and Empowerment (CARE) Court Program in Los Angeles County allows DMH to lead the county in working with individuals who are struggling to care for themselves and advocate with insight for their own care.
- DMH was ordered by legislation/law to implement the CARE Act/Court. In January 2023, LA County DMH learned it would begin implementation of Care Court in December 2023—a year earlier than mandated by law. The process and options of CARE Court are set by legislation.

▶▶ Care Court Peer Support

Services

Peer Support Team members will be embedded in Care Court multidisciplinary teams to assist with:

- Support prospective care court clients during their court appearances, court related appointments, and other meetings
- Provide transportation and attend appointments with individuals including their health and social appointments, court hearings, or other quality of life activities to aid in the compliance of their mental health care treatment plans
- Participate in community outreach and engagement teams to other stakeholder groups sharing about Care Court programs

▶▶ Care Court Peer Support

Services (continued)

- Engage individuals recently released from jail and/or prison in coordination with other DMH field-based programs to encourage participation in various voluntary services (to avoid Care Court)
- Provide individualized referrals and resources from culturally competent providers for those identifying as members of underserved communities, with military affiliations, and/or conditions which need support to have full and equal access to all services and facilities to meet their needs
- Provide specialized case management for those who have other acute medical concerns and other complex case needs

▶▶ Care Court Peer Support

Innovation & Learning

The Innovation is having peer supporters be active advocates in the planning, implementation, and ongoing treatment teams during Care Court to ensure success in the community.

Anticipated Results of Peer Support:

- ◀ The client rates of voluntary participation with mental health treatment programs will be achieved with less outreach activities and time frames
- ◀ The notable increase in one's level of overall health, functioning, and wellbeing will be achieved in a shorter time frame
- ◀ The longevity of the average length of outpatient treatment will be higher than other non-peer dominant outreach, engagement, and voluntary treatment interventions compared with other clinical settings

Questions?

LAC-DMH MHS Administration and Oversight Division: Feb 2023
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LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.